

SEEC FORM 20

Itemized Campaign Finance Disclosure Statement
CONNECTICUT STATE ELECTIONS ENFORCEMENT COMMISSION
Revised January 2024



Electronic Filing

Do Not Mark in This Space For Official Use Only

Page 1 of 33

COVER PAGE

1. NAME OF COMMITTEE			
Connecticut Majority Team PAC			
2. TREASURER NAME			
First Trenton	MI	Last Kapij	Suffix
3. TREASURER ADDRESS			
Street Address 1800 Silas Deane Hwy Apt 120S	City Rocky Hill	State CT	Zip Code 06067
4. ELECTION/REFERENDUM DATE	5. OFFICE SOUGHT (Complete only if Candidate Committee)		6. DISTRICT NUMBER (if applicable)
7. CANDIDATE NAME (Complete only if Candidate or Exploratory Committee)			
First	MI	Last	Suffix
8. TYPE OF REPORT			
April 10 Filing - Amendment			
9. PERIOD COVERED			
Beginning Date 01/01/2026			
Ending Date 03/31/2026			
thru			
10. CERTIFICATION			
☒ I hereby certify and state, under penalties of false statement, that all of the information set forth on this Itemized Campaign Finance Disclosure Statement for the period covered is true, accurate and complete.			
Electronic Filing SIGNATURE	Trenton Kapij PRINT NAME OF THE SIGNER	07/10/2026 4:12:29PM DATE CERTIFIED	
A Person who is found to have knowingly and willfully violated any provisions of the campaign finance statutes faces a civil penalty or imprisonment or both.			

SEEC FORM 20

Itemized Campaign Finance Disclosure Statement

CONNECTICUT STATE ELECTIONS ENFORCEMENT COMMISSION

Revised January 2024

SUMMARY PAGE TOTALS

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT	
Connecticut Majority Team PAC	April 10 Filing - Amendment	
	COLUMN A This Period	COLUMN B Aggregate
11. Balance on hand January 1 of current year for Ongoing and Party Committees OR Balance on hand from day Committee was formed for all other Committees		\$63,806.38
12. Balance on hand at the beginning of Reporting Period	\$63,806.38	
13. Contributions received from Individuals (Section A and B)	\$5,819.76	\$5,819.76
14. Receipts from Other Committees (Sections C1 and C2)	\$3,250.00	\$3,250.00
15. Other Monetary Receipts (Section D through K)	\$0.00	\$0.00
16a. Total Proceeds from Small Purchases (Section L1 Subpart 1 + Subpart 3)	\$0.00	\$0.00
16b. Per Public Act 11-48, effective January 1,2012 Section L2 removed		
16c. Total Purchases of Advertising - Program Book or Sign (Section L3)	\$2,000.00	\$2,000.00
17. Total Monetary Receipts (add totals for lines 13 through 16c)	\$11,069.76	\$11,069.76
18. Subtotals (add totals in Line 12 + 17 in Column A and in Line 11 + 17 in Column B)	\$74,876.14	\$74,876.14
19. Expenses Paid by Committee (Section P)	\$1,111.23	\$1,111.23
20. Balance on hand at close of Reporting Period (Subtract line 19 from line 18 in both columns)	\$73,764.91	\$73,764.91
21. In-Kind Donations not Considered Contributions Received (Section L4)	\$0.00	\$0.00
22. In-Kind Donations not Considered Contributions - House Party (Section L5)	\$0.00	\$0.00
23. In-Kind Contributions Received (Section M)	\$0.00	\$0.00
24. Refundable Deposit to Telephone Company (Section N)	\$0.00	\$0.00
25. Loan Balance	\$0.00	
25a. + Loans Received (Section D)	\$0.00	\$0.00
25b. + Interest and Penalties on Loan(s)	\$0.00	\$0.00
25c. - Payments on Loan	\$0.00	\$0.00
25d. Total Outstanding Loan Amount	\$0.00	
26. Campaign Expenses Paid By Candidate (Section Q)	\$0.00	\$0.00
27. Expenses Incurred on Committee Credit Card (Section R)	\$0.00	\$0.00
28. Expenses Incurred by Committee During this Period but Not Paid (Section S)	\$0.00	
28a. Total Outstanding Expenses Incurred by Committee still Unpaid (Section S)	\$3,530.24	

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Connecticut Majority Team PAC	April 10 Filing - Amendment

A. Total Contributions from Small Contributors-Received this Period ONLY

(See instructions for definition of Small Contributor)

Subtotal Section A

\$0.00**B. Itemized Contributions from Individuals**

Last Name Gjede		First Name Eric		MI
Residential Street Address 30 Hoffman Ln		City Canton	State CT	Zip Code 06019
Principal Occupation lobbyist		Name of Employer Statehouse Partners, ILC		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	☒ Yes ☐ No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000?		Amount of Contribution
Is this contribution associated with an event reported in Section L1?	☒ Yes ☐ No	If contributor a principal of state contractor or prospective state contractor?		
If yes, list Event #	01062026B	If yes, indicate which branch or branches of government the contract is with:		
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		01/02/2026	\$95.55	\$95.55

Last Name Campion		First Name Brooks		MI
Residential Street Address 42 Macintosh Ln		City Glastonbury	State CT	Zip Code 06033
Principal Occupation lobbyist		Name of Employer Robinson & Cole LLP		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	☒ Yes ☐ No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000?		Amount of Contribution
Is this contribution associated with an event reported in Section L1?	☒ Yes ☐ No	If contributor a principal of state contractor or prospective state contractor?		
If yes, list Event #	01062026B	If yes, indicate which branch or branches of government the contract is with:		
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		01/03/2026	\$95.55	\$95.55

Last Name Cournoyer		First Name Brian		MI
Residential Street Address 33 Mitchel Ter		City Ivoryton	State CT	Zip Code 06442
Principal Occupation lobbyist		Name of Employer Connecticut Hospital Association		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	☒ Yes ☐ No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000?		Amount of Contribution
Is this contribution associated with an event reported in Section L1?	☒ Yes ☐ No	If contributor a principal of state contractor or prospective state contractor?		
If yes, list Event #	01062026B	If yes, indicate which branch or branches of government the contract is with:		
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		01/05/2026	\$95.55	\$95.55

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)

Connecticut Majority Team PAC

TYPE OF REPORT

April 10 Filing - Amendment

B. Itemized Contributions from Individuals

Last Name McCabe		First Name Patrick		MI
Residential Street Address 11 Forest Rd		City West Hartford	State CT	Zip Code 06103
Principal Occupation public affairs		Name of Employer Capitol Strategies Group LLC		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No			Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 01062026B ☒ Yes ☐ No	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No			
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/05/2026	Aggregate Contributions \$95.55	
				\$95.55

Last Name Jordan		First Name Laura		MI
Residential Street Address 43 Girard Ave		City Hartford	State CT	Zip Code 06105
Principal Occupation Government Relations		Name of Employer Stamford Health		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No			Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 01062026B ☒ Yes ☐ No	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No			
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/05/2026	Aggregate Contributions \$95.55	
				\$95.55

Last Name Healy		First Name Christopher		MI
Residential Street Address 27 Dorchester Rd		City Wethersfield	State CT	Zip Code 06109
Principal Occupation Executive Director		Name of Employer Connecticut Catholic Conference		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No			Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 01062026B ☒ Yes ☐ No	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No			
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/05/2026	Aggregate Contributions \$95.55	
				\$95.55

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)

Connecticut Majority Team PAC

TYPE OF REPORT

April 10 Filing - Amendment

B. Itemized Contributions from Individuals

Last Name Corey		First Name Arthur		MI
Residential Street Address 24 Valley View Rd .		City Glastonbury	State CT	Zip Code 06033
Principal Occupation Trade Association Executive		Name of Employer Connecticut Bankers Assoc		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 01062026B ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/05/2026	Aggregate Contributions \$95.55	
				\$95.55

Last Name Mongellow		First Name Thomas		MI S
Residential Street Address 257 Adrian Ave		City Newington	State CT	Zip Code 06111
Principal Occupation Trade Assoc Exec		Name of Employer CT Bankers Association		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 01062026B ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/05/2026	Aggregate Contributions \$95.55	
				\$95.55

Last Name Cappiello		First Name Christine		MI
Residential Street Address 31 Old Farm Hill Rd		City Newtown	State CT	Zip Code 06470
Principal Occupation lobbyist		Name of Employer Anthem BCBS		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 01062026B ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/05/2026	Aggregate Contributions \$95.55	
				\$95.55

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)

Connecticut Majority Team PAC

TYPE OF REPORT

April 10 Filing - Amendment

B. Itemized Contributions from Individuals

Last Name Robinson		First Name Catherine		MI
Residential Street Address 47 Four Mile Rd		City West Hartford	State CT	Zip Code 06107
Principal Occupation lobbyist		Name of Employer Gallo & Robinson LLC		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 01062026B ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☒ Personal Check ☐ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/05/2026	Aggregate Contributions \$50.00	
				\$50.00

Last Name Pryzbysz		First Name Kenneth		MI
Residential Street Address 50 Goodwin Cir		City Hartford	State CT	Zip Code 06105
Principal Occupation Consultant/Lobbyist		Name of Employer Pryzbysz + Associates		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 01062026B ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/06/2026	Aggregate Contributions \$47.00	
				\$47.00

Last Name Kozak		First Name David		MI
Residential Street Address 31 Hunters Rdg		City Rocky Hill	State CT	Zip Code 06067
Principal Occupation government relations		Name of Employer Kozak & Salina LLC		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 01062026B ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/06/2026	Aggregate Contributions \$95.55	
				\$95.55

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)

Connecticut Majority Team PAC

TYPE OF REPORT

April 10 Filing - Amendment

B. Itemized Contributions from Individuals

Last Name Hallisey		First Name Matthew		MI P
Residential Street Address 13 Standliff Rd		City Glastonbury	State CT	Zip Code 06033
Principal Occupation lobbyist		Name of Employer Matthew Hallisey Government Affairs LLC		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 01062026B ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/06/2026	Aggregate Contributions \$95.55	
				\$95.55

Last Name Myers		First Name Peter		MI
Residential Street Address 125 Mountain Rd		City North Granby	State CT	Zip Code 06060
Principal Occupation Lobbyist		Name of Employer CBIA		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 01062026B ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/06/2026	Aggregate Contributions \$47.70	
				\$47.70

Last Name Hughes		First Name Josh		MI
Residential Street Address 34 Lexington Rd		City West Hartford	State CT	Zip Code 06119
Principal Occupation Lobbyist		Name of Employer Capitol Consulting		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 01062026B ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/06/2026	Aggregate Contributions \$95.55	
				\$95.55

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)

Connecticut Majority Team PAC

TYPE OF REPORT

April 10 Filing - Amendment

B. Itemized Contributions from Individuals

Last Name Gemski		First Name Elizabeth		MI
Residential Street Address 5 Farmstead Ln		City Farmington	State CT	Zip Code 06032
Principal Occupation lobbyist		Name of Employer Kozak & Salina		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 01062026B ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/06/2026	Aggregate Contributions \$95.55	
				\$95.55

Last Name Paolino		First Name Armando		MI P
Residential Street Address 290 King St		City Middlebury	State CT	Zip Code 06762
Principal Occupation lobbyist		Name of Employer Paolino Public Affairs Consulting, Inc		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 01062026B ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/06/2026	Aggregate Contributions \$95.55	
				\$95.55

Last Name Christ		First Name Michael		MI
Residential Street Address 23 Briarwood Rd		City West Hartford	State CT	Zip Code 06107
Principal Occupation Government Affairs		Name of Employer United Health Group		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 01062026B ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/06/2026	Aggregate Contributions \$95.55	
				\$95.55

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)

Connecticut Majority Team PAC

TYPE OF REPORT

April 10 Filing - Amendment

B. Itemized Contributions from Individuals

Last Name Ginis		First Name Alexander		MI
Residential Street Address 168 Westland Ave		City West Hartford	State CT	Zip Code 06107
Principal Occupation Lobbyist		Name of Employer Reynolds Strategy Group		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 01062026B ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/06/2026	Aggregate Contributions \$95.55	
				\$95.55

Last Name Tobin		First Name Ryan		MI
Residential Street Address 313 Boston Post Rd		City East Lyme	State CT	Zip Code 06333
Principal Occupation Associate Lobbyist		Name of Employer TCORS Capitol Group, LLC		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 01062026B ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/06/2026	Aggregate Contributions \$27.58	
				\$27.58

Last Name Malone		First Name Jude		MI
Residential Street Address 200 River Rd		City Mystic	State CT	Zip Code 06355
Principal Occupation Government Relations		Name of Employer CT Beer Wholesalers Assoc		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 01062026B ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/06/2026	Aggregate Contributions \$95.55	
				\$95.55

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)

Connecticut Majority Team PAC

TYPE OF REPORT

April 10 Filing - Amendment

B. Itemized Contributions from Individuals

Last Name Buckley		First Name Karen-Marie		MI
Residential Street Address 25 Christian's Xing		City Durham	State CT	Zip Code 06422
Principal Occupation Lobbyist		Name of Employer CT Hospital Assn		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 01062026B ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☒ Executive ☐ Legislative		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/06/2026	Aggregate Contributions \$95.55	
				\$95.55

Last Name Harkins		First Name John		MI A
Residential Street Address 7365 Main St		City Stratford	State CT	Zip Code 06614
Principal Occupation lobbyist		Name of Employer Rome, Smith & Lutz Government Relations		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 01062026B ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/06/2026	Aggregate Contributions \$95.55	
				\$95.55

Last Name Pryzbysz		First Name Kenneth		MI
Residential Street Address 50 Goodwin Cir		City Hartford	State CT	Zip Code 06105
Principal Occupation Consultant/Lobbyist		Name of Employer Pryzbysz + Associates		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 01062026B ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/06/2026	Aggregate Contributions \$142.55	
				\$95.55

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)

Connecticut Majority Team PAC

TYPE OF REPORT

April 10 Filing - Amendment

B. Itemized Contributions from Individuals

Last Name Halpin		First Name Susan		MI
Residential Street Address 249 Forest Ln		City Glastonbury	State CT	Zip Code 06033
Principal Occupation lobbyist		Name of Employer CT-CRG of Robinson Cole		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 01062026B ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/06/2026	Aggregate Contributions \$95.55	
				\$95.55

Last Name May		First Name Hillary		MI
Residential Street Address 24 Center St		City Wethersfield	State CT	Zip Code 06109
Principal Occupation Lobbyist		Name of Employer CTGRG of Robinson and Cole		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 01062026B ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/06/2026	Aggregate Contributions \$95.55	
				\$95.55

Last Name Grasso		First Name Jenna		MI
Residential Street Address 489 Clintonville Rd		City North Haven	State CT	Zip Code 06473
Principal Occupation Lobbyist		Name of Employer CBIA		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 01062026B ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/06/2026	Aggregate Contributions \$27.58	
				\$27.58

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)

Connecticut Majority Team PAC

TYPE OF REPORT

April 10 Filing - Amendment

B. Itemized Contributions from Individuals

Last Name Conway		First Name Richard		MI F
Residential Street Address 80 Blue Ridge Rd		City Berlin	State CT	Zip Code 06037
Principal Occupation lobbyist		Name of Employer Gaffney, Bennett & Assocs		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No			Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>01062026B</u> ☒ Yes ☐ No	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No			
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/06/2026	Aggregate Contributions \$95.55	
				\$95.55

Last Name Cappiello		First Name David		MI
Residential Street Address 31 Old Farm Hill Rd		City Newtown	State CT	Zip Code 06470
Principal Occupation government relations		Name of Employer Capitol Hill Group		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No			Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>01062026B</u> ☒ Yes ☐ No	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No			
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/06/2026	Aggregate Contributions \$95.55	
				\$95.55

Last Name Vandehoef		First Name Chris		MI
Residential Street Address 17 Lincoln Ave		City West Hartford	State CT	Zip Code 06117
Principal Occupation lobbyist		Name of Employer Penn Lincoln Strategies, LLC		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No			Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>01062026B</u> ☒ Yes ☐ No	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No			
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/06/2026	Aggregate Contributions \$95.55	
				\$95.55

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)

Connecticut Majority Team PAC

TYPE OF REPORT

April 10 Filing - Amendment

B. Itemized Contributions from Individuals

Last Name Tomassetti		First Name Nicole		MI
Residential Street Address 676 Bolton Rd		City Vernon	State CT	Zip Code 06066
Principal Occupation Lobbyist		Name of Employer Capitol Strategies Group, LLC		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No			Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 01062026B ☒ Yes ☐ No	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No			
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/06/2026	Aggregate Contributions \$95.55	
				\$95.55

Last Name Shea		First Name Timothy		MI
Residential Street Address 9 Hatheway Rd		City Ellington	State CT	Zip Code 06029
Principal Occupation lobbyist		Name of Employer Brown Rudnick		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No			Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 01062026B ☒ Yes ☐ No	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No			
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/06/2026	Aggregate Contributions \$95.55	
				\$95.55

Last Name Malcynsky		First Name Jay		MI F
Residential Street Address 25 Parkers Point Rd		City Chester	State CT	Zip Code 06412
Principal Occupation lobbyist/attorney		Name of Employer Gaffney Bennett		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No			Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 01062026B ☒ Yes ☐ No	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No			
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/06/2026	Aggregate Contributions \$95.55	
				\$95.55

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)

Connecticut Majority Team PAC

TYPE OF REPORT

April 10 Filing - Amendment

B. Itemized Contributions from Individuals

Last Name Flaherty		First Name Melanie		MI
Residential Street Address 21 Neill Dr		City Watertown	State CT	Zip Code 06795
Principal Occupation Lobbyist		Name of Employer CT Government Relations Group of Robinson+Cole		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 01062026B ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/06/2026	Aggregate Contributions \$95.55	
				\$95.55

Last Name Bingham		First Name Ryan		MI J
Residential Street Address 20 Spencer Brook Rd		City New Hartford	State CT	Zip Code 06057
Principal Occupation lobbyist		Name of Employer Sullivan and Leshane		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 01062026B ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/06/2026	Aggregate Contributions \$95.55	
				\$95.55

Last Name Persico		First Name Tracy		MI J
Residential Street Address 390 Narrow Ln		City Orange	State CT	Zip Code 06477
Principal Occupation lobbyist		Name of Employer Brown Rudnick		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 01062026B ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/06/2026	Aggregate Contributions \$95.55	
				\$95.55

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)

Connecticut Majority Team PAC

TYPE OF REPORT

April 10 Filing - Amendment

B. Itemized Contributions from Individuals

Last Name Aloe Sobin		First Name Linda		MI
Residential Street Address 16 Straddle Hl		City Wethersfield	State CT	Zip Code 06109
Principal Occupation lobbyist		Name of Employer Linda Aloe Sobin Government Relations		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 01062026B ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/06/2026	Aggregate Contributions \$95.55	
				\$95.55

Last Name Wilde Lane		First Name Melanie		MI
Residential Street Address 53 Oak St		City Hartford	State CT	Zip Code 06106
Principal Occupation Executive Director		Name of Employer The CT Association of School Based Health Centers		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 01062026B ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/06/2026	Aggregate Contributions \$47.00	
				\$47.00

Last Name Brakeman		First Name Beverley		MI
Residential Street Address 124 Edgemere Ave		City West Hartford	State CT	Zip Code 06107
Principal Occupation Lobbyist		Name of Employer Beverley Brakeman		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 01062026B ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/06/2026	Aggregate Contributions \$47.00	
				\$47.00

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)

Connecticut Majority Team PAC

TYPE OF REPORT

April 10 Filing - Amendment

B. Itemized Contributions from Individuals

Last Name Smith		First Name Christopher		MI
Residential Street Address 606 Cortland Cir		City Cheshire	State CT	Zip Code 06410
Principal Occupation lobbyist		Name of Employer Rome, Smith, and Lutz		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>01062026B</u> ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/07/2026	Aggregate Contributions \$95.55	
				\$95.55

Last Name Sweeney		First Name Liam		MI
Residential Street Address 29 Penn Dr		City West Hartford	State CT	Zip Code 06119
Principal Occupation Lobbyist		Name of Employer Penn Lincoln Strategies		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>01062026B</u> ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/07/2026	Aggregate Contributions \$95.55	
				\$95.55

Last Name Sandford		First Name Nicole		MI
Residential Street Address 79 Sherwood Rd		City Stamford	State CT	Zip Code 06905
Principal Occupation Owner/Operator		Name of Employer Pinots Pamette Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>01062026B</u> ☐ Yes ☒ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/13/2026	Aggregate Contributions \$241.20	
				\$241.20

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)

Connecticut Majority Team PAC

TYPE OF REPORT

April 10 Filing - Amendment

B. Itemized Contributions from Individuals

Last Name Earley		First Name Rob		MI	
Residential Street Address 26 Manitous Mountain Rd		City Avon		State CT	Zip Code 06001
Principal Occupation lobbyist		Name of Employer Comcast			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No			Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 01062026B ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No			
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/18/2026	Aggregate Contributions \$95.55		
				\$95.55	

Last Name Mandel		First Name Stephen		MI	
Residential Street Address 20 Bobolink Ln		City Greenwich		State CT	Zip Code 06830
Principal Occupation Founder		Name of Employer Lone Pine Capital			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No			Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ Yes ☒ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No			
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 01/27/2026	Aggregate Contributions \$1,940.45		
				\$1,940.45	

Last Name Hillary		First Name Glass		MI	
Residential Street Address 168 Hendley St		City Middletown		State CT	Zip Code 06457
Principal Occupation Lobbyist		Name of Employer RSG			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No			Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ Yes ☒ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No			
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 02/03/2026	Aggregate Contributions \$95.55		
				\$95.55	

Total of Section B					\$5,819.76
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Total on Line 13 of Summary Page)					\$5,819.76

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Connecticut Majority Team PAC	April 10 Filing - Amendment

C1. Contributions from Other Committees

Name of Committee Connecticut State Employees Assoc Pac				Name of Treasurer David Glidden	
Address 760 Capitol Ave		Is this contribution associated with an event reported in Section L1? ☒ Yes ☐ No		Amount of Contribution	
		If yes, list Event # 01062026B			
City Hartford	State CT	Zip Code 06106	Date Received 01/02/2026	Aggregate Contributions \$250.00	\$250.00

Name of Committee AT & T Connecticut Employees PAC				Name of Treasurer Dianne M Romans	
Address 84 Deerfield Ln Rm 1B2		Is this contribution associated with an event reported in Section L1? ☒ Yes ☐ No		Amount of Contribution	
		If yes, list Event # 01062026B			
City Meriden	State CT	Zip Code 06450	Date Received 01/05/2026	Aggregate Contributions \$1,000.00	\$1,000.00

Name of Committee Connecticut Education Assn INC				Name of Treasurer Carolyn McElravy	
Address 21 Oak St Ste 500		Is this contribution associated with an event reported in Section L1? ☒ Yes ☐ No		Amount of Contribution	
		If yes, list Event # 01062026B			
City Hartford	State CT	Zip Code 06106	Date Received 01/06/2026	Aggregate Contributions \$1,000.00	\$1,000.00

Name of Committee AFSCME Council 4 OPC				Name of Treasurer Jody Barr	
Address 444 E Main St		Is this contribution associated with an event reported in Section L1? ☒ Yes ☐ No		Amount of Contribution	
		If yes, list Event # 01062026B			
City New Britain	State CT	Zip Code 06051	Date Received 01/30/2026	Aggregate Contributions \$1,000.00	\$1,000.00

Total of Section C1					\$3,250.00
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I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	TYPE OF REPORT
Connecticut Majority Team PAC	April 10 Filing - Amendment

C2. Reimbursements or Surplus Distributions from other Committees

Name of Committee			Name of Treasurer		
Address			Date Received		Amount of Receipt
City	State	Zip Code	Payment Type Reimbursement for shared expense Surplus Distribution		
Expenditure # (if applicable)	Description				
Total of Section C2					

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Connecticut Majority Team PAC	April 10 Filing - Amendment

D. Loans Received this Period

Name of Lender		Source of Loan: Bank Candidate Individual Other				Date of Receipt
Street Address		City	State	Zip Code	Is there a cosigner or Guarantor of this loan? Yes No	
Name of Cosigner/Guarantor (if applicable)					Amount Received	
Street Address		City	State	Zip Code		
Total of Section D						

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	TYPE OF REPORT
Connecticut Majority Team PAC	April 10 Filing - Amendment

E. Receipts from Entities other than Individuals or Other Committees (*Referendum Committees ONLY*)

Name of Entity			
Street Address		Date Received	Amount Received
City	State	Zip Code	
Total of Section E			

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Connecticut Majority Team PAC	April 10 Filing - Amendment

F. Amount Transferred from Affiliated Business Treasury (*Business Entity Committees ONLY*)

Date of Receipt	Is this transaction associated with an event reported in Section L1?	Yes	No	If yes, list Event #	Amount
Total of Section F					

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	TYPE OF REPORT
Connecticut Majority Team PAC	April 10 Filing - Amendment

G. Amount Transferred from Affiliated Labor Union or Other Organization Treasury (*Organization Committees ONLY*)

Date of Receipt	Amount
Total of Section G	

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	TYPE OF REPORT
Connecticut Majority Team PAC	April 10 Filing - Amendment

H. Personal Funds of the Candidate Received this Period (Candidate Committees ONLY)

Date of Receipt	Method of Payment	Amount
	Cash Personal Check Credit/Debit Card	
Total of Section H		

I. Monetary Receipts (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Connecticut Majority Team PAC	April 10 Filing - Amendment

J. Interest from Deposits in Authorized Accounts

Name of Institution	Date Received	Amount
Street Address	City	State Zip Code
Total of Section J		

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	TYPE OF REPORT
Connecticut Majority Team PAC	April 10 Filing - Amendment

K. Miscellaneous Monetary Receipts not Considered Contributions

Name	Date of Transaction	Amount Received
Street Address	City	State Zip Code
Description		
Total of Section K		

II. EVENT ACTIVITY (Sections L1 - L5)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Connecticut Majority Team PAC	April 10 Filing - Amendment

L1. Event Information

Event # Date of Event	Letter	Description	Was this a fundraising event?	
			Yes	No
Location: Street Address		City	State	Zip Code
<i>Subpart 1: (All Committees)</i>				
Was this event hosted at a personal residence?		Yes No	<i>(If yes, go to Section L5 In-Kind Donations not Considered Contributions Associated with a House Party and complete required information for any purchases made by host(s) for food, beverage and invitations.)</i>	
Did this fundraiser include goods or services donated by a business entity of up to \$200 or items donated by an individual of up to \$100?		Yes No	<i>(If yes, go to Section L4 In-Kind Donations not Considered Contributions and complete required information.)</i>	
Was this fundraiser a tag sale, auction, or other sale of donated items with purchases from an individual of up to \$100?		Yes No	<i>(If yes, enter Total Receipts here.)</i>	
<i>Subpart 2: (Party Committees, Municipal Candidates and Political Committees other than Exploratory Committees)</i>				
Were there purchases of advertising space in a program book or on a sign associated with this fundraiser?		Yes No	<i>(If yes, go to Section L3 Purchases of Advertising Space in a Program Book or on a Sign and complete required information.)</i>	
<i>Subpart 3: (Town Committees ONLY)</i>				
Did your committee sell food or beverage at a fair or similar mass gathering held within the state with this fundraiser?		Yes No	<i>(If yes, enter Total Receipts here.)</i>	
Total of Section L1				

II. EVENT ACTIVITY (Sections L1 - L5)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Connecticut Majority Team PAC	April 10 Filing - Amendment

L3. Purchases of Advertising in a Program Book or on a Sign

Name of Purchaser Robinson & Cole LLP			Purchase Made By: ☒ Business Entity ☐ Other ☐ Individual/Sole Proprietorship	
Street Address 1 State St		City Hartford	State CT	Zip Code 06103-3102
Date Received 01/02/2026	Event # 01062026B	Aggregate Purchases for All Events \$250.00	Amount of Program Ad Purchase \$250.00	Amount of Sign Purchase

Name of Purchaser Sullivan and Leshane, Inc.			Purchase Made By: ☒ Business Entity ☐ Other ☐ Individual/Sole Proprietorship	
Street Address 287 Capitol Ave		City Hartford	State CT	Zip Code 06106
Date Received 01/05/2026	Event # 01062026B	Aggregate Purchases for All Events \$250.00	Amount of Program Ad Purchase \$250.00	Amount of Sign Purchase

Name of Purchaser Gaffney, Bennett & Associates, Inc			Purchase Made By: ☒ Business Entity ☐ Other ☐ Individual/Sole Proprietorship	
Street Address 1 Liberty Sq Ste 201		City New Britain	State CT	Zip Code 06051
Date Received 01/06/2026	Event # 01062026B	Aggregate Purchases for All Events \$250.00	Amount of Program Ad Purchase \$250.00	Amount of Sign Purchase

Name of Purchaser CT Association of Health Plans			Purchase Made By: ☒ Business Entity ☐ Other ☐ Individual/Sole Proprietorship	
Street Address 280 Trumbull St		City Hartford	State CT	Zip Code 06103
Date Received 01/06/2026	Event # 01062026B	Aggregate Purchases for All Events \$250.00	Amount of Program Ad Purchase \$250.00	Amount of Sign Purchase

II. EVENT ACTIVITY (Sections L1 - L5)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Connecticut Majority Team PAC	April 10 Filing - Amendment

L3. Purchases of Advertising in a Program Book or on a Sign

Name of Purchaser Mohegan Tribe of Indians Connecticut			Purchase Made By: ☒ Business Entity ☐ Other ☐ Individual/Sole Proprietorship	
Street Address 13 Crow Hill Rd		City Uncasville	State CT	Zip Code 06382
Date Received 01/06/2026	Event # 01062026B	Aggregate Purchases for All Events \$250.00	Amount of Program Ad Purchase \$250.00	Amount of Sign Purchase

Name of Purchaser DePino, Nunez & Biggs LLC			Purchase Made By: ☒ Business Entity ☐ Other ☐ Individual/Sole Proprietorship	
Street Address PO Box 9137		City New Haven	State CT	Zip Code 06532
Date Received 01/06/2026	Event # 01062026B	Aggregate Purchases for All Events \$250.00	Amount of Program Ad Purchase \$250.00	Amount of Sign Purchase

Name of Purchaser Connecticut Business & Industry Association			Purchase Made By: ☒ Business Entity ☐ Other ☐ Individual/Sole Proprietorship	
Street Address 350 Church St		City Hartford	State CT	Zip Code 06103
Date Received 01/08/2026	Event # 01062026B	Aggregate Purchases for All Events \$250.00	Amount of Program Ad Purchase \$250.00	Amount of Sign Purchase

Name of Purchaser Mashantucket Pequot Gaming Enterprise			Purchase Made By: ☒ Business Entity ☐ Other ☐ Individual/Sole Proprietorship	
Street Address 350 Trolley Lane Blvd		City Mashantucket	State CT	Zip Code 06338
Date Received 01/08/2026	Event # 01062026B	Aggregate Purchases for All Events \$0.00	Amount of Program Ad Purchase \$250.00	Amount of Sign Purchase

II. EVENT ACTIVITY (Sections L1 - L5)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Connecticut Majority Team PAC	April 10 Filing - Amendment

L3. Purchases of Advertising in a Program Book or on a Sign

Name of Purchaser Levin, Paolino & Christ Government Relation Consu				Purchase Made By: ☒ Business Entity ☐ Other ☐ Individual/Sole Proprietorship	
Street Address 290 King St			City Middlebury		State CT
			Zip Code 06762		
Date Received 01/09/2026	Event # 01062026B	Aggregate Purchases for All Events \$250.00	Amount of Program Ad Purchase \$250.00	Amount of Sign Purchase	
Total of Section L3					\$2,000.00

II. EVENT ACTIVITY (Sections L1 - L5)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Connecticut Majority Team PAC	April 10 Filing - Amendment

L4. In-Kind Donations Not Considered Contributions

Name of the Donor					
Street Address			City		State
					Zip Code
Donation Given by:	Description of Donation				Fair Market Value of Donation
Business Entity					
Individual	Date Received	Event #	Aggregate value for this event		
Sole Proprietorship					
Total of Section L4					

II.EVENT ACTIVITY (Sections L1 - L5)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Connecticut Majority Team PAC	April 10 Filing - Amendment

L5. In-Kind Donations Not Considered Contributions Associated with a House Party

Name of the Host		Is this event supporting more than one candidate or committee?	
		Yes	No
		If yes, complete Itemization in Addendum L5	
Street Address	City	State	Zip Code
Description of Donation			Fair Market Value of Donation
Event #	Aggregate value of this Event - all hosts	Aggregate value of all Events - this host/candidate	

Total of Section L5**III. NONMONETARY RECEIPTS (Sections M - O)**

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Connecticut Majority Team PAC	April 10 Filing - Amendment

M. In-Kind Contributions

Name			
Street Address		City	State
			Zip Code
Type of Contributor:	Date Received	Aggregate contributions	Description of In-Kind Contribution
Committee			
Individual / Sole Proprietorship	Other		
Is Contributor a lobbyist, spouse, or dependent child of a lobbyist?	Yes No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5000?	Yes No
Is this contribution associated with an event reported in Section L1?	Yes No	Is contributor a principal of state contractor or prospective state contractor?	Yes No
If yes, list Event#		If yes, indicate which branch or branches of government the contract is with:	Executive Legislative
		Fair Market Value of this Contribution	

Total of Section M

III. Non Monetary Receipts (Sections M - O)

NAME OF COMMITTEE	TYPE OF REPORT
Connecticut Majority Team PAC	April 10 Filing - Amendment

N. Refundable Deposit to Telephone Company

Last Name of Individual		First Name		MI	Date Deposit Made
Residential Street Address		City	State	Zip Code	Amount of Deposit
Name of Telephone company					
Street Address		City	State	Zip Code	

Total of Section N

IV. EXPENDITURES (Sections P - T)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)

TYPE OF REPORT

Connecticut Majority Team PAC

April 10 Filing - Amendment

P. Expenses Paid By Committee

Name of Payee Zoe Gluck		Date of Payment 01/14/2026	Method of Payment ☒ Check # 2115 ☐ Debit Card ☐ EFT	
Street Address 337 Alden Ave Apt 7		City New Haven	State CT	Zip Code 06515
Purpose of Expenditure (by code) RMB	Description Reimbursement for Zoom License			Event #
Expenditure # (if applicable)	Type of Expenditure (Itemization in Addendum P Required unless "None of the below" is checked) ☒ None of the below ☐ Coordinated with reimbursement sought (joint expenditure) ☐ Independent ☐ Coordinated without reimbursement sought (in-kind contribution) ☐ Organization ☐ A ☐ B ☐ C ☐ D			Amount \$18.07
Name of Payee Leyra Adorno		Date of Payment 01/15/2026	Method of Payment ☒ Check # 2116 ☐ Debit Card ☐ EFT	
Street Address 64 Ruby Dr Apt B		City Manchester	State CT	Zip Code 06040
Purpose of Expenditure (by code) WAGE	Description			Event #
Expenditure # (if applicable) 615326	Type of Expenditure (Itemization in Addendum P Required unless "None of the below" is checked) ☐ None of the below ☐ Coordinated with reimbursement sought (joint expenditure) ☐ Independent ☐ Coordinated without reimbursement sought (in-kind contribution) ☒ Organization ☐ A ☐ B ☐ C ☒ D			Amount \$599.00
Name of Payee Tim Bergin		Date of Payment 01/15/2026	Method of Payment ☒ Check # 2117 ☐ Debit Card ☐ EFT	
Street Address 29 Doane St		City Manchester	State CT	Zip Code 06042
Purpose of Expenditure (by code) RMB	Description Reimbursement for resources used on Sanchez and Pemberton Campaigns			Event #
Expenditure # (if applicable) 615328	Type of Expenditure (Itemization in Addendum P Required unless "None of the below" is checked) ☐ None of the below ☐ Coordinated with reimbursement sought (joint expenditure) ☐ Independent ☐ Coordinated without reimbursement sought (in-kind contribution) ☒ Organization ☐ A ☐ B ☐ C ☒ D			Amount \$494.16
Total of Section P				\$1,111.23

IV. EXPENDITURES (Sections P - T)			
NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)			TYPE OF REPORT
			April 10 Filing - Amendment
Q. Campaign Expenses Paid By Candidate			
Name of Payee (Name of vendor, Person or Entity who candidate paid directly)		Date of Payment	Is Reimbursement Claimed? Yes No
Street Address	City		State Zip Code
Purpose of Expenditure (by code)	Description	Event #	Amount
Total of Section Q			

IV. EXPENDITURES			
NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)			TYPE OF REPORT
Connecticut Majority Team PAC			April 10 Filing - Amendment
R. Expenses Incurred on Committee Credit Card			
Name of Issuing Institution		Type of Credit Card: Visa Master Card Discover American Express Other	
Name of Vendor, Person or Entity			Date of Transaction
Street Address	City		State Zip Code
Purpose of Expenditure (by code)	Description		Event #
Expenditure # (if applicable)	Type of Expenditure (Itemization in Addendum R Required unless "None of the below" is checked) None of the below Coordinated with reimbursement sought (joint expenditure) Coordinated without reimbursement sought (in-kind contribution) Independent Organization A B C D		Amount
Total of Section R			

IV. EXPENDITURES

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)			TYPE OF REPORT	
Connecticut Majority Team PAC			April 10 Filing - Amendment	
S. Expenses Incurred By Committee but Not Paid During this Period				
Name of Creditor			Date Incurred	
Street Address		City	State	Zip Code
Purpose of Expenditure (by code)	Description			Event #
Expenditure# (if applicable)	Type of Expenditure (Itemization in Addendum S Required unless "None of the below" is checked) None of the below Coordinated with reimbursement sought (joint expenditure) Independent Coordinated without reimbursement sought (in-kind contribution) Organization : A B C D			Amount Incurred (Estimate or Actual)
Total of Section S				

IV. EXPENDITURES (Sections P - T)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)			TYPE OF REPORT	
Connecticut Majority Team PAC			April 10 Filing - Amendment	
T. Itemization of Reimbursements and Secondary Payees				
Last Name of Worker/Consultant		First	MI	Date of Payment to Vendor, Person or Entity
Name of Vendor, Person or Entity Paid by Committee Worker/Consultant		Payment to Reimburse Committee Worker/Consultant as reported in Section P Check # Debit Card EFT		
Street Address of Vendor, Person or Entity Paid by Committee Worker/Consultant		City	State	Zip Code
Purpose of Expenditure (by code)	Description			Event #
Expenditure #	Type of Expenditure (Itemization in Addendum T Required unless "None of the below" is checked) None of the below Coordinated with reimbursement sought (joint expenditure) Independent Coordinated without reimbursement sought (in-kind contribution) Organization: A B C D			Amount
Total of Section T				

Section L5. ADDENDUM

NAME OF COMMITTEE

TYPE OF REPORT

L5. In - Kind Donations Not Considered Contribution Associated with a House Party - Addendum

Event #

Name of Candidate or Committee

Section P. ADDENDUM

NAME OF COMMITTEE

TYPE OF REPORT

Connecticut Majority Team PAC

April 10 Filing - Amendment

P. Expenses Paid By Committee - Addendum

Expenditure #

615326



Supported



Opposed

Amount of Expenditure

\$599.00

Name of Candidate or Committee

Iris N Sanchez

Office Sought (if applicable)

State Representative

Cost Allocated to Candidate or Committee

\$359.00

Are Limits Aggregated?



Yes



No

Aggregating Committees

House Democrats Campaign Committee

House Majority Committee

Name of Candidate or Committee

Larry L I Pemberton Jr

Office Sought (if applicable)

State Representative

Cost Allocated to Candidate or Committee

\$240.00

Are Limits Aggregated?



Yes



No

Aggregating Committees

House Democrats Campaign Committee

House Majority Committee

Expenditure #

615328



Supported



Opposed

Amount of Expenditure

\$494.16

Name of Candidate or Committee

Larry L I Pemberton Jr

Office Sought (if applicable)

State Representative

Cost Allocated to Candidate or Committee

\$390.12

Are Limits Aggregated?



Yes



No

Aggregating Committees

House Democrats Campaign Committee

House Majority Committee

Name of Candidate or Committee

Iris N Sanchez

Office Sought (if applicable)

State Representative

Cost Allocated to Candidate or Committee

\$104.04

Are Limits Aggregated?



Yes



No

Aggregating Committees

House Democrats Campaign Committee

House Majority Committee

Section R. ADDENDUM

NAME OF COMMITTEE		TYPE OF REPORT	
R. Expenses Incurred on Committee Credit Card - Addendum			
Expenditure #	Supported	Opposed	Amount of Expenditure
Name of Candidate or Committee	Office Sought (if applicable)	Cost Allocated to Candidate or Committee	

Section S. ADDENDUM

NAME OF COMMITTEE		TYPE OF REPORT	
S. Expenses Incurred by Committee but Not Paid During this Period - Addendum			
Expenditure #	Supported	Opposed	Amount of Expenditure
Name of Candidate or Committee	Office Sought (if applicable)	Cost Allocated to Candidate or Committee	

Section T. ADDENDUM

NAME OF COMMITTEE		TYPE OF REPORT	
T. Itemization of Reimbursements and Secondary Payees - Addendum			
Expenditure #	Supported	Opposed	Amount of Expenditure
Name of Candidate or Committee	Office Sought (if applicable)	Cost Allocated to Candidate or Committee	