

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

COVER PAGE

1. NAME OF COMMITTEE			
Iron Pac 15			
2. TREASURER NAME			
First Bret	MI T	Last Wells	Suffix
3. TREASURER ADDRESS			
Street Address 350 Old Post Rd	City Tolland	State CT	Zip Code 06084-3308
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			
July 10 Filing - Original			
9. PERIOD COVERED			
Beginning Date Ending Date			
04/01/2026 thru 06/30/2026			
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	Bret Wells PRINT NAME OF THE SIGNER	07/09/2026 12:57:04PM 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	
Iron Pac 15	July 10 Filing - Original	
	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		\$30,105.28
12. Balance on hand at the beginning of Reporting Period	\$35,037.29	
13. Contributions received from Individuals (Section A and B)	\$4,340.23	\$9,272.24
14. Receipts from Other Committees (Sections C1 and C2)	\$0.00	\$0.00
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)	\$0.00	\$0.00
17. Total Monetary Receipts (add totals for lines 13 through 16c)	\$4,340.23	\$9,272.24
18. Subtotals (add totals in Line 12 + 17 in Column A and in Line 11 + 17 in Column B)	\$39,377.52	\$39,377.52
19. Expenses Paid by Committee (Section P)	\$0.00	\$0.00
20. Balance on hand at close of Reporting Period (Subtract line 19 from line 18 in both columns)	\$39,377.52	\$39,377.52
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)	\$0.00	

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Iron Pac 15	July 10 Filing - Original

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

(See instructions for definition of Small Contributor)

Subtotal Section A

\$2,354.63**B. Itemized Contributions from Individuals**

Last Name Leydon		First Name Patrick		MI A
Residential Street Address 49 Locust St .		City Hartford	State CT	Zip Code
Principal Occupation		Name of Employer		
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
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
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		06/30/2026	\$50.20	
			\$29.90	

Last Name Lewis		First Name Tyler		MI R
Residential Street Address 49 Locust St .		City Hartford	State CT	Zip Code 06106
Principal Occupation		Name of Employer		
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
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
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		06/30/2026	\$53.05	
			\$21.20	

Last Name Lewandowski		First Name Daved		MI
Residential Street Address 49 Locust St .		City Hartford	State CT	Zip Code
Principal Occupation		Name of Employer		
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
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
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		06/30/2026	\$50.15	
			\$25.25	

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Iron Pac 15	July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Bernier		First Name Ryan		MI J
Residential Street Address 90 Gregory Rd		City Bristol	State CT	Zip Code 06010
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		06/30/2026	\$81.19	\$29.93

Last Name Bennett		First Name Mollissa		MI
Residential Street Address 49 Locust St .		City Hartford	State CT	Zip Code
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		06/30/2026	\$41.88	\$9.00

Last Name Barrett		First Name David		MI C
Residential Street Address 74 Pegasus Dr		City Groton	State CT	Zip Code 06340
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		06/30/2026	\$55.26	\$24.08

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Iron Pac 15	July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Augustinsen		First Name Tor		MI A
Residential Street Address 96 Colonial St		City West Hartford	State CT	Zip Code 06110
Principal Occupation		Name of Employer		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	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	
☐ Yes ☒ No	☐ Yes ☐ No			
Is this contribution associated with an event reported in Section L1? If yes, list Event #	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:			
☐ Yes ☒ No	☐ Executive ☐ Legislative ☐ Yes ☒ No			
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		06/30/2026	\$60.00	\$26.00

Last Name Anderson		First Name Nicolas		MI J
Residential Street Address 2 Lyman Rd		City Portland	State CT	Zip Code 06480
Principal Occupation		Name of Employer		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	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	
☐ Yes ☒ No	☐ Yes ☐ No			
Is this contribution associated with an event reported in Section L1? If yes, list Event #	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:			
☐ Yes ☒ No	☐ Executive ☐ Legislative ☐ Yes ☒ No			
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		06/30/2026	\$53.98	\$23.60

Last Name Acosta		First Name Rubelise		MI
Residential Street Address 5 Lincoln Ave # 10		City Bristol	State CT	Zip Code 06010
Principal Occupation		Name of Employer		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	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	
☐ Yes ☒ No	☐ Yes ☐ No			
Is this contribution associated with an event reported in Section L1? If yes, list Event #	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:			
☐ Yes ☒ No	☐ Executive ☐ Legislative ☐ Yes ☒ No			
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		06/30/2026	\$57.49	\$25.53

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Iron Pac 15	July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Daoust		First Name Christopher		MI J
Residential Street Address 16 Highland Street Ext .		City Moosup	State CT	Zip Code 06354
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution ☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		Date Received 06/30/2026	Aggregate Contributions \$58.50	\$29.25

Last Name Cushing		First Name Amanda		MI L
Residential Street Address 221 Benedict		City South Windsor	State CT	Zip Code
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution ☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		Date Received 06/30/2026	Aggregate Contributions \$59.05	\$27.80

Last Name Cote		First Name Jeremy		MI
Residential Street Address 49 Locust St .		City Hartford	State CT	Zip Code
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution ☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		Date Received 06/30/2026	Aggregate Contributions \$57.84	\$31.91

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Iron Pac 15	July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Coffill		First Name Nicholas		MI A
Residential Street Address 42 Summer St		City Waterbury	State CT	Zip Code 06704
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution ☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		Date Received 06/30/2026	Aggregate Contributions \$60.25	\$25.75

Last Name Canty		First Name William		MI
Residential Street Address 49 Locust St .		City Hartford	State CT	Zip Code
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution ☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		Date Received 06/30/2026	Aggregate Contributions \$58.41	\$25.05

Last Name Campbell		First Name Oneil		MI
Residential Street Address 49 Locust St .		City Hartford	State CT	Zip Code
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution ☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		Date Received 06/30/2026	Aggregate Contributions \$65.85	\$50.05

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Iron Pac 15	July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Calverley		First Name Andrew		MI J
Residential Street Address 214 Elm St		City Windsor Locks	State CT	Zip Code 06096
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		06/30/2026	\$58.60	\$27.80

Last Name Caldwell		First Name Samuel		MI
Residential Street Address 20 Suffield St		City Windsor Locks	State CT	Zip Code 06096
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		06/30/2026	\$55.38	\$30.88

Last Name Burdick		First Name Jason		MI C
Residential Street Address 73 Plainfield Pike		City Plainfield	State CT	Zip Code 06374
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		06/30/2026	\$62.53	\$40.75

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Iron Pac 15	July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Buckley		First Name Francis		MI W
Residential Street Address 49 Locust St .		City Hartford	State CT	Zip Code
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution ☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		Date Received 06/30/2026	Aggregate Contributions \$52.78	\$25.80

Last Name Bruno		First Name Shailene		MI F
Residential Street Address 49 Wolcott St		City Hartford	State CT	Zip Code 06106
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution ☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		Date Received 06/30/2026	Aggregate Contributions \$53.85	\$24.30

Last Name Briggs		First Name Ronald		MI A
Residential Street Address 49 Locust St .		City Hartford	State CT	Zip Code 06106
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution ☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		Date Received 06/30/2026	Aggregate Contributions \$51.76	\$20.58

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Iron Pac 15	July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Blanchette		First Name Kevin		MI D
Residential Street Address PO Box 155		City Berlin	State CT	Zip Code 06037
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		06/30/2026	\$56.75	\$25.30

Last Name Larochelle		First Name Kris		MI
Residential Street Address 49 Locust St .		City Hartford	State CT	Zip Code
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		06/30/2026	\$55.64	\$22.78

Last Name Lamontagne		First Name Peter		MI
Residential Street Address 47 Coach Dr		City Wolcott	State CT	Zip Code 06716
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		06/30/2026	\$24.35	\$24.35

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Iron Pac 15	July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Kratzert		First Name Eric		MI O
Residential Street Address 27 Gwen Rd		City Meriden	State CT	Zip Code 06451
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		06/30/2026	\$60.78	\$22.40

Last Name Kasey		First Name Jonathan		MI
Residential Street Address 21 Swimming Hole Rd		City Harwinton	State CT	Zip Code 06791
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		06/30/2026	\$51.81	\$25.56

Last Name Johnson		First Name Tyler		MI J
Residential Street Address 195 Elm St		City Enfield	State CT	Zip Code 06082
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		06/30/2026	\$58.50	\$29.25

I. MONETARY RECEIPTS (Section A-K)

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

Iron Pac 15

TYPE OF REPORT

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Jarrett		First Name Khani		MI
Residential Street Address 49 Locust St .		City Hartford	State CT	Zip Code
Principal Occupation		Name of Employer		
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 06/30/2026	Aggregate Contributions \$55.71	
\$24.00				

Last Name Hrubiec		First Name Chester		MI
Residential Street Address 1662 Kensington Rd		City Kensington	State CT	Zip Code 06037
Principal Occupation		Name of Employer		
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 06/30/2026	Aggregate Contributions \$55.33	
\$24.03				

Last Name Herbert		First Name Joshua		MI
Residential Street Address 140 Wolf Hill Rd		City Watertown	State CT	Zip Code 06795
Principal Occupation Journeyman		Name of Employer General Welding		
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 06/30/2026	Aggregate Contributions \$52.40	
\$25.20				

I. MONETARY RECEIPTS (Section A-K)

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

Iron Pac 15

TYPE OF REPORT

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Harrison		First Name Devon		MI S
Residential Street Address 303 Princeton St		City Hartford	State CT	Zip Code 06106
Principal Occupation		Name of Employer		
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 06/30/2026	Aggregate Contributions \$72.35	
				\$39.95

Last Name Harrison		First Name Devon		MI MI
Residential Street Address 81 W Morningside		City Hartford	State CT	Zip Code 06112
Principal Occupation		Name of Employer		
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 06/30/2026	Aggregate Contributions \$57.95	
				\$36.15

Last Name Haley		First Name Edward		MI A
Residential Street Address 26 Jarvis Rd		City Manchester	State CT	Zip Code 06040
Principal Occupation		Name of Employer		
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 06/30/2026	Aggregate Contributions \$58.96	
				\$22.73

I. MONETARY RECEIPTS (Section A-K)

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

Iron Pac 15

TYPE OF REPORT

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Guertin		First Name Michael		MI
Residential Street Address 49 Locust St .		City Hartford	State CT	Zip Code
Principal Occupation		Name of Employer		
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 06/30/2026	Aggregate Contributions \$63.39	
\$39.42				

Last Name Gedney		First Name Hayden		MI
Residential Street Address 49 Locust St .		City Hartford	State CT	Zip Code
Principal Occupation		Name of Employer		
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 06/30/2026	Aggregate Contributions \$52.86	
\$22.16				

Last Name Gallup		First Name Jaden		MI M
Residential Street Address 49 Locust St .		City Hartford	State CT	Zip Code 06106
Principal Occupation		Name of Employer		
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 06/30/2026	Aggregate Contributions \$84.98	
\$36.52				

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Iron Pac 15	July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Fraga		First Name Joseph		MI
Residential Street Address 101 Broad Way		City Coventry	State CT	Zip Code 06238-1208
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		06/30/2026	\$53.50	\$30.05

Last Name Fosberg		First Name Sydney		MI
Residential Street Address 49 Locust St .		City Hartford	State CT	Zip Code 06106
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		06/30/2026	\$68.55	\$35.75

Last Name Ford		First Name Robert		MI
Residential Street Address 49 Locust St .		City Hartford	State CT	Zip Code 06106
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		06/30/2026	\$50.23	\$21.88

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Iron Pac 15	July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Fix		First Name Robert		MI L
Residential Street Address 4 Gaylord Rd		City Windsor	State CT	Zip Code 06096-2815
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		06/30/2026	\$57.96	\$15.30

Last Name Fisher		First Name Neil		MI A
Residential Street Address 49 Locust St .		City Hartford	State CT	Zip Code
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		06/30/2026	\$50.28	\$22.55

Last Name Figueroa		First Name Jimmy		MI
Residential Street Address 49 Locust St .		City Hartford	State CT	Zip Code
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		06/30/2026	\$58.68	\$20.50

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Iron Pac 15	July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Fennessy		First Name Brett		MI Y
Residential Street Address 81 Kibbe St Apt 3		City Hartford	State CT	Zip Code 06106
Principal Occupation		Name of Employer		
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
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:		☐ Yes ☒ No ☐ Executive ☐ Legislative
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		06/30/2026	\$54.10	
			\$23.20	

Last Name Elliott		First Name Dylan		MI P
Residential Street Address 79 Rattling Valley Rd		City Deep River	State CT	Zip Code 06417
Principal Occupation		Name of Employer		
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
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:		☐ Yes ☒ No ☐ Executive ☐ Legislative
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		06/30/2026	\$53.05	
			\$25.20	

Last Name Durica		First Name Jordan		MI C
Residential Street Address 8 Chatham Ln		City Burlington	State CT	Zip Code 06013
Principal Occupation		Name of Employer		
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
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:		☐ Yes ☒ No ☐ Executive ☐ Legislative
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		06/30/2026	\$62.75	
			\$31.50	

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Iron Pac 15	July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Dunk		First Name Jonathan		MI
Residential Street Address 49 Locust St .		City Hartford	State CT	Zip Code
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution ☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		Date Received 06/30/2026	Aggregate Contributions \$57.38	\$24.15

Last Name Dubowsky		First Name Jason		MI
Residential Street Address 193 Fairview Dr		City Berlin	State CT	Zip Code 06037-1406
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution ☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		Date Received 06/30/2026	Aggregate Contributions \$54.70	\$21.15

Last Name Desrocher		First Name Kevin		MI M
Residential Street Address 50 Knotch Rd		City Granby	State CT	Zip Code 06035
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution ☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		Date Received 06/30/2026	Aggregate Contributions \$63.91	\$28.00

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Iron Pac 15	July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Dedominic		First Name Joseph		MI
Residential Street Address 49 Locust St .		City Hartford	State CT	Zip Code
Principal Occupation		Name of Employer		
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 06/30/2026	Aggregate Contributions \$53.77	
\$24.56				

Last Name Dawkins		First Name Dejahn		MI
Residential Street Address 49 Locust St .		City Hartford	State CT	Zip Code 06106
Principal Occupation		Name of Employer		
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 06/30/2026	Aggregate Contributions \$58.55	
\$31.10				

Last Name Zakorchevnoy		First Name Michael		MI
Residential Street Address 1481 Waterbury Rd		City Thomaston	State CT	Zip Code 06787
Principal Occupation		Name of Employer		
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 06/30/2026	Aggregate Contributions \$69.91	
\$33.05				

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Iron Pac 15	July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Wilson		First Name Cyle		MI
Residential Street Address 136 East St		City Stafford Springs	State CT	Zip Code 06076
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		06/30/2026	\$69.00	\$34.50

Last Name Wilson		First Name Corey		MI
Residential Street Address 34 Fairview Dr		City Farmington	State CT	Zip Code 06032-2517
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		06/30/2026	\$61.50	\$25.70

Last Name Williams		First Name Boston		MI
Residential Street Address 49 Locust St .		City Hartford	State CT	Zip Code
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		06/30/2026	\$54.69	\$21.96

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Iron Pac 15	July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Whyne		First Name Oneil		MI R
Residential Street Address 1 Shay St		City Windsor	State CT	Zip Code 06095
Principal Occupation		Name of Employer		
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 06/30/2026	Aggregate Contributions \$55.87	
				\$25.71

Last Name West		First Name Shane		MI D
Residential Street Address 49 Locust St .		City Hartford	State CT	Zip Code
Principal Occupation		Name of Employer		
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 06/30/2026	Aggregate Contributions \$52.35	
				\$22.80

Last Name Wells		First Name Erika		MI
Residential Street Address 350 Old Post Rd		City Tolland	State CT	Zip Code 06084
Principal Occupation		Name of Employer		
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 06/30/2026	Aggregate Contributions \$37.78	
				\$16.00

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Iron Pac 15	July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Wells		First Name Bret		MI T
Residential Street Address 350 Old Post Rd		City Tolland	State CT	Zip Code 06084
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution ☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		Date Received 06/30/2026	Aggregate Contributions \$58.50	\$29.25

Last Name Waite		First Name Michael		MI D
Residential Street Address 49 Locust St .		City Hartford	State CT	Zip Code 06106
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution ☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		Date Received 06/30/2026	Aggregate Contributions \$53.09	\$23.03

Last Name Washington		First Name Andre		MI T
Residential Street Address 185 Park Rd		City Barkhamsted	State CT	Zip Code 06063
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution ☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		Date Received 06/30/2026	Aggregate Contributions \$58.50	\$23.40

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Iron Pac 15	July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Vanleuvan		First Name Ryan		MI
Residential Street Address 49 Locust St .		City Hartford	State CT	Zip Code
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		06/30/2026	\$57.78	\$21.10

Last Name Standish		First Name Matthew		MI
Residential Street Address 19 Tylor Rd		City West Hartford	State CT	Zip Code 06110
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		06/30/2026	\$69.59	\$27.63

Last Name Snay		First Name Matthew		MI
Residential Street Address 49 Locust St .		City Hartford	State CT	Zip Code 06106
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		06/30/2026	\$65.55	\$18.05

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Iron Pac 15	July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Ryon		First Name Christopher		MI
Residential Street Address 145 Witter Rd		City Salem	State CT	Zip Code 06420
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution ☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		Date Received 06/30/2026	Aggregate Contributions \$55.85	\$31.10

Last Name Reavey		First Name Michael		MI P
Residential Street Address 49 Locust St .		City Hartford	State CT	Zip Code
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution ☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		Date Received 06/30/2026	Aggregate Contributions \$63.31	\$20.53

Last Name Powell		First Name Jesse		MI A
Residential Street Address 14 Silver Birch Ln		City Clinton	State CT	Zip Code 06413
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution ☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		Date Received 06/30/2026	Aggregate Contributions \$55.30	\$47.65

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Iron Pac 15	July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Parent		First Name Marc		MI D
Residential Street Address 11 Oakwood Dr		City East Windsor	State CT	Zip Code 06088
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		06/30/2026	\$62.00	\$18.10

Last Name Panteleakos		First Name Tyler		MI H
Residential Street Address 495 Laurel Hill Rd Apt 21E		City Norwich	State CT	Zip Code 06360
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		06/30/2026	\$52.33	\$40.98

Last Name Mills Jr.		First Name Joseph		MI P
Residential Street Address 90 Hickory St		City West Haven	State CT	Zip Code 06516
Principal Occupation Journeyman		Name of Employer Cherry Hill Glass		
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? 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				
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		06/30/2026	\$102.20	\$42.70

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Iron Pac 15	July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name McCauley		First Name William		MI
Residential Street Address 384 Hall Hill Rd		City Somers	State CT	Zip Code 06071
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution ☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		Date Received 06/30/2026	Aggregate Contributions \$57.09	\$27.11

Last Name Mc Gloin		First Name Francis		MI
Residential Street Address 24 Marshall Rd		City Windsor Locks	State CT	Zip Code 06096
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution ☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		Date Received 06/30/2026	Aggregate Contributions \$52.75	\$24.50

Last Name Martinez		First Name Elias		MI C
Residential Street Address 49 Locust St .		City Hartford	State CT	Zip Code
Principal Occupation		Name of Employer		
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? 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				
Method of Contribution ☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☒ Payroll Deduction ☐ Money Order		Date Received 06/30/2026	Aggregate Contributions \$54.75	\$24.00

I. MONETARY RECEIPTS (Section A-K)

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

Iron Pac 15

TYPE OF REPORT

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Manza		First Name Christopher		MI
Residential Street Address 49 Locust St .		City Hartford	State CT	Zip Code
Principal Occupation 		Name of Employer 		
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 06/30/2026	Aggregate Contributions \$52.36	\$13.95

Last Name Livingston		First Name William		MI Z
Residential Street Address 49 Locust St .		City Hartford	State CT	Zip Code
Principal Occupation 		Name of Employer 		
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 06/30/2026	Aggregate Contributions \$58.28	\$23.70

Total of Section B				\$1,985.60
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Total on Line 13 of Summary Page)				\$4,340.23

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Iron Pac 15	July 10 Filing - Original

C1. Contributions from Other Committees

Name of Committee				Name of Treasurer	
Address		Is this contribution associated with an event reported in Section L1?		Yes	No
		If yes, list Event #			
City	State	Zip Code	Date Received	Aggregate Contributions	
					Amount of Contribution

Total of Section C1**I. MONETARY RECEIPTS (Section A-K)**

NAME OF COMMITTEE	TYPE OF REPORT
Iron Pac 15	July 10 Filing - Original

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
Iron Pac 15	July 10 Filing - Original

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
Iron Pac 15	July 10 Filing - Original

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	Aggregate Contributions	

Total of Section E**I. MONETARY RECEIPTS (Section A-K)**

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Iron Pac 15	July 10 Filing - Original

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
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Total of Section F

I. MONETARY RECEIPTS (Section A-K)	
NAME OF COMMITTEE	TYPE OF REPORT
Iron Pac 15	July 10 Filing - Original
G. Amount Transferred from Affiliated Labor Union or Other Organization Treasury (<i>Organization Committees ONLY</i>)	
Date of Receipt	Amount
Total of Section G	

I. MONETARY RECEIPTS (Section A-K)	
NAME OF COMMITTEE	TYPE OF REPORT
Iron Pac 15	July 10 Filing - Original
H. Personal Funds of the Candidate Received this Period (Candidate Committees ONLY)	
Date of Receipt	Method of Payment Cash Personal Check Credit/Debit Card
Amount	
Total of Section H	

I. Monetary Receipts (Section A-K)			
NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)			TYPE OF REPORT
Iron Pac 15			July 10 Filing - Original
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	
Iron Pac 15			July 10 Filing - Original	
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	
Iron Pac 15			July 10 Filing - Original	
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	(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.)	
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	(If yes, go to Section L4 In-Kind Donations not Considered Contributions and complete required information.)	
Was this fundraiser a tag sale, auction, or other sale of donated items with purchases from an individual of up to \$100?		Yes No	(If yes, enter Total Receipts here.)	
<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	(If yes, go to Section L3 Purchases of Advertising Space in a Program Book or on a Sign and complete required information.)	
<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	(If yes, enter Total Receipts here.)	
Total of Section L1				

II. EVENT ACTIVITY (Sections L1 - L5)					
NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)				TYPE OF REPORT	
Iron Pac 15				July 10 Filing - Original	
L3. Purchases of Advertising in a Program Book or on a Sign					
Name of Purchaser				Purchase Made By:	
				Business Entity Other Individual/Sole Proprietorship	
Street Address			City	State	Zip Code
Date Received	Event #	Aggregate Purchases for All Events	Amount of Program Ad Purchase	Amount of Sign Purchase	
Total of Section L3					

II. EVENT ACTIVITY (Sections L1 - L5)					
NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)				TYPE OF REPORT	
Iron Pac 15				July 10 Filing - Original	
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
Iron Pac 15	July 10 Filing - Original

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
Iron Pac 15	July 10 Filing - Original

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?	Fair Market Value of this Contribution
		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	

Total of Section M

III. Non Monetary Receipts (Sections M - O)

NAME OF COMMITTEE	TYPE OF REPORT
Iron Pac 15	July 10 Filing - Original

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
Iron Pac 15	July 10 Filing - Original

P. Expenses Paid By Committee

Name of Payee		Date of Payment	Method of Payment Check # Debit Card EFT	
Street Address	City	State	Zip Code	
Purpose of Expenditure (by code)	Description			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

Total of Section P

IV. EXPENDITURES (Sections P - T)			
NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)		TYPE OF REPORT	
		July 10 Filing - Original	
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	
Iron Pac 15		July 10 Filing - Original	
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	
Iron Pac 15				July 10 Filing - Original	
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 (<i>Itemization in Addendum S Required unless "None of the below" is checked</i>) 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	
Iron Pac 15				July 10 Filing - Original	
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 (<i>Itemization in Addendum T Required unless "None of the below" is checked</i>) 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	
P. Expenses Paid By Committee - Addendum		
Expenditure #	Supported Opposed	Amount of Expenditure
Name of Candidate or Committee	Office Sought (if applicable)	Cost Allocated to Candidate or Committee
Are Limits Aggregated? Yes No	Aggregating Committees	

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	