

SEEC FORM 20

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



Electronic Filing

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Page 1 of 24

COVER PAGE

1. NAME OF COMMITTEE			
Danbury Republican Town Committee			
2. TREASURER NAME			
First Mary Ann	MI	Last Strattner	Suffix
3. TREASURER ADDRESS			
Street Address 1 Hawley Rd	City Danbury	State CT	Zip Code 06811
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	Mary Ann Strattnr PRINT NAME OF THE SIGNER	07/10/2026 11:01:26PM 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	
Danbury Republican Town Committee	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		\$2,460.31
12. Balance on hand at the beginning of Reporting Period	\$3,509.29	
13. Contributions received from Individuals (Section A and B)	\$886.81	\$913.16
14. Receipts from Other Committees (Sections C1 and C2)	\$0.00	\$1,500.00
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)	\$886.81	\$2,413.16
18. Subtotals (add totals in Line 12 + 17 in Column A and in Line 11 + 17 in Column B)	\$4,396.10	\$4,873.47
19. Expenses Paid by Committee (Section P)	\$1,831.81	\$2,309.18
20. Balance on hand at close of Reporting Period (Subtract line 19 from line 18 in both columns)	\$2,564.29	\$2,564.29
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
Danbury Republican Town Committee	July 10 Filing - Original

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

(See instructions for definition of Small Contributor)

Subtotal Section A

\$60.00**B. Itemized Contributions from Individuals**

Last Name Wilson		First Name Paula		MI K
Residential Street Address 22 Sil Cam Rd		City Danbury	State CT	Zip Code 06811
Principal Occupation Retired		Name of Employer Retired		
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 04/13/2026	Aggregate Contributions \$100.00	\$100.00

Last Name Vachovetz		First Name Edward		MI
Residential Street Address 249 Thaddeus Ave .		City Danbury	State CT	Zip Code 06811
Principal Occupation Retired		Name of Employer Retired		
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 05/12/2026	Aggregate Contributions \$100.00	\$100.00

Last Name Weston		First Name Frances		MI P
Residential Street Address 41 Twin Oaks Ln Candlewood Park		City Danbury	State CT	Zip Code 06811
Principal Occupation Retired		Name of Employer Retired		
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 05/20/2026	Aggregate Contributions \$50.00	\$50.00

I. MONETARY RECEIPTS (Section A-K)

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

Danbury Republican Town Committee

TYPE OF REPORT

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Yamin		First Name Robert		MI J
Residential Street Address 66 Barnum Rd		City Danbury	State CT	Zip Code 06811
Principal Occupation Attorney		Name of Employer Yamin & Yamin LLP		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ 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 06/13/2026	Aggregate Contributions \$104.48	
				\$104.48

Last Name Lindsey		First Name Melissa		MI
Residential Street Address 8 Deerfield Rd		City New Fairfield	State CT	Zip Code 06812
Principal Occupation Office Manager		Name of Employer Ziegler Carpet		
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 # 06282026A ☒ 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 06/28/2026	Aggregate Contributions \$20.00	
				\$20.00

Last Name Strattner		First Name David		MI L
Residential Street Address 1 Hawley Rd		City Danbury	State CT	Zip Code 06811
Principal Occupation Physical Therapist		Name of Employer Retired & Disabled		
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 # 06282026A ☒ 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 06/28/2026	Aggregate Contributions \$20.00	
				\$20.00

I. MONETARY RECEIPTS (Section A-K)

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

Danbury Republican Town Committee

TYPE OF REPORT

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Yamin		First Name Robert		MI J
Residential Street Address 66 Barnum Rd		City Danbury	State CT	Zip Code 06811
Principal Occupation Attorney		Name of Employer Yamin & Yamin LLP		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 06282026A ☒ 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 06/28/2026	Aggregate Contributions \$288.13	
				\$100.00

Last Name Yamin		First Name Rebecca		MI
Residential Street Address 7 Padanaram Rd Unit 206		City Danbury	State CT	Zip Code 06811
Principal Occupation Sales Associate		Name of Employer Burlington		
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 # 06282026A ☒ 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 06/28/2026	Aggregate Contributions \$20.00	
				\$20.00

Last Name Boynton		First Name Lora		MI
Residential Street Address 26 McDermott St		City Danbury	State CT	Zip Code 06810
Principal Occupation Animal Control Officer		Name of Employer Weston Animal Control		
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 # 06282026A ☒ 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 06/28/2026	Aggregate Contributions \$40.00	
				\$40.00

I. MONETARY RECEIPTS (Section A-K)

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

Danbury Republican Town Committee

TYPE OF REPORT

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Coelho		First Name Michelle		MI
Residential Street Address 47 E Lake Rd		City Danbury	State CT	Zip Code 06811
Principal Occupation Unemployed		Name of Employer Unemployed		
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 # 06282026A ☒ 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 06/28/2026	Aggregate Contributions \$130.83	
				\$104.48

Last Name Strattner		First Name Mary Ann		MI
Residential Street Address 1 Hawley Rd		City Danbury	State CT	Zip Code 06811
Principal Occupation CPA & Care Giver		Name of Employer Retired		
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 # 06282026A ☒ 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 06/28/2026	Aggregate Contributions \$21.15	
				\$21.15

Last Name Torres		First Name Dawn		MI
Residential Street Address 11 Jams Dr		City Danbury	State CT	Zip Code 06811
Principal Occupation Retired		Name of Employer Retired		
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 # 06282026A ☒ 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 06/28/2026	Aggregate Contributions \$21.15	
				\$21.15

I. MONETARY RECEIPTS (Section A-K)

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

Danbury Republican Town Committee

TYPE OF REPORT

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Yamin		First Name Robert		MI J
Residential Street Address 66 Barnum Rd		City Danbury	State CT	Zip Code 06811
Principal Occupation Attorney		Name of Employer Yamin & Yamin LLP		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 06282026A ☒ 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 06/28/2026	Aggregate Contributions \$288.13	
				\$83.65

Last Name Rizzo		First Name Deborah		MI
Residential Street Address 46 Ole Musket Ln		City Danbury	State CT	Zip Code 06810
Principal Occupation Industrial Real Estate		Name of Employer Linde		
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 # 07172026A ☒ 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 06/28/2026	Aggregate Contributions \$41.90	
				\$41.90

Total of Section B				\$826.81
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Total on Line 13 of Summary Page)				\$886.81

I. MONETARY RECEIPTS (Section A-K)

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

Danbury Republican Town Committee

TYPE OF REPORT

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

Amount of Contribution

If yes, list Event #

City

State

Zip Code

Date Received

Aggregate Contributions

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

NAME OF COMMITTEE

Danbury Republican Town Committee

TYPE OF REPORT

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
Danbury Republican Town Committee	July 10 Filing - Original

D. Loans Received this Period

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

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

NAME OF COMMITTEE	TYPE OF REPORT
Danbury Republican Town Committee	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
Danbury Republican Town Committee	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
Danbury Republican Town Committee	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
Danbury Republican Town Committee	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
Danbury Republican Town Committee			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	
Danbury Republican Town Committee			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
Danbury Republican Town Committee	July 10 Filing - Original

L1. Event Information

Event # Date of Event 06/28/2026	Letter A	Description Raffle Event	Was this a fundraising event? ☒ Yes ☐ No	
Location: Street Address 38 Lake Avenue Ext		City Danbury	State CT	Zip Code 06811
<i>Subpart 1: (All Committees)</i> Was this event hosted at a personal residence?		☐ Yes ☒ No	<i>(If yes, go to Section L5 In-Kind Donations not Considered Contributions Associated with a House Party and complete required information for any purchases made by host(s) for food, beverage and invitations.)</i>	
Did this fundraiser include goods or services donated by a business entity of up to \$200 or items donated by an individual of up to \$100?		☐ Yes ☒ No	<i>(If yes, go to Section L4 In-Kind Donations not Considered Contributions and complete required information.)</i>	
Was this fundraiser a tag sale, auction, or other sale of donated items with purchases from an individual of up to \$100?		☐ Yes ☒ No	<i>(If yes, enter Total Receipts here.)</i>	\$0.00
<i>Subpart 2: (Party Committees, Municipal Candidates and Political Committees other than Exploratory Committees)</i>				
Were there purchases of advertising space in a program book or on a sign associated with this fundraiser?		☐ Yes ☒ No	<i>(If yes, go to Section L3 Purchases of Advertising Space in a Program Book or on a Sign and complete required information.)</i>	
<i>Subpart 3: (Town Committees ONLY)</i>				
Did your committee sell food or beverage at a fair or similar mass gathering held within the state with this fundraiser?		☐ Yes ☒ No	<i>(If yes, enter Total Receipts here.)</i>	\$0.00

Event # Date of Event 07/17/2026	Letter A	Description Reception Event	Was this a fundraising event? ☒ Yes ☐ No	
Location: Street Address 65 Sandpit Rd		City Danbury	State CT	Zip Code 06810
<i>Subpart 1: (All Committees)</i> Was this event hosted at a personal residence?		☐ Yes ☒ No	<i>(If yes, go to Section L5 In-Kind Donations not Considered Contributions Associated with a House Party and complete required information for any purchases made by host(s) for food, beverage and invitations.)</i>	
Did this fundraiser include goods or services donated by a business entity of up to \$200 or items donated by an individual of up to \$100?		☐ Yes ☒ No	<i>(If yes, go to Section L4 In-Kind Donations not Considered Contributions and complete required information.)</i>	
Was this fundraiser a tag sale, auction, or other sale of donated items with purchases from an individual of up to \$100?		☐ Yes ☒ No	<i>(If yes, enter Total Receipts here.)</i>	\$0.00
<i>Subpart 2: (Party Committees, Municipal Candidates and Political Committees other than Exploratory Committees)</i>				
Were there purchases of advertising space in a program book or on a sign associated with this fundraiser?		☐ Yes ☒ No	<i>(If yes, go to Section L3 Purchases of Advertising Space in a Program Book or on a Sign and complete required information.)</i>	
<i>Subpart 3: (Town Committees ONLY)</i>				
Did your committee sell food or beverage at a fair or similar mass gathering held within the state with this fundraiser?		☐ Yes ☒ No	<i>(If yes, enter Total Receipts here.)</i>	\$0.00

Total of Section L1	\$0.00
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II. EVENT ACTIVITY (Sections L1 - L5)					
NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)					TYPE OF REPORT
Danbury Republican Town Committee					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
Danbury Republican Town Committee					July 10 Filing - Original
L4. In-Kind Donations Not Considered Contributions					
Name of the Donor					
Street Address			City		State
Zip Code					
Donation Given by: Business Entity Individual Sole Proprietorship	Description of Donation			Fair Market Value of Donation	
	Date Received	Event #	Aggregate value for this event		
Total of Section L4					

II.EVENT ACTIVITY (Sections L1 - L5)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Danbury Republican Town Committee	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
Danbury Republican Town Committee	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
Danbury Republican Town Committee	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

Danbury Republican Town Committee

July 10 Filing - Original

P. Expenses Paid By Committee

Name of Payee BJ's		Date of Payment 04/13/2026	Method of Payment ☐ Check # ☒ Debit Card ☐ EFT	
Street Address 106 Federal Rd		City Brookfield	State CT	Zip Code 06804
Purpose of Expenditure (by code) FOOD	Description Food, drinks, supplies for DRTC Meeting			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 \$384.83

Name of Payee Staples		Date of Payment 04/13/2026	Method of Payment ☐ Check # ☒ Debit Card ☐ EFT	
Street Address 67 Newtown Rd		City Danbury	State CT	Zip Code 06810
Purpose of Expenditure (by code) A-SIGN	Description Printing cost for DRTC Banner			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 \$63.30

Name of Payee TAPCO-KL		Date of Payment 04/27/2026	Method of Payment ☐ Check # ☒ Debit Card ☐ EFT	
Street Address PO Box 286		City Burlington	State NC	Zip Code 27216
Purpose of Expenditure (by code) OVHD	Description Insurance for DRTC			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 \$65.24

IV. EXPENDITURES (Sections P - T)

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

TYPE OF REPORT

Danbury Republican Town Committee

July 10 Filing - Original

P. Expenses Paid By Committee

Name of Payee

Hearst CT Media Group

Date of Payment

05/08/2026

Method of Payment

☐

Check #

☒

Debit Card

☐

EFT

Street Address

301 Merritt 7 Ste 1

City

Norwalk

State

CT

Zip Code

06851

Purpose of
Expenditure (by code)

A-NEWS

Description

Public notice in News Times for DRTC Caucus Nominating Candidates 109, 110, 138, Probate Judge,
Registrar of Voters

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

\$93.30

Name of Payee

Portuguese Cultural Center

Date of Payment

05/21/2026

Method of Payment

☐

Check #

☒

Debit Card

☐

EFT

Street Address

65 Sand Pit Rd

City

Danbury

State

CT

Zip Code

06810

Purpose of
Expenditure (by code)

FOOD

Description

Food & Beverages for 5/21/26 DRTC Endorsement of Danbury Republican Candidates

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

\$429.40

Name of Payee

TAPCO-KL

Date of Payment

05/27/2026

Method of Payment

☐

Check #

☒

Debit Card

☐

EFT

Street Address

PO Box 286

City

Burlington

State

NC

Zip Code

27216

Purpose of
Expenditure (by code)

OVHD

Description

Insurance for DRTC HQ

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

\$65.24

IV. EXPENDITURES (Sections P - T)

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

TYPE OF REPORT

Danbury Republican Town Committee

July 10 Filing - Original

P. Expenses Paid By Committee

Name of Payee Danbury Police Dept.		Date of Payment 06/09/2026	Method of Payment ☒ Check # 1270 ☐ Debit Card ☐ EFT	
Street Address 375 Main St		City Danbury	State CT	Zip Code 06810
Purpose of Expenditure (by code) FNDR *	Description Police bazaar permit for 6/28/26 50/50 Raffle			Event # 06282026A
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 \$20.00
Name of Payee eventhelper.com		Date of Payment 06/12/2026	Method of Payment ☐ Check # ☒ Debit Card ☐ EFT	
Street Address PO Box 1549		City Grass Valley	State CA	Zip Code 95945
Purpose of Expenditure (by code) Misc *	Description Insurance for DRTC space @ 6/13/26 Danbury Street Festival			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 \$118.30
Name of Payee Anedot		Date of Payment 06/13/2026	Method of Payment ☐ Check # ☐ Debit Card ☒ EFT	
Street Address 3rd Street, Suite 2B		City Baton Rouge	State LA	Zip Code 70801
Purpose of Expenditure (by code) BNK	Description Management fee for credit card donation			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 \$4.48

IV. EXPENDITURES (Sections P - T)

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

TYPE OF REPORT

Danbury Republican Town Committee

July 10 Filing - Original

P. Expenses Paid By Committee

Name of Payee Portuguese Cultural Center		Date of Payment 06/15/2026	Method of Payment ☒ Check # 1271 ☐ Debit Card ☐ EFT	
Street Address 65 Sand Pit Rd		City Danbury	State CT	Zip Code 06810
Purpose of Expenditure (by code) A-OTH	Description DRTC Sign Placement in Portugal Day on 6/6 & 6/7/26			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 \$250.00
Name of Payee TAPCO-KL		Date of Payment 06/25/2026	Method of Payment ☐ Check # ☒ Debit Card ☐ EFT	
Street Address PO Box 286		City Burlington	State NC	Zip Code 27216
Purpose of Expenditure (by code) OVHD	Description Insurance for DRTC			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 \$65.24
Name of Payee Staples		Date of Payment 06/27/2026	Method of Payment ☐ Check # ☒ Debit Card ☐ EFT	
Street Address 67 Newtown Rd		City Danbury	State CT	Zip Code 06810
Purpose of Expenditure (by code) Misc *	Description Ballons, printing flyers & QR codes for 50/50 raffle @ Danbury Auto Welding Car Show			Event # 06282026A
Expenditure # (if applicable)	Type of Expenditure (Itemization in Addendum P Required unless "None of the below" is checked) ☒ None of the below ☐ Coordinated with reimbursement sought (joint expenditure) ☐ Independent ☐ Coordinated without reimbursement sought (in-kind contribution) ☐ Organization ☐ A ☐ B ☐ C ☐ D			Amount \$18.25

IV. EXPENDITURES (Sections P - T)

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

TYPE OF REPORT

Danbury Republican Town Committee

July 10 Filing - Original

P. Expenses Paid By Committee

Name of Payee Anedot		Date of Payment 06/28/2026	Method of Payment ☐ Check # ☐ Debit Card ☒ EFT	
Street Address 3rd Street, Suite 2B		City Baton Rouge	State LA	Zip Code 70801
Purpose of Expenditure (by code) BNK	Description Management fee for credit card donations			Event # 06282026A
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 \$12.33
Name of Payee Anedot		Date of Payment 06/30/2026	Method of Payment ☐ Check # ☐ Debit Card ☒ EFT	
Street Address 3rd Street, Suite 2B		City Baton Rouge	State LA	Zip Code 70801
Purpose of Expenditure (by code) BNK	Description Management fee for credit card donation			Event # 07172026A
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 \$1.90
Name of Payee Lora Boynton		Date of Payment 06/30/2026	Method of Payment ☐ Check # ☐ Debit Card ☒ EFT	
Street Address 26 McDermott St		City Danbury	State CT	Zip Code 06810
Purpose of Expenditure (by code) Misc *	Description Payment to 50/50 raffle winner			Event # 06282026A
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 \$240.00
Total of Section P				\$1,831.81

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	
Danbury Republican Town Committee			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) Independent Coordinated without reimbursement sought (in-kind contribution) 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	
Danbury Republican Town Committee			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	
Danbury Republican Town Committee			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	