

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 52

COVER PAGE

1. NAME OF COMMITTEE			
Stamford Firefighters Local 786 PAC			
2. TREASURER NAME			
First	MI	Last	Suffix
Matthew		DeFilippis	
3. TREASURER ADDRESS			
Street Address	City	State	Zip Code
45 Park St	Trumbull	CT	06611
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	Joseph Micalizzi	07/10/2026 4:46:26PM	
SIGNATURE	PRINT NAME OF THE SIGNER	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	
Stamford Firefighters Local 786 PAC	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		\$75,549.39
12. Balance on hand at the beginning of Reporting Period	\$77,829.39	
13. Contributions received from Individuals (Section A and B)	\$1,710.00	\$3,990.00
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)	\$1,710.00	\$3,990.00
18. Subtotals (add totals in Line 12 + 17 in Column A and in Line 11 + 17 in Column B)	\$79,539.39	\$79,539.39
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)	\$79,539.39	\$79,539.39
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
Stamford Firefighters Local 786 PAC	July 10 Filing - Original

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

(See instructions for definition of Small Contributor)

Subtotal Section A

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

Last Name Mullins		First Name Bryan		MI
Residential Street Address 58 Coachlamp Ln		City Stamford	State CT	Zip Code 06902
Principal Occupation Firefighter		Name of Employer Stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$21.00	\$9.00

Last Name Morris		First Name Colin		MI
Residential Street Address 31 Melrose Ave		City Trumbull	State CT	Zip Code 06611
Principal Occupation Firefighter		Name of Employer Stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$21.00	\$9.00

Last Name Serrichio		First Name Tyler		MI
Residential Street Address 34 Edwards Pl		City Stamford	State CT	Zip Code 06905
Principal Occupation Firefighter		Name of Employer Stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$121.00	\$9.00

I. MONETARY RECEIPTS (Section A-K)

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

TYPE OF REPORT

Stamford Firefighters Local 786 PAC

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Hetherington		First Name William		MI S
Residential Street Address 510 Frogtown Rd		City New Canaan	State CT	Zip Code 06840
Principal Occupation Firefighter		Name of Employer Stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Fitzgerald		First Name Joseph		MI
Residential Street Address 160 Shagbark Dr		City Derby	State CT	Zip Code 06418
Principal Occupation Firefighter		Name of Employer Stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Buchas		First Name Trevor		MI
Residential Street Address 99 Melville Ave		City Fairfield	State CT	Zip Code 06825
Principal Occupation Firefighter		Name of Employer Stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$17.00	
				\$9.00

I. MONETARY RECEIPTS (Section A-K)

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

TYPE OF REPORT

Stamford Firefighters Local 786 PAC

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Markowitz III		First Name Johnathan		MI A
Residential Street Address 133 Lakeview Ave		City West Harrison	State NY	Zip Code
Principal Occupation Firefighter		Name of Employer Stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Butkovsky		First Name Brock		MI
Residential Street Address 44 Swendsen Dr		City Monroe	State CT	Zip Code 06468
Principal Occupation Firefighter		Name of Employer Stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Santos		First Name Christian		MI
Residential Street Address 780 St Anns Ave		City Bronx	State NY	Zip Code 10456
Principal Occupation Firefighter		Name of Employer Stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

I. MONETARY RECEIPTS (Section A-K)

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

TYPE OF REPORT

Stamford Firefighters Local 786 PAC

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Vitiello		First Name Anthony		MI
Residential Street Address 190 Rocky Rapids Rd		City Stamford	State CT	Zip Code 06903
Principal Occupation Firefighter		Name of Employer Vitiello		
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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Heffner		First Name James		MI
Residential Street Address 3 Mercer Ct		City Scarsdale	State NY	Zip Code 10583
Principal Occupation Firefighter		Name of Employer Stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name RIVERA		First Name WILLIAM		MI
Residential Street Address 8 River Rd		City Tompkins Cove	State NY	Zip Code 10986
Principal Occupation FIREFIGHTER		Name of Employer Stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$105.00	
				\$45.00

I. MONETARY RECEIPTS (Section A-K)

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

Stamford Firefighters Local 786 PAC

TYPE OF REPORT

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name HORRY		First Name LYNELL		MI
Residential Street Address 279 N Broadway Apt 6S		City Yonkers	State NY	Zip Code 10701
Principal Occupation FIREFIGHTER		Name of Employer Stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$105.00	
\$45.00				

Last Name SCHENK		First Name MICHAEL		MI
Residential Street Address 303 Circle Dr		City Stratford	State CT	Zip Code 06614
Principal Occupation FIREFIGHTER		Name of Employer Stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$63.00	
\$27.00				

Last Name Lang		First Name Kyle		MI
Residential Street Address 52 Point Lookout		City Milford	State CT	Zip Code 06460
Principal Occupation firefighter		Name of Employer Stamford Fire department		
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 06/18/2026	Aggregate Contributions \$210.00	
\$90.00				

I. MONETARY RECEIPTS (Section A-K)

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

Stamford Firefighters Local 786 PAC

TYPE OF REPORT

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Magnotta		First Name Alan		MI
Residential Street Address 1 Williams Rd		City New Fairfield	State CT	Zip Code 06812
Principal Occupation firefighter		Name of Employer Stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name ALFANO		First Name VINCENT		MI
Residential Street Address 4 Woods Broke Ln Unit 4		City Yorktown Heights	State NY	Zip Code 10598
Principal Occupation FIREFIGHTER		Name of Employer Stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$105.00	
				\$45.00

Last Name SAND		First Name JOHN		MI
Residential Street Address 1 Greyrock Pl		City Stamford	State CT	Zip Code 06901
Principal Occupation FIREFIGHTER		Name of Employer Stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$105.00	
				\$45.00

I. MONETARY RECEIPTS (Section A-K)

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

TYPE OF REPORT

Stamford Firefighters Local 786 PAC

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Camillo		First Name Michael		MI
Residential Street Address 135 Woodbridge Dr S		City Stamford	State CT	Zip Code 06902
Principal Occupation firefighter		Name of Employer Stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Cacciola		First Name Nicholas		MI
Residential Street Address 2266 Palmer Ave		City New Rochelle	State NY	Zip Code 10801
Principal Occupation Firefighter		Name of Employer Stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$105.00	
				\$45.00

Last Name Nicholson		First Name Brian		MI
Residential Street Address 111 Towne St .		City Stamford	State CT	Zip Code 06902
Principal Occupation firefighter		Name of Employer Stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

I. MONETARY RECEIPTS (Section A-K)

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

TYPE OF REPORT

Stamford Firefighters Local 786 PAC

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Stewart		First Name Scott		MI
Residential Street Address 28 Bishop Dr S		City Greenwich	State CT	Zip Code 06831
Principal Occupation firefighter		Name of Employer Stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$105.00	
				\$45.00

Last Name Somma		First Name Aiden		MI
Residential Street Address 63 Iron Gate Rd		City Bridgeport	State CT	Zip Code 06903
Principal Occupation fire department		Name of Employer Stamford Fire Dpartment		
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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name connington		First Name Sean		MI
Residential Street Address 227 Club Rd		City Stamford	State CT	Zip Code 06905
Principal Occupation firefighter		Name of Employer Stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

I. MONETARY RECEIPTS (Section A-K)

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

TYPE OF REPORT

Stamford Firefighters Local 786 PAC

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Wilson		First Name Matthew		MI
Residential Street Address 2955 Curry St		City Yorktown Heights	State NY	Zip Code 10598
Principal Occupation Firefighter		Name of Employer Stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name IEMMA		First Name DOMINIC		MI
Residential Street Address 121 Towne St		City Stamford	State CT	Zip Code 06902
Principal Occupation FIREFIGHTER		Name of Employer Stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name SIMONIS		First Name KYLE		MI
Residential Street Address 30 Curt Ter		City Greenwich	State CT	Zip Code 06831
Principal Occupation FIREFIGHTER		Name of Employer Stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$45.00	
				\$45.00

I. MONETARY RECEIPTS (Section A-K)

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

TYPE OF REPORT

Stamford Firefighters Local 786 PAC

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name PARENTI		First Name DAVID		MI
Residential Street Address 33 Milford Hunt Ln		City Milford	State CT	Zip Code 06461
Principal Occupation FIREFIGHTER		Name of Employer Stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$105.00	
				\$45.00

Last Name O'Brien		First Name Kiley		MI
Residential Street Address 73 Cedar Heights Rd		City Stamford	State CT	Zip Code 06905
Principal Occupation FIREFIGHTER		Name of Employer Stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Holmes		First Name Thomas		MI
Residential Street Address 126 Green Hill Rd		City Middlebury	State CT	Zip Code 06762
Principal Occupation firefighter		Name of Employer Stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

I. MONETARY RECEIPTS (Section A-K)

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

TYPE OF REPORT

Stamford Firefighters Local 786 PAC

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Balzar		First Name Roman		MI
Residential Street Address 3 William St		City Norwalk	State CT	Zip Code 06851
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Houser		First Name Kyle		MI
Residential Street Address 160 Franklin St		City Stamford	State CT	Zip Code 06902
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$105.00	
				\$45.00

Last Name Micalizzi, III		First Name Joseph		MI
Residential Street Address 3845 Park Ave Unit 7		City Fairfield	State CT	Zip Code 06825
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

I. MONETARY RECEIPTS (Section A-K)

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

TYPE OF REPORT

Stamford Firefighters Local 786 PAC

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name DeAngelo		First Name Nicholas		MI
Residential Street Address 83 Rugby St		City Shelton	State CT	Zip Code 06484
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Gloerson		First Name Christopher		MI
Residential Street Address 1305 Cutspring Rd		City Stratford	State CT	Zip Code 06614
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Vartuli		First Name Dante		MI
Residential Street Address 54 Bellmere Ave		City Stamford	State CT	Zip Code 06906
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$42.00	
				\$18.00

I. MONETARY RECEIPTS (Section A-K)

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

TYPE OF REPORT

Stamford Firefighters Local 786 PAC

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Meenan		First Name Daniel		MI
Residential Street Address 7 Vail Rd		City Bethel	State CT	Zip Code 06801
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Maluk		First Name Robert		MI
Residential Street Address 25 Arcadia Ave		City Hamden	State CT	Zip Code 06514
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$42.00	
				\$18.00

Last Name Walsh		First Name Stephen		MI
Residential Street Address 32 North St		City Ridgefield	State CT	Zip Code 06877
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$42.00	
				\$18.00

I. MONETARY RECEIPTS (Section A-K)

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

TYPE OF REPORT

Stamford Firefighters Local 786 PAC

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name DeFilippis		First Name Matthew		MI
Residential Street Address 45 Park St		City Trumbull	State CT	Zip Code 06611
Principal Occupation FIREFIGHTER		Name of Employer STAMFORD FIRE DEPARTMENT		
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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Slattery		First Name Brian		MI
Residential Street Address 117 Cottage St		City Trumbull	State CT	Zip Code 06611
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Gallas		First Name Michael		MI
Residential Street Address 19 Colonial Rd Apt 11		City Stamford	State CT	Zip Code 06906
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

I. MONETARY RECEIPTS (Section A-K)

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

Stamford Firefighters Local 786 PAC

TYPE OF REPORT

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name O'Neil, Jr		First Name James		MI
Residential Street Address 175 Litchfield St		City Thomaston	State CT	Zip Code 06787
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name O'Neill		First Name Adam		MI
Residential Street Address 43 Wyndover Ln		City Stamford	State CT	Zip Code 06902
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Zeale		First Name Peter		MI
Residential Street Address 629 Main St		City Stamford	State CT	Zip Code 06901
Principal Occupation Firefighter		Name of Employer Stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$84.00	
				\$36.00

I. MONETARY RECEIPTS (Section A-K)

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

TYPE OF REPORT

Stamford Firefighters Local 786 PAC

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Fullilove		First Name Adam		MI
Residential Street Address 19 Stonybrook Rd		City Norwalk	State CT	Zip Code 06851
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name O'Connor		First Name Christopher		MI
Residential Street Address 130 Blachley Rd		City Stamford	State CT	Zip Code 06902
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Caldarone, Jr		First Name Nicholas		MI
Residential Street Address 645 High Ridge Rd		City Stamford	State CT	Zip Code 06905
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

I. MONETARY RECEIPTS (Section A-K)

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

TYPE OF REPORT

Stamford Firefighters Local 786 PAC

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Beach		First Name Gregory		MI
Residential Street Address 177 Edwards Rd		City Cheshire	State CT	Zip Code 06410
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Southard		First Name Ryan		MI
Residential Street Address 103 Ochsner Pl		City Trumbull	State CT	Zip Code 06611
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Lund		First Name Jonathan		MI
Residential Street Address 29 Richards Pl		City Trumbull	State CT	Zip Code 06611
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

I. MONETARY RECEIPTS (Section A-K)

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

TYPE OF REPORT

Stamford Firefighters Local 786 PAC

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Duffy		First Name James		MI
Residential Street Address 1860 N Peters Ln		City Stratford	State CT	Zip Code 06614
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
\$9.00				

Last Name Degnan		First Name Peter		MI
Residential Street Address 52 Nells Rd		City Milford	State CT	Zip Code 06460
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
\$9.00				

Last Name Campbell		First Name Kevin		MI
Residential Street Address 298 Roseville Ter		City Fairfield	State CT	Zip Code 06824
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
\$9.00				

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Stamford Firefighters Local 786 PAC	July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Comarella		First Name Anthony		MI
Residential Street Address 27 Cherry St		City Sandy Hook	State CT	Zip Code 06482
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Loddo		First Name Jeffrey		MI
Residential Street Address 32 Lacona Rd		City Mahopac	State NY	Zip Code 10541
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Jones		First Name Troy		MI
Residential Street Address 39 Keith St		City Stamford	State CT	Zip Code 06902
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

I. MONETARY RECEIPTS (Section A-K)

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

Stamford Firefighters Local 786 PAC

TYPE OF REPORT

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Coscarelli		First Name Jonathan		MI
Residential Street Address 105 Alpine St		City Stamford	State CT	Zip Code 06905
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No			Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Rosero		First Name Michael		MI
Residential Street Address 14 Eastwood Rd		City Norwalk	State CT	Zip Code 06851
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No			Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Gill		First Name Patrick		MI
Residential Street Address 44 Sherwood Rd		City Stamford	State CT	Zip Code 06905
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No			Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

I. MONETARY RECEIPTS (Section A-K)

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

TYPE OF REPORT

Stamford Firefighters Local 786 PAC

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Strain		First Name Eric		MI
Residential Street Address 25 Sutton Dr W		City Stamford	State CT	Zip Code 06906
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No			Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name O'Brien		First Name Brandon		MI
Residential Street Address 283 Sundance Rd		City Stamford	State CT	Zip Code 06905
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No			Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Basile, Jr		First Name Renato		MI
Residential Street Address 66 Hilltop Ave		City Stamford	State CT	Zip Code 06907
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No			Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

I. MONETARY RECEIPTS (Section A-K)

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

Stamford Firefighters Local 786 PAC

TYPE OF REPORT

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Stanek		First Name Theodore		MI	
Residential Street Address 35 Hemmelskamp Rd		City Wilton		State CT	Zip Code 06897
Principal Occupation Fire Fighter		Name of Employer City Of Stamford			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No			Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00		
				\$9.00	

Last Name Perry		First Name Andrew		MI	
Residential Street Address 32 Franklin Rd		City Milford		State CT	Zip Code 06460
Principal Occupation Fire Fighter		Name of Employer City Of Stamford			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No			Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00		
				\$9.00	

Last Name Fellows		First Name Cris		MI	
Residential Street Address 37 Parkwood Rd		City Fairfield		State CT	Zip Code 06824
Principal Occupation Fire Fighter		Name of Employer City Of Stamford			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No			Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$42.00		
				\$18.00	

I. MONETARY RECEIPTS (Section A-K)

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

TYPE OF REPORT

Stamford Firefighters Local 786 PAC

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Silverstone		First Name Adam		MI
Residential Street Address 22 Meadowview Ter		City Monroe	State CT	Zip Code 06468
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No			Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Avalos		First Name Scott		MI
Residential Street Address 1 Edice Rd		City Stamford	State CT	Zip Code 06905
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No			Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Breault		First Name Marc		MI
Residential Street Address 15 Mitchell St		City Stamford	State CT	Zip Code 06902
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No			Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

I. MONETARY RECEIPTS (Section A-K)

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

Stamford Firefighters Local 786 PAC

TYPE OF REPORT

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Teitelbaum		First Name Brian		MI
Residential Street Address 64 Willard Ter		City Stamford	State CT	Zip Code 06903
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
\$9.00				

Last Name Teitelbaum		First Name Jason		MI
Residential Street Address 66 Dann Dr		City Stamford	State CT	Zip Code 06905
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
\$9.00				

Last Name Doherty		First Name James		MI
Residential Street Address 501 Brooklawn Ave		City Fairfield	State CT	Zip Code 06825
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$210.00	
\$90.00				

I. MONETARY RECEIPTS (Section A-K)

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

TYPE OF REPORT

Stamford Firefighters Local 786 PAC

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Esposito		First Name Paul		MI
Residential Street Address 35 Wallace St		City Stamford	State CT	Zip Code 06902
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Hickman		First Name Daniel		MI
Residential Street Address 349 Sylvan Knoll Rd		City Stamford	State CT	Zip Code 06902
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Broadbent		First Name Christopher		MI
Residential Street Address 32 Bishop Dr S		City Greenwich	State CT	Zip Code 06831
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$10.50	
				\$4.50

I. MONETARY RECEIPTS (Section A-K)

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

TYPE OF REPORT

Stamford Firefighters Local 786 PAC

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Lynch		First Name Daniel		MI
Residential Street Address 20 Rexview Cir		City Trumbull	State CT	Zip Code 06611
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
\$9.00				

Last Name Newman		First Name Paul		MI
Residential Street Address 92 W Hill Cir		City Stamford	State CT	Zip Code 06902
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
\$9.00				

Last Name Davis		First Name David		MI
Residential Street Address 81 Kenwood Ave		City Fairfield	State CT	Zip Code 06824
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$105.00	
\$45.00				

I. MONETARY RECEIPTS (Section A-K)

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

Stamford Firefighters Local 786 PAC

TYPE OF REPORT

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Roy		First Name Jaques		MI
Residential Street Address 20 Edgewood Ave		City Trumbull	State CT	Zip Code 06611
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Repp, Jr		First Name Michael		MI
Residential Street Address 2 Boxwood Dr		City Mahopac	State NY	Zip Code 10541
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Lobozza		First Name Michael		MI
Residential Street Address 20 Tower Ave		City Stamford	State CT	Zip Code 06907
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$42.00	
				\$18.00

I. MONETARY RECEIPTS (Section A-K)

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

TYPE OF REPORT

Stamford Firefighters Local 786 PAC

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Munger		First Name Bryan		MI
Residential Street Address 253 Minivale Rd		City Stamford	State CT	Zip Code 06907
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$42.00	
				\$18.00

Last Name Orgera		First Name Michael		MI
Residential Street Address 21 Berrian Rd		City Stamford	State CT	Zip Code 06905
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$31.50	
				\$13.50

Last Name Strangio		First Name Matthew		MI
Residential Street Address 129 Carroll St		City Brooklyn	State NY	Zip Code 11231
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

I. MONETARY RECEIPTS (Section A-K)

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

TYPE OF REPORT

Stamford Firefighters Local 786 PAC

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Murphy		First Name Todd		MI
Residential Street Address 27 Maitland Rd		City Stamford	State CT	Zip Code 06906
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$31.50	
				\$13.50

Last Name Anderson		First Name Paul		MI
Residential Street Address 44 Lawrence Hill Rd		City Stamford	State CT	Zip Code 06903
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$52.50	
				\$22.50

Last Name Tarzia, Jr		First Name James		MI
Residential Street Address 6 Beech Tree Rd		City Brookfield	State CT	Zip Code 06804
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$42.00	
				\$18.00

I. MONETARY RECEIPTS (Section A-K)

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

TYPE OF REPORT

Stamford Firefighters Local 786 PAC

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Voytas		First Name Robert		MI
Residential Street Address 533 Mill Hill Ter		City Southport	State CT	Zip Code 06490
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Malarkey		First Name Daniel		MI
Residential Street Address 80 Oakland Ave		City Stamford	State CT	Zip Code 06905
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Pepe		First Name Andrew		MI
Residential Street Address 5 Hunting Ridge Rd		City Stamford	State CT	Zip Code 06903
Principal Occupation Firefighter		Name of Employer stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

I. MONETARY RECEIPTS (Section A-K)

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

Stamford Firefighters Local 786 PAC

TYPE OF REPORT

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Samson		First Name Scott		MI
Residential Street Address 6 Watson Ct		City Norwalk	State CT	Zip Code 06854
Principal Occupation Firefighter		Name of Employer Stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Cappello		First Name kaylee		MI
Residential Street Address 209 Norfolk Rd		City Litchfield	State CT	Zip Code 06759
Principal Occupation Firefighter		Name of Employer Stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Volta		First Name Michael		MI
Residential Street Address 54 Green Hill Rd		City Orange	State CT	Zip Code 06477
Principal Occupation Firefighter		Name of Employer Stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

I. MONETARY RECEIPTS (Section A-K)

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

Stamford Firefighters Local 786 PAC

TYPE OF REPORT

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Petrafesa		First Name Nicholas		MI
Residential Street Address 52 Sterling Pl		City Stamford	State CT	Zip Code 06907
Principal Occupation Firefighter		Name of Employer Stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Allegra		First Name Jamison		MI
Residential Street Address 28 Carriagehill Dr		City Branford	State CT	Zip Code 06405
Principal Occupation Firefighter		Name of Employer Stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Curtis		First Name Kevin		MI
Residential Street Address 98 Courtland Cir		City Stamford	State CT	Zip Code 06902
Principal Occupation Firefighter		Name of Employer Stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

I. MONETARY RECEIPTS (Section A-K)

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

Stamford Firefighters Local 786 PAC

TYPE OF REPORT

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Tomczyk		First Name jason		MI
Residential Street Address 1633 Washington Blvd # 3E		City Stamford	State CT	Zip Code 06902
Principal Occupation Firefighter		Name of Employer Stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$21.00	
\$9.00				

Last Name Williams		First Name David		MI T
Residential Street Address 15 Midland Ave		City Stamford	State CT	Zip Code 06906
Principal Occupation Firefighter		Name of Employer Stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$21.00	
\$9.00				

Last Name O'Donoghue		First Name John		MI
Residential Street Address 8 Emily Ln		City Seymour	State CT	Zip Code 06483
Principal Occupation Firefighter		Name of Employer Stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$21.00	
\$9.00				

I. MONETARY RECEIPTS (Section A-K)

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

TYPE OF REPORT

Stamford Firefighters Local 786 PAC

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Rotschild		First Name Kyle		MI
Residential Street Address 43 Coachlamp Ln		City Darien	State CT	Zip Code 06820
Principal Occupation Firefighter		Name of Employer Stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Gray-Smith		First Name Tavar		MI
Residential Street Address 39 Pond St		City Bridgeport	State CT	Zip Code 06606
Principal Occupation Firefighter		Name of Employer Stamford Fire Department		
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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Forman		First Name Christopher		MI
Residential Street Address 68 Sandy Ln		City Stamford	State CT	Zip Code 06905
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

I. MONETARY RECEIPTS (Section A-K)

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

TYPE OF REPORT

Stamford Firefighters Local 786 PAC

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Velez		First Name Edward		MI
Residential Street Address 13 Parker Ave		City Stamford	State CT	Zip Code 06906
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Christophersen		First Name Brittany		MI
Residential Street Address 2 Woodcock Ln		City Westport	State CT	Zip Code 06880
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Adams		First Name Owen		MI
Residential Street Address 17 Honey Hill Rd		City Norwalk	State CT	Zip Code 06851
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

I. MONETARY RECEIPTS (Section A-K)

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

Stamford Firefighters Local 786 PAC

TYPE OF REPORT

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Adams, IV		First Name Lance		MI
Residential Street Address 157 Wardwell St		City Stamford	State CT	Zip Code 06902
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$9.00	
				\$9.00

Last Name Japha		First Name Adam		MI
Residential Street Address 107 Red Frox Rd		City Stamford	State CT	Zip Code 06903
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$42.00	
				\$18.00

Last Name Brewer		First Name Bradley		MI D
Residential Street Address 29 Andover Rd		City Stamford	State CT	Zip Code 06902
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

I. MONETARY RECEIPTS (Section A-K)

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

TYPE OF REPORT

Stamford Firefighters Local 786 PAC

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name Lane		First Name Riis		MI
Residential Street Address 282 Barn Hill Rd		City Monroe	State CT	Zip Code 06468
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Robustelli		First Name Krista		MI
Residential Street Address 105 Bouton St W		City Stamford	State CT	Zip Code 06907
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

Last Name Cruz		First Name Ervin		MI
Residential Street Address 32 Middlebury St		City Stamford	State CT	Zip Code 06902
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
				\$9.00

I. MONETARY RECEIPTS (Section A-K)

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

Stamford Firefighters Local 786 PAC

TYPE OF REPORT

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name O'Brien		First Name Keven		MI
Residential Street Address 27 Pine Hill Ter		City Stamford	State CT	Zip Code 06903
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
\$9.00				

Last Name Murphy		First Name Toren		MI
Residential Street Address 131 Lawn Ave		City Stamford	State CT	Zip Code 06902
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
\$9.00				

Last Name Sinaguglia		First Name Matthew		MI M
Residential Street Address 76 Oaklawn Ave		City Stamford	State CT	Zip Code 06905
Principal Occupation Fire Fighter		Name of Employer City Of Stamford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00	
\$9.00				

I. MONETARY RECEIPTS (Section A-K)

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

TYPE OF REPORT

Stamford Firefighters Local 786 PAC

July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name LoRusso		First Name Christopher		MI	
Residential Street Address 75 Hidden Brook Dr		City Stamford		State CT	Zip Code 06907
Principal Occupation Fire Fighter		Name of Employer City Of Stamford			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution	
Is this contribution associated with an event reported in Section L1? If yes, list Event # ☐ 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 06/18/2026	Aggregate Contributions \$21.00		
Last Name Andreozzi		First Name James		MI	
Residential Street Address 6 Williams Rd		City New Fairfield		State CT	Zip Code 06812
Principal Occupation Firefighter		Name of Employer Stamford Fire Department			
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 06/18/2026	Aggregate Contributions \$9.00		
Last Name Ferris		First Name Jeremy		MI	
Residential Street Address 3 Quago Trl		City Shelton		State CT	Zip Code 06854
Principal Occupation Firefighter		Name of Employer Stamford Fire Department			
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 06/18/2026	Aggregate Contributions \$9.00		
Total of Section B				\$1,710.00	
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Total on Line 13 of Summary Page)				\$1,710.00	

I. MONETARY RECEIPTS (Section A-K)					
NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)					TYPE OF REPORT
Stamford Firefighters Local 786 PAC					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?			Amount of Contribution
		Yes No 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					TYPE OF REPORT
Stamford Firefighters Local 786 PAC					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
Stamford Firefighters Local 786 PAC	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)				Amount Received	
Street Address	City	State	Zip Code		

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

NAME OF COMMITTEE	TYPE OF REPORT
Stamford Firefighters Local 786 PAC	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
Stamford Firefighters Local 786 PAC	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
Stamford Firefighters Local 786 PAC	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
Stamford Firefighters Local 786 PAC	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
Stamford Firefighters Local 786 PAC			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	
Stamford Firefighters Local 786 PAC			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	
Stamford Firefighters Local 786 PAC			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
Stamford Firefighters Local 786 PAC	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
Stamford Firefighters Local 786 PAC	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
Stamford Firefighters Local 786 PAC	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
Stamford Firefighters Local 786 PAC	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
Stamford Firefighters Local 786 PAC	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
Stamford Firefighters Local 786 PAC	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	
Stamford Firefighters Local 786 PAC		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	
Stamford Firefighters Local 786 PAC			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	
Stamford Firefighters Local 786 PAC			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	