

SEEC FORM 20

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



Electronic Filing

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COVER PAGE

1. NAME OF COMMITTEE			
Jason Rojas PAC			
2. TREASURER NAME			
First	MI	Last	Suffix
Trenton		Kapij	
3. TREASURER ADDRESS			
Street Address	City	State	Zip Code
1800 Silas Deane Hwy Apt 120S	Rocky Hill	CT	06067
4. ELECTION/REFERENDUM DATE	5. OFFICE SOUGHT (Complete only if Candidate Committee)		6. DISTRICT NUMBER (if applicable)
7. CANDIDATE NAME (Complete only if Candidate or Exploratory Committee)			
First	MI	Last	Suffix
8. TYPE OF REPORT			
October 10 Filing - Amendment			
9. PERIOD COVERED			
Beginning Date Ending Date			
07/01/2024 thru 09/30/2024			
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	Trenton Kapij	07/10/2026 5:27:12PM	
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	
Jason Rojas PAC	October 10 Filing - Amendment	
	COLUMN A This Period	COLUMN B Aggregate
11. Balance on hand January 1 of current year for Ongoing and Party Committees OR Balance on hand from day Committee was formed for all other Committees		\$3,241.40
12. Balance on hand at the beginning of Reporting Period	\$1,210.95	
13. Contributions received from Individuals (Section A and B)	\$5,045.00	\$5,145.00
14. Receipts from Other Committees (Sections C1 and C2)	\$2,000.00	\$2,000.00
15. Other Monetary Receipts (Section D through K)	\$0.00	\$0.00
16a. Total Proceeds from Small Purchases (Section L1 Subpart 1 + Subpart 3)	\$0.00	\$0.00
16b. Per Public Act 11-48, effective January 1,2012 Section L2 removed		
16c. Total Purchases of Advertising - Program Book or Sign (Section L3)	\$2,250.00	\$2,250.00
17. Total Monetary Receipts (add totals for lines 13 through 16c)	\$9,295.00	\$9,395.00
18. Subtotals (add totals in Line 12 + 17 in Column A and in Line 11 + 17 in Column B)	\$10,505.95	\$12,636.40
19. Expenses Paid by Committee (Section P)	\$2,642.54	\$4,772.99
20. Balance on hand at close of Reporting Period (Subtract line 19 from line 18 in both columns)	\$7,863.41	\$7,863.41
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)	\$180.00	
28a. Total Outstanding Expenses Incurred by Committee still Unpaid (Section S)	\$180.00	

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Jason Rojas PAC	October 10 Filing - Amendment
A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor)	\$0.00
Subtotal Section A	

B. Itemized Contributions from Individuals

Last Name Smith		First Name Mike		MI
Residential Street Address 228 Shadyside Ln		City Milford	State CT	Zip Code 06460
Principal Occupation Lobbyist		Name of Employer Rome Smith Kowalski		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	☒ Yes ☐ No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000?		Amount of Contribution
Is this contribution associated with an event reported in Section L1?	☒ Yes ☐ No	If contributor a principal of state contractor or prospective state contractor?		
If yes, list Event # <u>07112024A</u>	☐ Executive ☐ Legislative	If yes, indicate which branch or branches of government the contract is with:		
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		07/10/2024	\$100.00	\$100.00

Last Name Luna		First Name Victor		MI
Residential Street Address 17 Chapin Pl		City Hartford	State CT	Zip Code 06114
Principal Occupation Director Latino Fest USA		Name of Employer Luna Ent. Prod. LLC		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	☐ Yes ☒ No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000?		Amount of Contribution
Is this contribution associated with an event reported in Section L1?	☒ Yes ☐ No	If contributor a principal of state contractor or prospective state contractor?		
If yes, list Event # <u>07112024A</u>	☐ Executive ☐ Legislative	If yes, indicate which branch or branches of government the contract is with:		
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		07/11/2024	\$50.00	\$50.00

Last Name Bilodeau		First Name Kelly		MI
Residential Street Address 97 Roslyn St		City Hartford	State CT	Zip Code 06106
Principal Occupation Town Clerk		Name of Employer Town of East Hartford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	☐ Yes ☒ No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000?		Amount of Contribution
Is this contribution associated with an event reported in Section L1?	☒ Yes ☐ No	If contributor a principal of state contractor or prospective state contractor?		
If yes, list Event # <u>07112024A</u>	☐ Executive ☐ Legislative	If yes, indicate which branch or branches of government the contract is with:		
Method of Contribution		Date Received	Aggregate Contributions	
☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		07/11/2024	\$30.00	\$30.00

I. MONETARY RECEIPTS (Section A-K)

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

Jason Rojas PAC

TYPE OF REPORT

October 10 Filing - Amendment

B. Itemized Contributions from Individuals

Last Name Cimini		First Name Jacqueline		MI
Residential Street Address 71 Hunters Rdg		City Rocky Hill	State CT	Zip Code 06067
Principal Occupation Homemaker		Name of Employer Homemaker		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>07112024A</u> ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 07/11/2024	Aggregate Contributions \$100.00	
				\$100.00

Last Name Cimini		First Name Peter		MI J
Residential Street Address 71 Hunters Rdg		City Rocky Hill	State CT	Zip Code 06067
Principal Occupation Lobbyist		Name of Employer Capitol Strategies Group, LLC		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>07112024A</u> ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 07/11/2024	Aggregate Contributions \$100.00	
				\$100.00

Last Name Brakeman		First Name Beverley		MI
Residential Street Address 189 Newington Rd # 304		City West Hartford	State CT	Zip Code 06110
Principal Occupation Lobbyist		Name of Employer Brakeman Advocacy		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>07112024A</u> ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 07/11/2024	Aggregate Contributions \$50.00	
				\$50.00

I. MONETARY RECEIPTS (Section A-K)

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

Jason Rojas PAC

TYPE OF REPORT

October 10 Filing - Amendment

B. Itemized Contributions from Individuals

Last Name Campion		First Name Brooks		MI
Residential Street Address 42 Macintosh Ln		City Glastonbury	State CT	Zip Code 06033
Principal Occupation Lobbyist		Name of Employer Robinson & Cole LLP		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>07112024A</u> ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 07/11/2024	Aggregate Contributions \$100.00	
				\$100.00

Last Name Sisco		First Name Brenda		MI
Residential Street Address 10 Brockway Rd		City Ellington	State CT	Zip Code 06029
Principal Occupation Lobbyist		Name of Employer RSG		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>07112024A</u> ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 07/11/2024	Aggregate Contributions \$100.00	
				\$100.00

Last Name Cappiello		First Name Christine		MI
Residential Street Address 31 Old Farm Hill Rd		City Newtown	State CT	Zip Code 06470
Principal Occupation Registered Lobbyist		Name of Employer Anthem Blue Cross & Blue Shield		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>07112024A</u> ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 07/11/2024	Aggregate Contributions \$100.00	
				\$100.00

I. MONETARY RECEIPTS (Section A-K)

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

Jason Rojas PAC

TYPE OF REPORT

October 10 Filing - Amendment

B. Itemized Contributions from Individuals

Last Name Reynolds		First Name Kevin		MI
Residential Street Address 71 Sycamore Rd		City West Hartford	State CT	Zip Code 06117
Principal Occupation Lobbyist		Name of Employer RSG		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No			Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 07112024A ☒ 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 07/11/2024	Aggregate Contributions \$100.00	
				\$100.00

Last Name Shea		First Name Timothy		MI
Residential Street Address 9 Hatheway Rd		City Ellington	State CT	Zip Code 06029
Principal Occupation Lobbyist		Name of Employer Brown Rudnick		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No			Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 07112024A ☒ 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 07/11/2024	Aggregate Contributions \$100.00	
				\$100.00

Last Name Hallisey		First Name Matthew		MI
Residential Street Address 13 Stancliffe Rd		City Glastonbury	State CT	Zip Code 06033
Principal Occupation Lobbyist		Name of Employer Matthew Hallisey Government Affairs LLC		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No			Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 07112024A ☒ 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 07/11/2024	Aggregate Contributions \$40.00	
				\$40.00

I. MONETARY RECEIPTS (Section A-K)

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

Jason Rojas PAC

TYPE OF REPORT

October 10 Filing - Amendment

B. Itemized Contributions from Individuals

Last Name Cuervels		First Name Timothy		MI
Residential Street Address 30 Cushing Hill Rd		City Hanover	State MA	Zip Code 02339
Principal Occupation Vice President		Name of Employer Eversource		
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 # 07112024A ☒ 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 07/11/2024	Aggregate Contributions \$100.00	
				\$100.00

Last Name Felton-Reid		First Name Hilary		MI
Residential Street Address 24 Center St		City Wethersfield	State CT	Zip Code 06109
Principal Occupation Lobbyist		Name of Employer Robinson & Cole		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No			Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 07112024A ☒ 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 07/11/2024	Aggregate Contributions \$100.00	
				\$100.00

Last Name Scott		First Name Christy		MI
Residential Street Address 261 E Haddam Colchester Tpke		City East Haddam	State CT	Zip Code 06423
Principal Occupation Lawyer		Name of Employer State of Connecticut		
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 # 07112024A ☒ 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 07/11/2024	Aggregate Contributions \$100.00	
				\$100.00

I. MONETARY RECEIPTS (Section A-K)

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

Jason Rojas PAC

TYPE OF REPORT

October 10 Filing - Amendment

B. Itemized Contributions from Individuals

Last Name Doyle		First Name Michael		MI
Residential Street Address 92 Summit Rd		City Storrs	State CT	Zip Code 06268
Principal Occupation Lobbyist		Name of Employer Gaffney, Bennett, & Associates		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>07112024A</u> ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 07/11/2024	Aggregate Contributions \$100.00	
				\$100.00

Last Name Cournoyer		First Name Brian		MI
Residential Street Address 33 Mitchel Ter		City Ivoryton	State CT	Zip Code 06442
Principal Occupation Lobbyist		Name of Employer Ct Hospital Association		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>07112024A</u> ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 07/11/2024	Aggregate Contributions \$100.00	
				\$100.00

Last Name Malone		First Name Jude		MI
Residential Street Address 200 River Rd		City Mystic	State CT	Zip Code 06335
Principal Occupation Government Relations		Name of Employer CT Beer Wholesalers Association		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>07112024A</u> ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 07/11/2024	Aggregate Contributions \$100.00	
				\$100.00

I. MONETARY RECEIPTS (Section A-K)

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

Jason Rojas PAC

TYPE OF REPORT

October 10 Filing - Amendment

B. Itemized Contributions from Individuals

Last Name McCabe		First Name Patrick		MI
Residential Street Address 11 Forest Rd		City West Hartford	State CT	Zip Code 06119
Principal Occupation Government Relations		Name of Employer Capitol Strategies Group		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 07112024A ☒ 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 07/11/2024	Aggregate Contributions \$100.00	
				\$100.00

Last Name Gemski		First Name Elizabeth		MI
Residential Street Address 5 Farmstead Ln		City Farmington	State CT	Zip Code 06032
Principal Occupation Lobbyist		Name of Employer Kozak & Salina		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 07112024A ☒ 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 07/16/2024	Aggregate Contributions \$100.00	
				\$100.00

Last Name Caaman		First Name Oscar		MI
Residential Street Address 221 Trumbull St		City Hartford	State CT	Zip Code 06103
Principal Occupation Legislative Aide		Name of Employer City of Hartford		
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 # 07112024A ☒ 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 07/16/2024	Aggregate Contributions \$50.00	
				\$50.00

I. MONETARY RECEIPTS (Section A-K)

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

Jason Rojas PAC

TYPE OF REPORT

October 10 Filing - Amendment

B. Itemized Contributions from Individuals

Last Name Ferrigno		First Name Jonathan		MI
Residential Street Address 60 Arnold Way		City West Hartford	State CT	Zip Code 06119
Principal Occupation Government Affairs		Name of Employer Eversource		
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 # 09122024B ☒ 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 09/11/2024	Aggregate Contributions \$50.00	
				\$50.00

Last Name Bzdya		First Name Michael		MI
Residential Street Address 99 Beverly Rd # 1		City West Hartford	State CT	Zip Code 06119
Principal Occupation Lobbyist		Name of Employer FOCUS Government Affairs		
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 # 09122024B ☒ 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 09/12/2024	Aggregate Contributions \$100.00	
				\$100.00

Last Name Johnson		First Name Susan		MI M
Residential Street Address 120 Bolivia St		City Willimantic	State CT	Zip Code 06226
Principal Occupation Attorney		Name of Employer Obrien + Johnson, Attorneys At Law		
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 # 09122024B ☒ 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 09/12/2024	Aggregate Contributions \$25.00	
				\$25.00

I. MONETARY RECEIPTS (Section A-K)

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

Jason Rojas PAC

TYPE OF REPORT

October 10 Filing - Amendment

B. Itemized Contributions from Individuals

Last Name Magnoli		First Name TJ		MI
Residential Street Address 1 W Meadow Ln		City Middletown	State CT	Zip Code 06457
Principal Occupation Community Relations		Name of Employer Eversource		
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 # 09122024B ☒ 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 09/12/2024	Aggregate Contributions \$50.00	
				\$50.00

Last Name Sobin		First Name Linda		MI
Residential Street Address 16 Straddle HI		City Wethersfield	State CT	Zip Code 06109
Principal Occupation Lobbyist		Name of Employer Self		
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 # 09122024B ☒ 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 09/12/2024	Aggregate Contributions \$100.00	
				\$100.00

Last Name Hughes		First Name Sean		MI
Residential Street Address 48 Daniels Ave		City Waterford	State CT	Zip Code 06385
Principal Occupation Lobbyist		Name of Employer Hughes and Cronin		
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 # 09122024B ☒ 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 09/12/2024	Aggregate Contributions \$100.00	
				\$100.00

I. MONETARY RECEIPTS (Section A-K)

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

Jason Rojas PAC

TYPE OF REPORT

October 10 Filing - Amendment

B. Itemized Contributions from Individuals

Last Name Keenan		First Name Daniel		MI
Residential Street Address 7 Wintergreen Cir		City Southwick	State MA	Zip Code 01077
Principal Occupation Lawyer/Lobbyist		Name of Employer Trinity Health Of New England		
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 # 09122024B ☒ 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 09/12/2024	Aggregate Contributions \$100.00	
				\$100.00

Last Name Przybysz		First Name Kenneth		MI
Residential Street Address 50 Goodwin Cir		City Hartford	State CT	Zip Code 06105
Principal Occupation Lobbyist		Name of Employer Self-Employed - Przybysz + Associates Government A		
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 # 09122024B ☒ 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 09/12/2024	Aggregate Contributions \$100.00	
				\$100.00

Last Name George		First Name Eric		MI
Residential Street Address 52 Gregory Hill Dr		City Glastonbury	State CT	Zip Code 06033
Principal Occupation President		Name of Employer IAC		
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 # 09122024B ☒ 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 09/12/2024	Aggregate Contributions \$100.00	
				\$100.00

I. MONETARY RECEIPTS (Section A-K)

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

Jason Rojas PAC

TYPE OF REPORT

October 10 Filing - Amendment

B. Itemized Contributions from Individuals

Last Name Sullivan		First Name Brian		MI
Residential Street Address 39 Dartmouth Ave		City West Hartford	State CT	Zip Code 06110
Principal Occupation Lobbyist		Name of Employer Przybysz & Associates		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>09122024B</u> ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 09/12/2024	Aggregate Contributions \$100.00	
				\$100.00

Last Name Shea		First Name Timothy		MI
Residential Street Address 9 Hatheway Rd		City Ellington	State CT	Zip Code 06029
Principal Occupation Lobbyist		Name of Employer Brown Rudnick		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>09122024B</u> ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 09/12/2024	Aggregate Contributions \$200.00	
				\$100.00

Last Name VanDeHeuf		First Name Christopher		MI
Residential Street Address 17 Lincoln Ave		City West Hartford	State CT	Zip Code 06117
Principal Occupation Lobbyist		Name of Employer Penn Lincoln Strategies		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>09122024B</u> ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 09/12/2024	Aggregate Contributions \$100.00	
				\$100.00

I. MONETARY RECEIPTS (Section A-K)

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

Jason Rojas PAC

TYPE OF REPORT

October 10 Filing - Amendment

B. Itemized Contributions from Individuals

Last Name Hughes		First Name Josh		MI
Residential Street Address 34 Lexington Rd		City West Hartford	State CT	Zip Code 06119
Principal Occupation Lobbyist		Name of Employer Capitol Consulting		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No			Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 09122024B ☒ 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 09/12/2024	Aggregate Contributions \$100.00	
				\$100.00

Last Name Bingham		First Name Ryan		MI
Residential Street Address 20 Spencer Brook Rd		City New Hartford	State CT	Zip Code 06057
Principal Occupation Lobbyist		Name of Employer Sullivan & LeShane		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No			Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 09122024B ☒ 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 09/12/2024	Aggregate Contributions \$100.00	
				\$100.00

Last Name Avallone		First Name Joy		MI
Residential Street Address 45 Country Club Rd		City Bolton	State CT	Zip Code 06043
Principal Occupation Lobbyist		Name of Employer Roy & LeRoy		
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 # 09122024B ☒ 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 09/12/2024	Aggregate Contributions \$100.00	
				\$100.00

I. MONETARY RECEIPTS (Section A-K)

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

Jason Rojas PAC

TYPE OF REPORT

October 10 Filing - Amendment

B. Itemized Contributions from Individuals

Last Name Hughes		First Name Jean		MI C
Residential Street Address 88 Sheffield St		City Old Saybrook	State CT	Zip Code 06475
Principal Occupation Lobbyist		Name of Employer Hughes & Cronin		
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 # 09122024B ☒ 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 09/12/2024	Aggregate Contributions \$100.00	
				\$100.00

Last Name Fox		First Name Brendan		MI
Residential Street Address 43 Bonny View Rd		City West Hartford	State CT	Zip Code 06107
Principal Occupation Attorney		Name of Employer Law Office of Jay Malcynsky		
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 # 09122024B ☒ 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 09/12/2024	Aggregate Contributions \$100.00	
				\$100.00

Last Name Obrien		First Name Leslie		MI
Residential Street Address 125 Summit St		City Windham	State CT	Zip Code 06226
Principal Occupation Director Government Affairs		Name of Employer Eversource		
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 # 09122024B ☒ 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 09/12/2024	Aggregate Contributions \$100.00	
				\$100.00

I. MONETARY RECEIPTS (Section A-K)

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

Jason Rojas PAC

TYPE OF REPORT

October 10 Filing - Amendment

B. Itemized Contributions from Individuals

Last Name Kinney		First Name Stephen		MI
Residential Street Address 20 Cromwell Pl		City Old Saybrook	State CT	Zip Code 06475
Principal Occupation Lobbyist		Name of Employer Gaffney Bennett		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 09122024B ☒ 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 09/12/2024	Aggregate Contributions \$100.00	
				\$100.00

Last Name Hallisey		First Name Matthew		MI
Residential Street Address 13 Standcliffe Rd		City Glastonbury	State CT	Zip Code 06033
Principal Occupation Lobbyist		Name of Employer Matthew Hallisey Government Affairs LLC		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 09122024B ☒ 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 09/12/2024	Aggregate Contributions \$140.00	
				\$100.00

Last Name Paolino		First Name James		MI
Residential Street Address 29 S Colman Rd		City Wolcott	State CT	Zip Code 06716
Principal Occupation Lobbyist		Name of Employer Focus Government Affairs		
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 # 09122024B ☒ 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 09/12/2024	Aggregate Contributions \$100.00	
				\$100.00

I. MONETARY RECEIPTS (Section A-K)

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

Jason Rojas PAC

TYPE OF REPORT

October 10 Filing - Amendment

B. Itemized Contributions from Individuals

Last Name Johnson		First Name Michael		MI
Residential Street Address 11 Shady Ln		City West Hartford	State CT	Zip Code 06117
Principal Occupation Lobbyist		Name of Employer Sullivan & LeShane		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 09122024B ☒ 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 09/12/2024	Aggregate Contributions \$100.00	
\$100.00				

Last Name Corey		First Name Arthur		MI
Residential Street Address 24 Valley View Rd		City Glastonbury	State CT	Zip Code 06033
Principal Occupation Trade Association Executive		Name of Employer CT Bankers Association		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 09122024B ☒ 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 09/12/2024	Aggregate Contributions \$100.00	
\$100.00				

Last Name Mongellow		First Name Thomas		MI S
Residential Street Address 257 Adrian Ave		City Newington	State CT	Zip Code 06111
Principal Occupation TRADE ASSOCIATION EXEC		Name of Employer CT Bankers Association		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 09122024B ☒ 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 09/12/2024	Aggregate Contributions \$100.00	
\$100.00				

I. MONETARY RECEIPTS (Section A-K)

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

Jason Rojas PAC

TYPE OF REPORT

October 10 Filing - Amendment

B. Itemized Contributions from Individuals

Last Name DiBella		First Name Marc		MI
Residential Street Address 1 Gold St # 27J		City Hartford	State CT	Zip Code 06103
Principal Occupation Lobbyist		Name of Employer 3d Consulting LLC		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 09122024B ☒ 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 09/12/2024	Aggregate Contributions \$100.00	
				\$100.00

Last Name Sweeney		First Name Liam		MI
Residential Street Address 29 Penn Dr		City West Hartford	State CT	Zip Code 06119
Principal Occupation Lobbyist		Name of Employer Penn Lincoln Strategies		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 09122024B ☒ 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 09/12/2024	Aggregate Contributions \$100.00	
				\$100.00

Last Name Gionfriddo		First Name Ross		MI
Residential Street Address 122 Pine Knob Dr		City South Windsor	State CT	Zip Code 06074
Principal Occupation lobbyist		Name of Employer Focus Government		
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 # 09122024B ☒ 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 09/12/2024	Aggregate Contributions \$100.00	
				\$100.00

I. MONETARY RECEIPTS (Section A-K)

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

Jason Rojas PAC

TYPE OF REPORT

October 10 Filing - Amendment

B. Itemized Contributions from Individuals

Last Name Cappiello		First Name David		MI
Residential Street Address 31 Old Farm Hill Rd		City Newtown	State CT	Zip Code 06470
Principal Occupation Government Relations		Name of Employer Capitol Hill Group		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>09122024B</u> ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 09/12/2024	Aggregate Contributions \$100.00	

Last Name Bourassa		First Name Alexis		MI
Residential Street Address 248 Dale Rd		City Wethersfield	State CT	Zip Code 06109
Principal Occupation Lobbyist		Name of Employer FOCUS Government Affairs		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>09122024B</u> ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 09/12/2024	Aggregate Contributions \$100.00	

Last Name Malitsky		First Name William		MI
Residential Street Address 200 Gilead St		City Hebron	State CT	Zip Code 06248
Principal Occupation Lobbyist		Name of Employer FOCUS		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>09122024B</u> ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 09/12/2024	Aggregate Contributions \$100.00	

I. MONETARY RECEIPTS (Section A-K)

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

Jason Rojas PAC

TYPE OF REPORT

October 10 Filing - Amendment

B. Itemized Contributions from Individuals

Last Name Dendas		First Name Zach		MI
Residential Street Address 2 Curiosity Ln		City Essex	State CT	Zip Code 06426
Principal Occupation Gov Affairs		Name of Employer sullivan & leshane		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>09122024B</u> ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 09/12/2024	Aggregate Contributions \$100.00	

Last Name DiBella		First Name William		MI
Residential Street Address 1 Gold St # 27J		City Hartford	State CT	Zip Code 06103
Principal Occupation Lobbyist		Name of Employer 3D Consultants		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>09122024B</u> ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 09/12/2024	Aggregate Contributions \$100.00	

Last Name Glass		First Name Hillary		MI
Residential Street Address 71 Sycamore Rd		City West Hartford	State CT	Zip Code 06107
Principal Occupation Lobbyist		Name of Employer RSG		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>09122024B</u> ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 09/13/2024	Aggregate Contributions \$100.00	

I. MONETARY RECEIPTS (Section A-K)

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

Jason Rojas PAC

TYPE OF REPORT

October 10 Filing - Amendment

B. Itemized Contributions from Individuals

Last Name Hill		First Name Kevin		MI
Residential Street Address 81 Broad St		City Wethersfield	State CT	Zip Code 06109
Principal Occupation Lobbyist		Name of Employer Powers, Griffin, & Hill		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? ☐ Yes ☐ No		Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>09122024B</u> ☒ Yes ☐ No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative ☐ Yes ☒ No		
Method of Contribution ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Date Received 09/13/2024	Aggregate Contributions \$100.00	
				\$100.00
Total of Section B				\$5,045.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Total on Line 13 of Summary Page)				\$5,045.00

I. MONETARY RECEIPTS (Section A-K)

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

Jason Rojas PAC

TYPE OF REPORT

October 10 Filing - Amendment

C1. Contributions from Other Committees

Name of Committee CT Realtors PAC		Name of Treasurer Joseph Stafford		
Address 111 Founders Plz Ste 1101		Is this contribution associated with an event reported in Section L1? ☐ Yes ☒ No If yes, list Event #		Amount of Contribution
City East Hartford	State CT	Zip Code 06108	Date Received 07/01/2024	
		Aggregate Contributions \$0.00		\$750.00
Name of Committee SEIU Local 32BJ Connecticut PAC		Name of Treasurer Rochelle Palache		
Address 885 Wethersfield Ave		Is this contribution associated with an event reported in Section L1? ☐ Yes ☒ No If yes, list Event #		Amount of Contribution
City Hartford	State CT	Zip Code 06114-3195	Date Received 08/21/2024	
		Aggregate Contributions \$2,000.00		\$2,000.00
Total of Section C1				\$2,000.00

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	TYPE OF REPORT
Jason Rojas PAC	October 10 Filing - Amendment

C2. Reimbursements or Surplus Distributions from other Committees

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

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Jason Rojas PAC	October 10 Filing - Amendment

D. Loans Received this Period

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

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE				TYPE OF REPORT	
Jason Rojas PAC				October 10 Filing - Amendment	
E. Receipts from Entities other than Individuals or Other Committees (<i>Referendum Committees ONLY</i>)					
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	
Jason Rojas PAC				October 10 Filing - Amendment	
F. Amount Transferred from Affiliated Business Treasury (<i>Business Entity Committees ONLY</i>)					
Date of Receipt	Is this transaction associated with an event reported in Section L1? Yes No If yes, list Event #				Amount
Total of Section F					

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE		TYPE OF REPORT	
Jason Rojas PAC		October 10 Filing - Amendment	
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	
Jason Rojas PAC		October 10 Filing - Amendment	
H. Personal Funds of the Candidate Received this Period (Candidate Committees ONLY)			
Date of Receipt	Method of Payment		Amount
	Cash	Personal Check	Credit/Debit Card
Total of Section H			

I. Monetary Receipts (Section A-K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)		TYPE OF REPORT	
Jason Rojas PAC		October 10 Filing - Amendment	
J. Interest from Deposits in Authorized Accounts			
Name of Institution		Date Received	
Street Address	City	State	Zip Code
Total of Section J			

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE		TYPE OF REPORT	
Jason Rojas PAC		October 10 Filing - Amendment	
K. Miscellaneous Monetary Receipts not Considered Contributions			
Name		Date of Transaction	
Street Address	City	State	Zip Code
Description			Amount Received
Total of Section K			

II. EVENT ACTIVITY (Sections L1 - L5)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Jason Rojas PAC	October 10 Filing - Amendment

L1. Event Information

Event # Date of Event 07/11/2024	Letter A	Description Cocktail Event	Was this a fundraising event? ☒ Yes ☐ No	
Location: Street Address 539 Broad St		City Hartford	State CT	Zip Code 06106
<i>Subpart 1: (All Committees)</i> Was this event hosted at a personal residence?		☐ Yes ☒ No	<i>(If yes, go to Section L5 In-Kind Donations not Considered Contributions Associated with a House Party and complete required information for any purchases made by host(s) for food, beverage and invitations.)</i>	
Did this fundraiser include goods or services donated by a business entity of up to \$200 or items donated by an individual of up to \$100?		☐ Yes ☒ No	<i>(If yes, go to Section L4 In-Kind Donations not Considered Contributions and complete required information.)</i>	
Was this fundraiser a tag sale, auction, or other sale of donated items with purchases from an individual of up to \$100?		☐ Yes ☒ No	<i>(If yes, enter Total Receipts here.)</i>	\$0.00
<i>Subpart 2: (Party Committees, Municipal Candidates and Political Committees other than Exploratory Committees)</i> Were there purchases of advertising space in a program book or on a sign associated with this fundraiser?		☒ Yes ☐ No	<i>(If yes, go to Section L3 Purchases of Advertising Space in a Program Book or on a Sign and complete required information.)</i>	
<i>Subpart 3: (Town Committees ONLY)</i> Did your committee sell food or beverage at a fair or similar mass gathering held within the state with this fundraiser?		☐ Yes ☐ No	<i>(If yes, enter Total Receipts here.)</i>	\$0.00

Event # Date of Event 09/12/2024	Letter B	Description Cocktail Event	Was this a fundraising event? ☒ Yes ☐ No	
Location: Street Address 369 Capitol Ave		City Hartford	State CT	Zip Code 06106
<i>Subpart 1: (All Committees)</i> Was this event hosted at a personal residence?		☐ Yes ☒ No	<i>(If yes, go to Section L5 In-Kind Donations not Considered Contributions Associated with a House Party and complete required information for any purchases made by host(s) for food, beverage and invitations.)</i>	
Did this fundraiser include goods or services donated by a business entity of up to \$200 or items donated by an individual of up to \$100?		☐ Yes ☒ No	<i>(If yes, go to Section L4 In-Kind Donations not Considered Contributions and complete required information.)</i>	
Was this fundraiser a tag sale, auction, or other sale of donated items with purchases from an individual of up to \$100?		☐ Yes ☒ No	<i>(If yes, enter Total Receipts here.)</i>	\$0.00
<i>Subpart 2: (Party Committees, Municipal Candidates and Political Committees other than Exploratory Committees)</i> Were there purchases of advertising space in a program book or on a sign associated with this fundraiser?		☒ Yes ☐ No	<i>(If yes, go to Section L3 Purchases of Advertising Space in a Program Book or on a Sign and complete required information.)</i>	
<i>Subpart 3: (Town Committees ONLY)</i> Did your committee sell food or beverage at a fair or similar mass gathering held within the state with this fundraiser?		☐ Yes ☐ No	<i>(If yes, enter Total Receipts here.)</i>	\$0.00

Total of Section L1	\$0.00
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II. EVENT ACTIVITY (Sections L1 - L5)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Jason Rojas PAC	October 10 Filing - Amendment

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

Name of Purchaser Depino, Nunez, & Biggs				Purchase Made By: ☒ Business Entity ☐ Other ☐ Individual/Sole Proprietorship	
Street Address PO Box 1937			City New Haven	State CT	Zip Code 06532
Date Received 07/02/2024	Event # 07112024A	Aggregate Purchases for All Events \$250.00	Amount of Program Ad Purchase \$250.00	Amount of Sign Purchase	

Name of Purchaser Robinson + Cole				Purchase Made By: ☒ Business Entity ☐ Other ☐ Individual/Sole Proprietorship	
Street Address 280 Trumbull St .			City Hartford	State CT	Zip Code 06103
Date Received 07/05/2024	Event # 07112024A	Aggregate Purchases for All Events \$250.00	Amount of Program Ad Purchase \$250.00	Amount of Sign Purchase	

Name of Purchaser CT Association of Health Plans				Purchase Made By: ☒ Business Entity ☐ Other ☐ Individual/Sole Proprietorship	
Street Address 280 Trumbull St			City Hartford	State CT	Zip Code 06103
Date Received 07/05/2024	Event # 07112024A	Aggregate Purchases for All Events \$250.00	Amount of Program Ad Purchase \$250.00	Amount of Sign Purchase	

Name of Purchaser Capitol Strategies Group				Purchase Made By: ☒ Business Entity ☐ Other ☐ Individual/Sole Proprietorship	
Street Address 36 Trumbull St			City Hartford	State CT	Zip Code 06103
Date Received 07/08/2024	Event # 07112024A	Aggregate Purchases for All Events \$250.00	Amount of Program Ad Purchase \$250.00	Amount of Sign Purchase	

II. EVENT ACTIVITY (Sections L1 - L5)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Jason Rojas PAC	October 10 Filing - Amendment

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

Name of Purchaser Mashantucket Pequot Gaming Enterprise			Purchase Made By: ☒ Business Entity ☐ Other ☐ Individual/Sole Proprietorship	
Street Address 250 Trolley Lane Blvd .		City Mashantucket	State CT	Zip Code 06338
Date Received 08/30/2024	Event # 09122024B	Aggregate Purchases for All Events \$250.00	Amount of Program Ad Purchase \$250.00	Amount of Sign Purchase

Name of Purchaser Sullivan & Leshane Inc			Purchase Made By: ☒ Business Entity ☐ Other ☐ Individual/Sole Proprietorship	
Street Address 287 Capitol Ave		City Hartford	State CT	Zip Code 06106
Date Received 09/12/2024	Event # 09122024B	Aggregate Purchases for All Events \$250.00	Amount of Program Ad Purchase \$250.00	Amount of Sign Purchase

Name of Purchaser Mohegan Tribe of Indians of Connecticut			Purchase Made By: ☒ Business Entity ☐ Other ☐ Individual/Sole Proprietorship	
Street Address 13 Crow Hill Rd		City Uncasville	State CT	Zip Code 06382
Date Received 09/12/2024	Event # 09122024B	Aggregate Purchases for All Events \$250.00	Amount of Program Ad Purchase \$250.00	Amount of Sign Purchase

Name of Purchaser Gaffney, Bennett, And Associates, INC.			Purchase Made By: ☒ Business Entity ☐ Other ☐ Individual/Sole Proprietorship	
Street Address 1 Liberty Sq Ste 201		City New Britain	State CT	Zip Code 06051-2658
Date Received 09/12/2024	Event # 09122024B	Aggregate Purchases for All Events \$250.00	Amount of Program Ad Purchase \$250.00	Amount of Sign Purchase

II. EVENT ACTIVITY (Sections L1 - L5)				
NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)			TYPE OF REPORT	
Jason Rojas PAC			October 10 Filing - Amendment	
L3. Purchases of Advertising in a Program Book or on a Sign				
Name of Purchaser Coca Cola Beverages Northeast			Purchase Made By: ☒ Business Entity ☐ Other ☐ Individual/Sole Proprietorship	
Street Address 1 Executive Park Dr		City Bedford	State NH	Zip Code 03110
Date Received 09/17/2024	Event # 09122024B	Aggregate Purchases for All Events \$250.00	Amount of Program Ad Purchase \$250.00	Amount of Sign Purchase
Total of Section L3				\$2,250.00

II. EVENT ACTIVITY (Sections L1 - L5)							
NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)			TYPE OF REPORT				
Jason Rojas PAC			October 10 Filing - Amendment				
L4. In-Kind Donations Not Considered Contributions							
Name of the Donor							
Street Address		City		State Zip Code			
Donation Given by: Business Entity Individual Sole Proprietorship	Description of Donation <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Date Received</td> <td>Event #</td> <td>Aggregate value for this event</td> </tr> </table>			Date Received	Event #	Aggregate value for this event	Fair Market Value of Donation
Date Received	Event #	Aggregate value for this event					
Total of Section L4							

II.EVENT ACTIVITY (Sections L1 - L5)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Jason Rojas PAC	October 10 Filing - Amendment

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

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

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

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Jason Rojas PAC	October 10 Filing - Amendment

M. In-Kind Contributions

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

Total of Section M

III. Non Monetary Receipts (Sections M - O)

NAME OF COMMITTEE	TYPE OF REPORT
Jason Rojas PAC	October 10 Filing - Amendment

N. Refundable Deposit to Telephone Company

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

Total of Section N

IV. EXPENDITURES (Sections P - T)

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

TYPE OF REPORT

Jason Rojas PAC

October 10 Filing - Amendment

P. Expenses Paid By Committee

Name of Payee

Fire By Forge

Date of Payment

07/11/2024

Method of Payment

☐

Check #

☒

Debit Card

☐

EFT

Street Address

539 Broad St

City

Hartford

State

CT

Zip Code

06106

Purpose of
Expenditure (by code)

FNDR *

Description

Paid for event space and catering at a fundraiser

Event #

07112024A

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

\$642.54

Name of Payee

Southington Democratic Town Committee

Date of Payment

08/23/2024

Method of Payment

☒

Check #

2143

☐

Debit Card

☐

EFT

Street Address

PO Box 726

City

Southington

State

CT

Zip Code

06489

Purpose of
Expenditure (by code)

CNTRB

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

\$1,000.00

Name of Payee

Ansonia Democratic Town Committee

Date of Payment

09/20/2024

Method of Payment

☒

Check #

2144

☐

Debit Card

☐

EFT

Street Address

14 Granite Ter

City

Ansonia

State

CT

Zip Code

06401

Purpose of
Expenditure (by code)

CNTRB

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

\$1,000.00

Total of Section P**\$2,642.54**

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

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

IV. EXPENDITURES

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)			TYPE OF REPORT	
Jason Rojas PAC			October 10 Filing - Amendment	
S. Expenses Incurred By Committee but Not Paid During this Period				
Name of Creditor Red Rock Tavern			Date Incurred 09/12/2024	
Street Address 369 Capitol Ave		City Hartford	State CT	Zip Code 06106
Purpose of Expenditure (by code) FNDR *	Description Expense associated with catering at a fundraiser. Was charged to the wrong card. Will be writing a check to make up for charge to wrong card.			Event # 09122024B
Expenditure# (if applicable)	Type of Expenditure (Itemization in Addendum S Required unless "None of the below" is checked) ☒ None of the below ☐ Coordinated with reimbursement sought (joint expenditure) ☐ Independent ☐ Coordinated without reimbursement sought (in-kind contribution) ☐ Organization : ☐ A ☐ B ☐ C ☐ D			Amount Incurred (Estimate or Actual) \$180.00
Total of Section S				\$180.00

IV. EXPENDITURES (Sections P - T)

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

Section L5. ADDENDUM	
NAME OF COMMITTEE	TYPE OF REPORT
L5. In - Kind Donations Not Considered Contribution Associated with a House Party - Addendum	
Event #	
Name of Candidate or Committee	

Section P. ADDENDUM		
NAME OF COMMITTEE	TYPE OF REPORT	
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	