**SEEC FORM 30**
Itemized Campaign Finance Disclosure Statement
CONNECTICUT STATE ELECTIONS ENFORCEMENT COMMISSION
Revised February 2015

Electronic Filing

Do Not Mark in This Space For Official Use Only



# COVER PAGE

| 1.NAME OF COMMITTEE | 2. TYPE OF COMMITTEE |
|---|---|
| **Josh for CT** | [x] Candidate Committee<br>[ ] Exploratory Committee |

3. TREASURER NAME

| First | MI | Last | Suffix |
|---|---|---|---|
| **Cory** | **A** | **O'Brien** | |

4. TREASURER ADDRESS

| Street Address | City | State | Zip Code |
|---|---|---|---|
| **124 Haverford St** | **Hamden** | **CT** | **06517** |

| 5. ELECTION DATE | 6. OFFICE SOUGHT *( Complete only if Candidate Committee)* | 7. DISTRICT NUMBER *( if applicable )* |
|---|---|---|
| **11/03/2026** | **Governor** | |

8. CANDIDATE NAME (Complete only if Candidate or Exploratory Committee)

| First | MI | Last | Suffix |
|---|---|---|---|
| **Joshua** | | **Elliott** | |

9. TYPE OF REPORT

**April 10 Filing - Amendment**

10. PERIOD COVERED

| Beginning Date | | Ending Date |
|---|---|---|
| **01/01/2026** | thru | **03/31/2026** |

11. CERTIFICATION

[x] 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** | **Carol Hazen** | **06/09/2026 3:22:47PM** |
|---|---|---|
| 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 of up to $25,000, unless a fine of a larger amount is otherwise provided for as a maximum fine in the Connecticut General Statutes.**

**SEEC FORM 30**
Itemized Campaign Finance Disclosure Statement
CONNECTICUT STATE ELECTIONS ENFORCEMENT COMMISSION
Revised February 2015

## SUMMARY PAGE TOTALS

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT | |
|---|---|---|
| **Josh for CT** | April 10 Filing - Amendment | |
| | COLUMN A<br>This Period | COLUMN B<br>Aggregate |
| 12. Balance on hand from day Committee was formed | | **$0.00** |
| 13. Balance on hand at the beginning of Reporting Period | **$23,851.94** | |
| 14. Contributions received from Individuals (Section A and B) | **$118,076.77** | **$203,258.77** |
| 15. Receipts from Other Committees (Sections C1 and C2) | **$0.00** | **$0.00** |
| 16. Other Monetary Receipts (Section D through I) | **$0.00** | **$1,490.00** |
| 17. Total Proceeds from Tag Sales, Auctions or Other Sales (Section J1) | **$0.00** | **$0.00** |
| 18. Total Monetary Receipts (add totals for lines 14 through 17) | **$118,076.77** | **$204,748.77** |
| 19. Subtotals (add totals in Line 13 + 18 in Column A and in lines 12 + 18 in Column B) | **$141,928.71** | **$204,748.77** |
| 20. Expenses Paid by Committee (Section N) | **$62,784.51** | **$125,604.57** |
| 21. Balance on hand at close of Reporting Period (Subtract line 20 from line 19 in both columns ) | **$79,144.20** | **$79,144.20** |
| 22. In-Kind Donations not Considered Contributions Received (Section J3) | **$0.00** | **$0.00** |
| 23. In-Kind Donations not Considered Contributions - House Party (Section J4) | **$623.42** | **$1,718.30** |
| 24. In-Kind Contributions Received (Section K) | **$0.00** | **$0.00** |
| 25. Refundable Deposit to Telephone Company (Section L) | **$0.00** | **$0.00** |
| 26. Beginning Loan Balance | **$0.00** | |
| 26a. + Loans Received (Section D) | **$0.00** | **$0.00** |
| 26b. + Interest and Penalties on Loan(s) | **$0.00** | **$0.00** |
| 26c. - Payments on Loan(s) | **$0.00** | **$0.00** |
| 26d. Total Outstanding Loan Amount | **$0.00** | |
| 27. Campaign Expenses Paid By Candidate (Section O) | **$2,708.89** | **$3,552.17** |
| 28. Expenses Incurred on Committee Credit Card (Section P) | **$0.00** | **$0.00** |
| 29. Expenses Incurred by Committee During this Period but Not Paid (Section Q) | **$0.00** | |
| 29a. Total Outstanding Expenses Incurred by Committee still Unpaid (Section Q) | **$0.00** | |

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

**A. Total Contributions from Small Contributors-Received this Period ONLY** — For Nonparticipating Candidates ONLY: **$0.00**

**B. Itemized Contributions from Individuals**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Henry | Francis E | | 1653 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 26 Hemlock St | Bridgeport | CT | 06605 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $27.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/01/2026

Aggregate Contributions: $27.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Tesoro | Thomas | | 1654 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 133 Beechwood Ave | Trumbull | CT | 06611 |

| Principal Occupation | Name of Employer |
|---|---|
| Professor | University of New Haven |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/01/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hermanson | Olaf | | 1650 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 25 Cold Spring Dr | Vernon | CT | 06066 |

| Principal Occupation | Name of Employer |
|---|---|
| Organizer | Massachusetts Nurses Association |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/02/2026

Aggregate Contributions: $50.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Ash | Kimberly | | 1651 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1215 North Rd | Groton | CT | 06340 |

| Principal Occupation | Name of Employer |
|---|---|
| Disabled | Disabled |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/02/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Yuabov | Mark | | 1652 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 83 Trumpet Brook Rd | Waterbury | CT | 06708 |

| Principal Occupation | Name of Employer |
|---|---|
| Computer Programmer | Masonicare |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/02/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Simms | Travis | | 1648 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 28 Dr Martin Luther King Jr Dr | Norwalk | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Founder/CEO | Tremendous Promotions, LLC |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/03/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cementina | Alan | | 1649 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 904 Flanders Rd | Coventry | CT | 06238 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/03/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Sacco | Jennifer | | 1647 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 54 Thompson St | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| Professor | Quinnipiac University |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.26

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/04/2026

Aggregate Contributions: $20.26

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Malloy~~ | ~~Stevenson~~ | | ~~1646~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~40 Gallaria Dr~~ | ~~Mays Landing~~ | ~~NJ~~ | ~~08330~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Freelancer~~ | ~~Self-employed~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/05/2026~~

Aggregate Contributions: ~~$10.00~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Malloy** | **Stevenson** | | **1646** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **40 Gallaria Dr** | **Mays Landing** | **NJ** | **08330** |

| Principal Occupation | Name of Employer |
|---|---|
| **unemployed** | **unemployed** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/05/2026**

Aggregate Contributions: **$5.00**

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Rosado Burch** | **Louis** | | **1645** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **20 Baldwin Ave .** | **Meriden** | **CT** | **06450** |

| Principal Occupation | Name of Employer |
|---|---|
| **Legislative Coordinator** | **CT Education Association** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No

Amount of Contribution: **$28.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/06/2026**

Aggregate Contributions: **$28.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Rosado-Burch~~ | ~~Louis~~ | | ~~1645~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~20 Baldwin Ave .~~ | ~~Meriden~~ | ~~CT~~ | ~~06450~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Legislative Coordinator~~ | ~~CT Education Association~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No

Amount of Contribution: ~~$28.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/06/2026~~

Aggregate Contributions: ~~$56.00~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Muguerza | Renato | | 1642 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 27 Ellington St | Hartford | CT | 06106 |

| Principal Occupation | Name of Employer |
|---|---|
| Legislative aide | City of hartford |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/07/2026

Aggregate Contributions: $10.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Machuga | Marcia | | 1643 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 25 Sunset Rd | Old Saybrook | CT | 06475 |

| Principal Occupation | Name of Employer |
|---|---|
| Registered Dietitian | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/07/2026

Aggregate Contributions: $25.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Madara | Barbara | | 1644 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 29 Highview Rd | South Windsor | CT | 06074 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/07/2026

Aggregate Contributions: $5.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Joy | Brian | | 1640 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 655 Talcottville Rd | Vernon | CT | 06066 |

| Principal Occupation | Name of Employer |
|---|---|
| Associate Analyst | Eversource Energy |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/08/2026

Aggregate Contributions: $10.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Farnsworth | Peter | | 1641 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 82 Chichester Rd | New Canaan | CT | 06840 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/08/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Kearney | Frederick T | | 1639 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 16 James Ave | Quaker Hill | CT | 06375 |

| Principal Occupation | Name of Employer |
|---|---|
| retired attorney and carpenter | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $15.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/09/2026

Aggregate Contributions: $15.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Gillman | Mark | | 1634 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 612 Manchester Rd | Glastonbury | CT | 06033 |

| Principal Occupation | Name of Employer |
|---|---|
| Cheese maker | Cato Corner Farm LLC |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/10/2026

Aggregate Contributions: $50.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Wolliston | Nathan | | 1635 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 15 Rainbow Crk | Windsor | CT | 06095 |

| Principal Occupation | Name of Employer |
|---|---|
| New Business Specialist | Global Atlantic Financial Group |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/10/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Pilson | Arthur | | 1636 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 163 South St | Danbury | CT | 06810 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/10/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Orban | Laura | | 1637 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 95 Stony Hill Rd | Brookfield | CT | 06804 |

| Principal Occupation | Name of Employer |
|---|---|
| Technology Manager | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/10/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hochberg | Andrew | | 1638 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 6 Saw Mill Hill Rd | Ridgefield | CT | 06877 |

| Principal Occupation | Name of Employer |
|---|---|
| Insurance | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/10/2026

Aggregate Contributions: $100.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Haskell | Bette Jane Z. | | 1621 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 94 Rocky Rd E | Harwinton | CT | 06791 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $320.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/11/2026

Aggregate Contributions: $320.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Doucette | Heather | | 1622 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 85 Stephanie's Way | Manchester | CT | 06040 |

| Principal Occupation | Name of Employer |
|---|---|
| Program Manager | State of CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/11/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Klein | Rhea | | 1623 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 4 Bayberry Rd | Bolton | CT | 06043 |

| Principal Occupation | Name of Employer |
|---|---|
| Regired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/11/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Caffrey | Karen | | 1624 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 30 Jenny Clfs | Manchester | CT | 06040 |

| Principal Occupation | Name of Employer |
|---|---|
| Psychotherapist | Karen Caffrey LPC |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $320.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/11/2026

Aggregate Contributions: $395.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Correa-Brown~~ | ~~Linda Ivelisse~~ | | ~~1625~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~11 Bank St~~ | ~~Manchester~~ | ~~CT~~ | ~~06040~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Activist~~ | ~~BLM860~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~01/11/2026~~ | ~~$50.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Stebe | Michael | | 1626 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 85 Hollister St | Manchester | CT | 06042 |

| Principal Occupation | Name of Employer |
|---|---|
| Supervisor | State of CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 01/11/2026 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Bacolini~~ | ~~Paula~~ | | ~~1627~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~11 Garland Dr .~~ | ~~Glastonbury~~ | ~~CT~~ | ~~06033~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Speech therapy~~ | ~~Paula Bacolini, Speech Language Pathologist, Fluen~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~01/11/2026~~ | ~~$100.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Dans~~ | ~~Tom~~ | | ~~1628~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~285 Evergreen Ave~~ | ~~Hamden~~ | ~~CT~~ | ~~06518~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Piano Tuner~~ | ~~Piano Island Tuning~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~01/11/2026~~ | ~~$40.00~~ |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Myerson~~ | ~~Ellen~~ | | ~~1629~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~10 Berkshire Rd~~ | ~~West Hartford~~ | ~~CT~~ | ~~06110~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Actuary~~ | ~~Coaction Specialty Insurance~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/11/2026~~

Aggregate Contributions: ~~$150.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Caelin | Derek | | 1630 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 116 Ridgewood Dr | Rocky Hill | CT | 06067 |

| Principal Occupation | Name of Employer |
|---|---|
| Product Manager | Tech Matters |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/11/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Prizio | Adam | | 1631 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 46 Holly Ln | Wethersfield | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Attorney | State Of Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/11/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Kirsch | Sophia | | 1632 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 34 Algonquin Trl | Sandy Hook | CT | 06482 |

| Principal Occupation | Name of Employer |
|---|---|
| student | student |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $320.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/11/2026

Aggregate Contributions: $320.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| RENNER | ANNE | | 1633 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 34 Algonquin Trl | Sandy Hook | CT | 06482 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $320.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 01/11/2026 | $320.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Bacolini** | **Paula** | | **1627** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **11 Garland Dr .** | **Glastonbury** | **CT** | **06033** |

| Principal Occupation | Name of Employer |
|---|---|
| **Speech-Language Pahologist** | **Paula Bacolini** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| **01/11/2026** | **$50.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Correa-Brown** | **Linda Ivelisse** | | **1625** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **11 Bank St** | **Manchester** | **CT** | **06040** |

| Principal Occupation | Name of Employer |
|---|---|
| **Office Assistant** | **K&S Wholesale** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| **01/11/2026** | **$25.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Myerson** | **Ellen** | | **1629** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **30 Sandhurst Dr** | **West Hartford** | **CT** | **06107** |

| Principal Occupation | Name of Employer |
|---|---|
| **Actuary** | **Coaction Specialty Insurance** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| **01/11/2026** | **$75.00** |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Dans** | **Tom** | | **1628** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **285 Evergreen Ave** | **Hamden** | **CT** | **06518** |

| Principal Occupation | Name of Employer |
|---|---|
| **Piano Tuner** | **Piano Island Tuning** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **01/11/2026** | **$30.00** | **$10.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Ware** | **Samson** | | **1618** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **155 Birchwood St** | **Waterbury** | **CT** | **06708** |

| Principal Occupation | Name of Employer |
|---|---|
| **Electrician** | **Griffin Electrical Contractors Inc.** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **01/12/2026** | **$5.00** | **$5.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Geist** | **Gabriel** | | **1616** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **116 Briarcliff Rd** | **Hamden** | **CT** | **06518** |

| Principal Occupation | Name of Employer |
|---|---|
| **Teacher** | **New Haven Board of Education** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **01/12/2026** | **$125.00** | **$100.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| connolly | paul | | 1615 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 60 N Cove Rd | Old Saybrook | CT | 06475 |

| Principal Occupation | Name of Employer |
|---|---|
| Publisher | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 01/12/2026 | $150.00 | $150.00 |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Geist~~ | ~~Gabriel~~ | | ~~1616~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~116 Briarcliff Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06518~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Teacher~~ | ~~None~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/12/2026~~

Aggregate Contributions: ~~$225.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Schult | Jeffrey | | 1617 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 42 Algonquin Trl | Sandy Hook | CT | 06482 |

| Principal Occupation | Name of Employer |
|---|---|
| Writer | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $320.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/12/2026

Aggregate Contributions: $320.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Ware~~ | ~~Samson~~ | | ~~1618~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~155 Birchwood St~~ | ~~Waterbury~~ | ~~CT~~ | ~~06708~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~N/A~~ | ~~N/A~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/12/2026~~

Aggregate Contributions: ~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hornish | Neil | | 1619 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 864 Thrall Ave | Suffield | CT | 06078 |

| Principal Occupation | Name of Employer |
|---|---|
| Systems Project Engineer | Collins Aerospace |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/12/2026

Aggregate Contributions: $100.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hornish | Annie | | 1620 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 864 Thrall Ave | Suffield | CT | 06078 |

| Principal Occupation | Name of Employer |
|---|---|
| Connecticut State Director | Humane World for Animals |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/12/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Heiss | Laurie | | 1601 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 105 Cross Hwy | Redding | CT | 06896 |

| Principal Occupation | Name of Employer |
|---|---|
| Writer, farmer, consultant | Crossfield Concepts Inc |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/13/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Mazzella | Anthony | | 1602 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 376 Pendleton Hill Rd | North Stonington | CT | 06359 |

| Principal Occupation | Name of Employer |
|---|---|
| Plant operator | Millstone |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $15.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/13/2026

Aggregate Contributions: $15.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Floyd | Myra | | 1603 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 376 Pendleton Hill Rd | North Stonington | CT | 06359 |

| Principal Occupation | Name of Employer |
|---|---|
| Student | Staples |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/13/2026

Aggregate Contributions: $10.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Conner | Desmond | | 1604 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 16 Putter Pl | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Press | State of CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/13/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Rosenthal | Ellen | | 1605 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 185 Thornton St | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/13/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Favreau | Janice | | 1606 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 446 Pleasant Valley Rd | South Windsor | CT | 06074 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/13/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Isles | Keegan | | 1607 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 254 Bozrah St | Bozrah | CT | 06334 |

| Principal Occupation | Name of Employer |
|---|---|
| Electrical Engineer | Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/13/2026

Aggregate Contributions: $10.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Heimer | Win | | 1608 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 799 Prospect Ave # A2 | West Hartford | CT | 06105 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/13/2026

Aggregate Contributions: $45.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Johnston | Melissa | | 1609 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 451 Herbert St | Orange | CT | 06477 |

| Principal Occupation | Name of Employer |
|---|---|
| Marketing | Defibtech LLC |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/13/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Pijar-Gardner | Jackie | | 1610 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1 Campbell Ave | West Haven | CT | 06516 |

| Principal Occupation | Name of Employer |
|---|---|
| HMIS Director | ACT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/13/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Strange | Sarah | | 1611 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 9 Huckleberry Acres Rd | East Hampton | CT | 06424 |

| Principal Occupation | Name of Employer |
|---|---|
| Analyst | Travelers Insurance Cos |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/13/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Strong | Julien | | 1612 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 55 Belmont St | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Professor | CCSU |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/13/2026

Aggregate Contributions: $127.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Spinato | Kathy | | 1613 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 44 S Cherry St | Wallingford | CT | 06492 |

| Principal Occupation | Name of Employer |
|---|---|
| Data integrity Technician II | Yale New Haven Health Corporation |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/13/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Schomaker | Kathleen | | 1614 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 37 Hepburn Rd | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/13/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Desjardins | John | | 1582 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 523 Raymond Hill Rd | Uncasville | CT | 06382 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired, Man of Leisure. | Retired. |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/14/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Krantz | Thomas | | 1583 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 143 Hoyt St | Stamford | CT | 06905 |

Principal Occupation: Board of directors of an association in Belgium

Name of Employer: retired

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/14/2026

Aggregate Contributions: $685.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Paradis | Eric | | 1584 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 85 Riverside Rd | Newtown | CT | 06482 |

Principal Occupation: EDUCATION

Name of Employer: ACES

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $26.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/14/2026

Aggregate Contributions: $26.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Levesque | Larry | | 1585 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 32 Park Place Cir | West Hartford | CT | 06110 |

Principal Occupation: Retired

Name of Employer: Retired

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/14/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Garrett~~ | ~~Daniel~~ | | ~~1586~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~106 Sherman Ave~~ | ~~Hamden~~ | ~~CT~~ | ~~06518~~ |

Principal Occupation: ~~Property manager~~

Name of Employer: ~~Self~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/14/2026~~

Aggregate Contributions: ~~$125.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hunter | David | | 1587 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 319 Hill St | Hamden | CA | |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/14/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Ladenheim | Kerry | | 1588 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 856 W Woods Rd | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| Homemaker | Homemaker |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/14/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Beman | Elizabeth | | 1589 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 21 Wicker St | Putnam | CT | 06260 |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | Town of Douglas |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/14/2026

Aggregate Contributions: $45.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cohen | Harold | | 1590 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 200 Leeder Hill Dr | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/14/2026

Aggregate Contributions: $100.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Pasqualoni | Taryn | | 1591 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 23 Winthrop Ave | Oak Bluffs | MA | 02557 |

| Principal Occupation | Name of Employer |
|---|---|
| Bartender | State Road Restaurant |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/14/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cash | William | | 1592 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 586 Opening Hill Rd | Madison | CT | 06443 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/14/2026

Aggregate Contributions: $102.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Paddock | Troy | | 1593 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 65 Dawes Ave | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Professor | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/14/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Ruijter | Lyda | | 1594 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 43 Harbor Dr # 511 | Stamford | CT | 06902 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/14/2026

Aggregate Contributions: $100.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hinton | Michael | | 1595 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 41 Long Society Rd | Preston | CT | 06365 |

| Principal Occupation | Name of Employer |
|---|---|
| Professor | CT State Community College |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/14/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Wood~~ | ~~Sarah~~ | | ~~1596~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~198 Gulf St~~ | ~~Milford~~ | ~~CT~~ | ~~06460~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Social Media Strategist~~ | ~~Self-employed~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/14/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Taylor | Rachel | | 1597 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 108 Kenyon St | Hartford | CT | 06105 |

| Principal Occupation | Name of Employer |
|---|---|
| Director of Reaching Beyobd | Hartford Promise |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/14/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Brandis | Marie | | 1598 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 33 Central Aveh | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/14/2026

Aggregate Contributions: $50.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| DiVito | Nicholas | | 1599 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 127 S Vine St | Meriden | CT | 06451 |

| Principal Occupation | Name of Employer |
|---|---|
| Waste and Recycling Inspector | City of Hartford |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/14/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Fiftal | Leon | | 1600 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 80 Briarcliff Rd | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/14/2026

Aggregate Contributions: $30.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Garrett** | **Daniel** | | **1586** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **106 Sherman Ave** | **Hamden** | **CT** | **06518** |

| Principal Occupation | Name of Employer |
|---|---|
| **Property manager** | **Dan Garrett** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/14/2026**

Aggregate Contributions: **$75.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Wood** | **Sarah** | | **1596** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **198 Gulf St** | **Milford** | **CT** | **06460** |

| Principal Occupation | Name of Employer |
|---|---|
| **Social Media Strategist** | **Relevate Strategies LLC** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/14/2026**

Aggregate Contributions: **$25.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McFadden | Laurie | | 1576 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 484 Long Hill Rd | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/15/2026

Aggregate Contributions: $200.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Summers | Pamm | | 1577 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 105 Nagy Rd | Ashford | CT | 06278 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/15/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Walsh | Nancy S | | 1578 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 7 N Main St | Old Saybrook | CT | 06475 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/15/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Levine | Linnea | | 1579 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 201 Main St | Westport | CT | 06880 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/15/2026

Aggregate Contributions: $5.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Wahl | Brian | | 1580 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 100 York Streeet | New Haven | CT | 06511 |

| Principal Occupation | Name of Employer |
|---|---|
| Assistant Professor | Yale University |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/15/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Patterson | Bettina | | 1581 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 88 Notch Hill Rd Apt 144 | North Branford | CT | 06471 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/15/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Watson~~ | ~~Gavin~~ | | ~~1566~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~70 Crescent Dr~~ | ~~Ridgefield~~ | ~~CT~~ | ~~06877~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~NA~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/16/2026~~

Aggregate Contributions: ~~$275.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Bradley | Catherine | | 1567 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 41 Wolfpit Ave | Norwalk | CT | 06851 |

| Principal Occupation | Name of Employer |
|---|---|
| Social worker | Rvnahealth |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/16/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Prasad | Sheela | | 1568 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 70 W Shepard Ave | Hamden | CT | 06514 |

| Principal Occupation | Name of Employer |
|---|---|
| Educator | Teach for America |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/16/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Gray | Nicholas | | 1569 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 202 Soundview Ave | Stamford | CT | 06902 |

| Principal Occupation | Name of Employer |
|---|---|
| Director | College |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/16/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Garrett~~ | ~~Connor~~ | | ~~1570~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~106 Sherman Ave~~ | ~~Hamden~~ | ~~CT~~ | ~~06518~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Student~~ | ~~Student~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/16/2026~~

Aggregate Contributions: ~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Novarro | Alexander | | 1571 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 40 Farmington Dr | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| Sustainability Analyst | Trellis Group |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/16/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Machuga | Marcia | | 1572 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 25 Sunset Rd | Old Saybrook | CT | 06475 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/16/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Saylor | Liz | | 1573 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 388 Fowler Ave | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Artist | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/16/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Bailey~~ | ~~Joy~~ | | ~~1574~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~9 Pocono Point Rd~~ | ~~Danbury~~ | ~~CT~~ | ~~06811~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/16/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McKeon | Edward | | 1575 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 76 Pearl St | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/16/2026

Aggregate Contributions: $50.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Watson** | **Gavin** | | **1566** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **70 Crescent Dr** | **Ridgefield** | **CT** | **06877** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/16/2026**

Aggregate Contributions: **$200.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Garrett** | **Connor** | | **1570** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **106 Sherman Ave** | **Hamden** | **CT** | **06518** |

| Principal Occupation | Name of Employer |
|---|---|
| **Student** | **Student** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/16/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Bailey** | **Joy** | | **1574** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **9 Pocono Point Rd** | **Danbury** | **CT** | **06811** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/16/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| IRWIN | JAMES | | 1565 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 58 Marbern Dr | Suffield | CT | 06078 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/17/2026

Aggregate Contributions: $100.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| baehr | ashley | | 1559 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 203 Lakeview Ter . | New Haven | CT | 06515 |

| Principal Occupation | Name of Employer |
|---|---|
| special education teacher | Reachout-Inc. |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/18/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Keeley | Raymond | | 1560 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 49 Valley Rd | Hamden | CT | 06514 |

| Principal Occupation | Name of Employer |
|---|---|
| Student | Student |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/18/2026

Aggregate Contributions: $20.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| kurta | bill | | 1561 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 8404 106th Ave | Ozone Park | NY | 11417 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/18/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Taborsak | Julia | | 1562 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 2 Docs Way | New Milford | CT | 06776 |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | Bethel Board of Education |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/18/2026

Aggregate Contributions: $50.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Sarbello | AnnMarie | | 1563 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 8 Crest Ln | New Milford | CT | 06776 |

| Principal Occupation | Name of Employer |
|---|---|
| Educator | Rumsey Hall School |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/18/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Chafee | Brandon | | 1564 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 73 Ten Acre Rd | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Engineer | Eversource |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/18/2026

Aggregate Contributions: $250.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Elliott~~ | ~~William~~ | | ~~1546~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~116 Battis Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06514~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Flight attendant~~ | ~~Delta Air Lines~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/19/2026~~

Aggregate Contributions: ~~$20.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Avugara | Chigozie | | 1547 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 28 Skyline Dr | East Hampton | CT | 06424 |

| Principal Occupation | Name of Employer |
|---|---|
| Employee full time | None |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/19/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Ivain | Stephen | | 1548 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 417 Westside Ln | Torrington | CT | 06790 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $320.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/19/2026

Aggregate Contributions: $320.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Huizenga~~ | ~~Susan~~ | | ~~1549~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~36 Surrey Dr~~ | ~~Wallingford~~ | ~~CT~~ | ~~06492~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~retired~~ | ~~retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$140.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/19/2026~~

Aggregate Contributions: ~~$380.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Beach | Randall | | 1550 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 49 Autumn St . | New Haven | CT | 06511 |

| Principal Occupation | Name of Employer |
|---|---|
| Self-employed writer | Freelance writer |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/19/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Grade | Aaron | | 1551 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 51 Cooper Ave | Wallingford | CT | 06492 |

| Principal Occupation | Name of Employer |
|---|---|
| Scientist | ICF |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/19/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Machuga | Edward | | 1552 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 25 Sunset Rd | Old Saybrook | CT | 06475 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/19/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Kimble | Violet | | 1553 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 22 Gold St Apt | New Haven | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| PhD student | Yale University |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/19/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Gartland | Kevin | | 1554 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1245 Main St | Rahway | NJ | 07065 |

| Principal Occupation | Name of Employer |
|---|---|
| Associate Attorney | Law Office of Ahmad Keshavarz |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/19/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Grody | Marilyn | | 1555 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 110 High Wood Rd | West Hartford | CT | 06117 |

| Principal Occupation | Name of Employer |
|---|---|
| Attorney | Aetna |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/19/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Harris~~ | ~~Amy~~ | | ~~1556~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~820 Stafford Ave~~ | ~~Bristol~~ | ~~CT~~ | ~~06010~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~01/19/2026~~ | ~~$150.00~~ |

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Kline | Arleen | | 1557 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 43 Cope Farms Rd | Farmington | CT | 06032 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 01/19/2026 | $50.00 |

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Harmon | John | | 1558 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 16 White Ave | West Hartford | CT | 06119 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 01/19/2026 | $50.00 |

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Elliott** | **William** | | **1546** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **116 Battis Rd** | **Hamden** | **CT** | **06514** |

| Principal Occupation | Name of Employer |
|---|---|
| **Flight attendant** | **Delta Air Lines** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| **01/19/2026** | **$10.00** |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Harris** | **Amy** | | **1556** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **820 Stafford Ave** | **Bristol** | **CT** | **06010** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/19/2026**

Aggregate Contributions: **$75.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Huizenga** | **Susan** | | **1549** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **36 Surrey Dr** | **Wallingford** | **CT** | **06492** |

| Principal Occupation | Name of Employer |
|---|---|
| **retired** | **retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$140.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/19/2026**

Aggregate Contributions: **$240.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **jayne** | **callie mackenzie** | | **1541** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **151 First Ave** | **Kingston** | **NY** | **12401** |

| Principal Occupation | Name of Employer |
|---|---|
| **Social Change Worker** | **callie mackenzie** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$27.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/20/2026**

Aggregate Contributions: **$27.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~jayne~~ | ~~callie mackenzie~~ | | ~~1541~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~151 First Ave~~ | ~~Kingston~~ | ~~NY~~ | ~~12401~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Social Change Worker~~ | ~~Self Employed - callie mackenzie~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$27.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/20/2026~~

Aggregate Contributions: ~~$54.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Buhler | William | | 1542 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 8 Winchester Way | Cromwell | CT | 06416 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/20/2026

Aggregate Contributions: $300.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Duplessis | Kara | | 1543 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 53 Parker St | Wallingford | CT | 06492 |

| Principal Occupation | Name of Employer |
|---|---|
| PA | YNHH |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/20/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hulten | Julie | | 1544 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 39 Ashlar Village Dr | Wallingford | CT | 06492 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/20/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Kehoe | Kaitlin | | 1545 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 151 Lebanon Ave | Colchester | CT | 06415 |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | Colchester Board of Educatiom |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/20/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Paradis | Christina | | 1539 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 85 Riverside Rd | Sandy Hook | CT | 06482 |

| Principal Occupation | Name of Employer |
|---|---|
| IT Business Consultant | Boehringer Ingelheim |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $26.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/20/2026

Aggregate Contributions: $26.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Jenkins | Karen | | 1540 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1 Brewery Sq | New Haven | CT | 06513 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/20/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Elango | Anitha | | 1515 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 108 Lisa Dr | South Windsor | CT | 06074 |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | University of Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/21/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Sanchez | Teofilo | | 1516 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 109 Pease Rd | Woodbridge | CT | 06525 |

| Principal Occupation | Name of Employer |
|---|---|
| No | No |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/21/2026

Aggregate Contributions: $50.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Covett~~ | ~~Katie~~ | | ~~1517~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1188 Trout Brook Dr~~ | ~~West Hartford~~ | ~~CT~~ | ~~06119~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Self employed, business owner~~ | ~~Soulstar team~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/21/2026~~

Aggregate Contributions: ~~$85.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| FABRIZI | NANCY | | 1518 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 923 Clintonville Rd | Wallingford | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/21/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Wright | David | | 1519 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 680 Knapps Hwy | Fairfield | CT | 06825 |

| Principal Occupation | Name of Employer |
|---|---|
| Musician | Musician |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/21/2026

Aggregate Contributions: $30.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Glaser | Ben | | 1520 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 895 Hartford Tpke | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Admin | Yale |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/21/2026

Aggregate Contributions: $20.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Williamson~~ | ~~Clifton~~ | | ~~1521~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~118 Ross Rd~~ | ~~Lansing~~ | ~~NY~~ | ~~14882~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~No~~ | ~~No~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~01/21/2026~~ | ~~$300.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Menta~~ | ~~Anne Marie~~ | | ~~1522~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~365 Mather St Unit 190~~ | ~~Hamden~~ | ~~CT~~ | ~~06514~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~01/21/2026~~ | ~~$10.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Bruce | Lori | | 1523 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 34 Deepwood Dr | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Ethics | Yale |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 01/21/2026 | $125.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Rousseau | Jarrett | | 1524 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 105 Quinnipiac Ave | North Haven | CT | 06473 |

| Principal Occupation | Name of Employer |
|---|---|
| Plumber | Rousseau plumbing |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 01/21/2026 | $50.00 |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Carpio | Diana | | 1525 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 8 Fourth St | Norwalk | CT | 06855 |

| Principal Occupation | Name of Employer |
|---|---|
| Accounts Payable Specialist | Sound Federal Credit Union |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/21/2026

Aggregate Contributions: $10.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Seritella | Freda | | 1526 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 88 Ashley St | Hartford | CT | 06105 |

| Principal Occupation | Name of Employer |
|---|---|
| Mail/ rep | Cga |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/21/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~DeLucia~~ | ~~Pat~~ | | ~~1527~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~7 Shepard Hill Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06514~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/21/2026~~

Aggregate Contributions: ~~$500.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Lombardo | Wayne | | 1528 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 571 Town St | Middletown | CT | 06469 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/21/2026

Aggregate Contributions: $5.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Bomke | David | | 1529 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 112 Laura Rd | Hamden | CT | 06514 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/21/2026

Aggregate Contributions: $80.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Parkinson~~ | ~~Angie~~ | | ~~1530~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~31 High St~~ | ~~East Hartford~~ | ~~CT~~ | ~~06118~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~teacher~~ | ~~Colchester BoE~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/21/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Smith | Leo | | 1531 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 64 Boysenberry Ct | Suffield | CT | 06078 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/21/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Wilson | Kimberlee | | 1532 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 115 Bellevue Ave | West Haven | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | West Haven Board of Education |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/21/2026

Aggregate Contributions: $5.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cannady | Dana | | 1533 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 2405 Whitney Ave | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| Finance | Aware Recovery Cate |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/21/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Carr | Gayke | | 1534 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 44 Torrington Rd | Litchfield | CT | 06759 |

| Principal Occupation | Name of Employer |
|---|---|
| Attorney | Cohen & Thomas |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/21/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hamilton | Pennell | | 1535 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 28 Park Ln | Woodbridge | CT | 06525 |

| Principal Occupation | Name of Employer |
|---|---|
| Registrar of Voters | Town of Woodbridge |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/21/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Schwebel | Elizabeth | | 1536 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 33 Pine St | Norwich | CT | 06360 |

| Principal Occupation | Name of Employer |
|---|---|
| Homemaker | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/21/2026

Aggregate Contributions: $20.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Larsson | Daniela | | 1537 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 426 Bantam Lake Rd | Bantam | CT | 06750 |

| Principal Occupation | Name of Employer |
|---|---|
| Policy Director | Child Care for CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/21/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Kozlowski | Kazimiera | | 1538 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 89 Kingsley Rd | Lebanon | CT | 06249 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/21/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Menta** | **Anne Marie** | | **1522** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **365 Mather St Unit 190** | **Hamden** | **CT** | **06514** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/21/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Williamson** | **Clifton** | | **1521** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **118 Ross Rd** | **Lansing** | **NY** | **14882** |

| Principal Occupation | Name of Employer |
|---|---|
| **Project Manager** | **The Reform Alliance** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$150.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/21/2026**

Aggregate Contributions: **$150.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Parkinson** | **Angela** | | **1530** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **31 High St** | **East Hartford** | **CT** | **06118** |

| Principal Occupation | Name of Employer |
|---|---|
| **teacher** | **Colchester BoE** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/21/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **DeLucia** | **Pat** | | **1527** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **7 Shepard Hill Rd** | **Hamden** | **CT** | **06514** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/21/2026**

Aggregate Contributions: **$475.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Covett** | **Katie** | | **1517** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **1188 Trout Brook Dr** | **West Hartford** | **CT** | **06119** |

| Principal Occupation | Name of Employer |
|---|---|
| **owner** | **Soulstar Holdings LLC** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/21/2026**

Aggregate Contributions: **$80.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Bergin | Timothy | | 1504 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 29 Doane St | Manchester | CT | 06042 |

| Principal Occupation | Name of Employer |
|---|---|
| Policy Director | Connecticut General Assembly |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/22/2026

Aggregate Contributions: $50.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Lamarre | Rebecca | | 1505 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 101 Dutton Rd | Pelham | NH | 03076 |

| Principal Occupation | Name of Employer |
|---|---|
| Attorney | Devine Millimet & Branch, P.A. |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/22/2026

Aggregate Contributions: $200.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| King | Eliza | | 1506 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1498 Little Meadow Rd | Guilford | CT | 06437 |

| Principal Occupation | Name of Employer |
|---|---|
| Development | Yale |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/22/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Ferenbach | Joanie | | 1507 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 21 Trout Lake Dr | Westbrook | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Bookkeeper | Angelina Wine Ltd |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/22/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Donato | Frank | | 1508 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 15 Beech Tree Hill Rd | Shelton | CT | 06484 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/22/2026

Aggregate Contributions: $15.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Armitage | Kathryn | | 1509 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 12 Legrand Rd | North Haven | CT | 06473 |

| Principal Occupation | Name of Employer |
|---|---|
| Registered nurse | Employed sort of |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/22/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Humphrey | Damian | | 1510 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 6 Birch Hill Dr | South Windsor | CT | 06074 |

| Principal Occupation | Name of Employer |
|---|---|
| Finance Director | Unemployed |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/22/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Gilstad-Hayden | Kate | | 1511 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 341 Cold Spring Dr | Westbrook | CT | 06498 |

| Principal Occupation | Name of Employer |
|---|---|
| Statistician | Yale |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/22/2026

Aggregate Contributions: $55.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Matus | Laurel | | 1512 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1 N Main St | East Granby | CT | 06026 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/22/2026

Aggregate Contributions: $5.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Silva~~ | ~~Phil~~ | | ~~1513~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~22 Triangle St~~ | ~~Danbury~~ | ~~CT~~ | ~~06810~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Administration~~ | ~~Nuvance~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$20.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~01/22/2026~~ | ~~$40.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Burgess | Kristin | | 1514 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 29 Temple St | Hartford | CT | 06103 |

| Principal Occupation | Name of Employer |
|---|---|
| Attorney | EpicWorks |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 01/22/2026 | $5.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Silva** | **Phil** | | **1513** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **22 Triangle St** | **Danbury** | **CT** | **06810** |

| Principal Occupation | Name of Employer |
|---|---|
| **Medical Coder** | **Northwell Health** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$20.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| **01/22/2026** | **$20.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Angelopoulos | Maria | | 1492 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 26 Parkland Dr | Woodbury | CT | 06798 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 01/23/2026 | $340.00 |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Bajorek | Laurie | | 1493 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 60 Patricia Dr | Vernon | CT | 06066 |

| Principal Occupation | Name of Employer |
|---|---|
| Office Administrator | Connecticut Federation of School Administrators |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/23/2026

Aggregate Contributions: $200.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Angelico-Stetson | JoAnn | | 1494 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 188 Stony Mill Ln | East Berlin | CT | 06023 |

| Principal Occupation | Name of Employer |
|---|---|
| Paralegal | The Metropolitan District |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/23/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Briere | Kayla | | 1495 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 27 Elm Dr | West Hartford | CT | 06110 |

| Principal Occupation | Name of Employer |
|---|---|
| Attorney | Norte Immigration Law LLC |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $90.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/23/2026

Aggregate Contributions: $90.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Bhandary-Alexander~~ | ~~James~~ | | ~~1496~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~72 Alden~~ | ~~New Haven~~ | ~~CT~~ | ~~06515~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Teacher~~ | ~~Yale Law School~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/23/2026~~

Aggregate Contributions: ~~$150.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Austin | Kyle | | 1497 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 21 Washington St | Trumansburg | NY | 14886 |

| Principal Occupation | Name of Employer |
|---|---|
| Fire safety | Cornell University |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $15.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/23/2026

Aggregate Contributions: $27.72

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Wilusz | Phil | | 1498 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 54 Normandy Rd | Trumbull | CT | 06611 |

| Principal Occupation | Name of Employer |
|---|---|
| Attorney | With Coverage Insurance Services |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/23/2026

Aggregate Contributions: $20.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Zartman | Justin | | 1499 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 158 Hillcrest Ter | Meriden | CT | 06450 |

| Principal Occupation | Name of Employer |
|---|---|
| Lawyer | CT Education Association |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/23/2026

Aggregate Contributions: $125.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Cardillo~~ | ~~Chad~~ | | ~~1500~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~158 Hillcrest Ter~~ | ~~Meriden~~ | ~~CT~~ | ~~06450~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Teacher~~ | ~~Meriden BOE~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/23/2026~~

Aggregate Contributions: ~~$250.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Barr~~ | ~~Michael~~ | | ~~1501~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~26 Abedar Ln~~ | ~~Latham~~ | ~~NY~~ | ~~12110~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Actuary~~ | ~~Insurance~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/23/2026~~

Aggregate Contributions: ~~$350.00~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Villone | Craig | | 1502 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 60 Elika Rd | Wallingford | CT | 06492 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $55.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/23/2026

Aggregate Contributions: $55.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Prause | Eric | | 1503 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 147 John Olds Dr | Manchester | CT | 06042 |

| Principal Occupation | Name of Employer |
|---|---|
| Engineer | Nel Hydrogen |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/23/2026

Aggregate Contributions: $5.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Barr** | **Michael** | | **1501** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **26 Abedar Ln** | **Latham** | **NY** | **12110** |

| Principal Occupation | Name of Employer |
|---|---|
| **Actuary** | **Unique Insurance Managers** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/23/2026**

Aggregate Contributions: **$250.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Bhandary-Alexander** | **James** | | **1496** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **72 Alden Ave** | **New Haven** | **CT** | **06515** |

| Principal Occupation | Name of Employer |
|---|---|
| **Teacher** | **Yale Law School** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/23/2026**

Aggregate Contributions: **$100.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Cardillo** | **Chad** | | **1500** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **158 Hillcrest Ter** | **Meriden** | **CT** | **06450** |

| Principal Occupation | Name of Employer |
|---|---|
| **Teacher** | **Meriden BOE** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/23/2026**

Aggregate Contributions: **$150.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Bonafe** | **Nathalie** | | **1479** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **29 Grand Ave** | **New Haven** | **CT** | **06513** |

| Principal Occupation | Name of Employer |
|---|---|
| **Consultant** | **A Gentler Parting LLC** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$20.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/24/2026**

Aggregate Contributions: **$660.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Hernandez** | **Cristina** | | **1473** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **1025 Main St** | **Stratford** | **CT** | **06615** |

| Principal Occupation | Name of Employer |
|---|---|
| **HR Manager** | **Pump Technology Inc.** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/24/2026**

Aggregate Contributions: **$100.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Fortuna Jr.** | **Tom** | | **1478** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **205 Gilbert Ave** | **Hamden** | **CT** | **06514** |

| Principal Occupation | Name of Employer |
|---|---|
| **Case Worker** | **Cornell Scott Hill Health Center** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/24/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Hernandez~~ | ~~Cristina~~ | | ~~1473~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1025 Main St~~ | ~~Stratford~~ | ~~CT~~ | ~~06615~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~HR Business Manager~~ | ~~HOMA Pump Trchnology~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/24/2026~~

Aggregate Contributions: ~~$200.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Maureen Gilbride'Redman | Maureen | | 1474 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 47 Pool Rd | North Haven | CT | 06473 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/24/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| LaFrance | Frances | | 1475 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 14 Jackson Ave | Wallingford | CT | 06492 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/24/2026

Aggregate Contributions: $100.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Izzo | Rita | | 1476 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 52 Pool Rd | North Haven | CT | 06473 |

| Principal Occupation | Name of Employer |
|---|---|
| Secretary | DCF state of CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/24/2026

Aggregate Contributions: $20.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Mandato | Brandi | | 1477 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 56 South Ave | North Haven | CT | 06473 |

| Principal Occupation | Name of Employer |
|---|---|
| Senior director | Jobs for the Future |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/24/2026

Aggregate Contributions: $200.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Fortuna Jr.~~ | ~~Tom~~ | | ~~1478~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~205 Gilbert Ave~~ | ~~Hamden~~ | ~~CT~~ | ~~06514~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Case Worker~~ | ~~Cornell Scott Hill Health Center~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/24/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Bonafe~~ | ~~Nathalie~~ | | ~~1479~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~29 Grand Ave~~ | ~~New Haven~~ | ~~CT~~ | ~~06513~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Consultant~~ | ~~Self employed~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$20.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/24/2026~~

Aggregate Contributions: ~~$680.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Bigard | Adrianna | | 1480 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 21 Sebec St | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Comms Manger | EPC |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/24/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Bivens | Gregory | | 1481 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1060 W Woods Rd | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| Counselor | Judicial Branch |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/24/2026

Aggregate Contributions: $30.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Chartier | Beth | | 1482 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1445 North Rd | Dayville | CT | 06241 |

| Principal Occupation | Name of Employer |
|---|---|
| Contractor | MIT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/24/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Atchley | Chris | | 1483 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 31 Colony St | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| Client Technologies Administrator | Yale University |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/24/2026

Aggregate Contributions: $175.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Sims | Wendi | | 1484 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 10 Green Valley Lake Rd | East Lyme | CT | 06333 |

| Principal Occupation | Name of Employer |
|---|---|
| Registrar of Voters | Town of East Lyme |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/24/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Bannon | Judy | | 1485 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 28 Forest View Rd | Northford | CT | 06472 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/24/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Fucci | Laura | | 1486 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 418 Anderson Ave | Milford | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Deputy Registrar of Voters | City of Milford |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/24/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Kennedy-Shaffer | Lee | | 1487 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 335 Orange St | New Haven | CT | 06511 |

| Principal Occupation | Name of Employer |
|---|---|
| Professor | Yale University |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $320.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/24/2026

Aggregate Contributions: $320.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Fucci | Corinne | | 1488 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 418 Anderson Ave | Milford | CT | 06460 |

| Principal Occupation | Name of Employer |
|---|---|
| Adult Education Instructor | New Haven Adult Education Center, Career Resources |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 01/24/2026 | $25.00 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Eke | Therese | | 1489 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 47 Point Beach Dr | Milford | CT | 06460 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☒ Yes ☐ No

If yes, list Event # 02152026G

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 01/24/2026 | $495.00 | $320.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Miller | Pamela | | 1490 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 85 Jackson Rd | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 01/24/2026 | $50.00 | $50.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Marra | Jennifer | | 1491 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 75 Redwood Dr | East Haven | CT | 06513 |

| Principal Occupation | Name of Employer |
|---|---|
| Project Manager | Merck & Co |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 01/24/2026 | $100.00 | $25.00 |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Krantz~~ | ~~Thomas~~ | | ~~1450~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~143 Hoyt St~~ | ~~Stamford~~ | ~~CT~~ | ~~06905~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~self-employed~~ | ~~retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/25/2026~~

Aggregate Contributions: ~~$735.00~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cumberbatch | Evelyn | | 1451 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 147 Thornton St | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Psychiatrist | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/25/2026

Aggregate Contributions: $225.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Bossoli | Elizabeth | | 1452 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 12 Cumpstone Dr | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| Bookseller | Books & Company |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $108.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/25/2026

Aggregate Contributions: $108.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Quarello~~ | ~~James~~ | | ~~1453~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~28 Edgewood Dr~~ | ~~Wallingford~~ | ~~CT~~ | |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Home Inspector~~ | ~~Connecticut~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/25/2026~~

Aggregate Contributions: ~~$100.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| VanDuzee | Kathleen | | 1454 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 198 Whisconier Rd | Brookfield | CT | 06804 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/25/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Case | James | | 1455 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 139 Apple Hl | Wethersfield | CT | 06109 |

| Principal Occupation | Name of Employer |
|---|---|
| Not self employed | Frontier Communications |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/25/2026

Aggregate Contributions: $200.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Leaman | Nancy | | 1456 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 115 Parker Farms Rd | Wallingford | CT | 06492 |

| Principal Occupation | Name of Employer |
|---|---|
| Disabled | Unemployed |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/25/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Bartley | Ellen | | 1457 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 60 Brigadoon Dr | Cheshire | CT | 06410 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/25/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Czepiel | Kathy | | 1458 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 99 Filbert St | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| CT Land Protection Manager | Save the Sound |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/25/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Elliott~~ | ~~William~~ | | ~~1459~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~116 Battis Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06514~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Flight attendant~~ | ~~Delta Air Lines~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/25/2026~~

Aggregate Contributions: ~~$40.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Pezzini | Norma | | 1460 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 59 Hubbard Pl | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/25/2026

Aggregate Contributions: $40.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Nicholas | Patricia | | 1461 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 6 Lamplighter Ln | New Milford | CT | 06776 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/25/2026

Aggregate Contributions: $100.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Crabtree~~ | ~~Rev. Davida~~ | | ~~1462~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~400 Seabury Dr~~ | ~~Bloomfield~~ | ~~CT~~ | ~~06002~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/25/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| LeVan | Molly | | 1463 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 115 Millbrook Rd | North Haven | CT | 06473 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/25/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Lightfoot | Terrie | | 1464 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 103 Jessica Ln | Dayville | CT | 06241 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/25/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Ferger | Damon | | 1465 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 160 Broad St | New London | CT | 06320 |

| Principal Occupation | Name of Employer |
|---|---|
| Legal technician | Complete Discovery Source, Inc. |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/25/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Jerez | Beth | | 1466 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 229 Broad Brook Rd | Enfield | CT | 06082 |

| Principal Occupation | Name of Employer |
|---|---|
| Registrar of Voters | Registrar of Voters Enfield Town Hall |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/25/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Ciano | Joan | | 1467 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 365 Mather St | Hamden | CT | 06514 |

| Principal Occupation | Name of Employer |
|---|---|
| REtired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/25/2026

Aggregate Contributions: $35.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Wilson | Kimberlee | | 1468 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 115 Bellevue Ave | West Haven | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | West Haven Board of Education |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/25/2026

Aggregate Contributions: $15.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Allen~~ | ~~Mary~~ | | ~~1469~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~14 Hewitt St~~ | ~~Willimantic~~ | ~~CT~~ | ~~06226~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Professor~~ | ~~CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/25/2026~~

Aggregate Contributions: ~~$10.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Beman | Elizabeth | | 1470 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 21 Wicker St | Putnam | CT | 06260 |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | Town of Douglas MA |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/25/2026

Aggregate Contributions: $70.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Black | Carmen | | 1471 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 9 Valley View Dr | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| doctor | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/25/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Gorvine | Tara | | 1472 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 23 Elmwood Rd | Wallingford | CT | 06492 |

| Principal Occupation | Name of Employer |
|---|---|
| Fundraising | University of New Haven |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/25/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Allen** | **Mary** | **E** | **1469** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **14 Hewitt St** | **Willimantic** | **CT** | **06226** |

| Principal Occupation | Name of Employer |
|---|---|
| **Professor** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/25/2026**

Aggregate Contributions: **$5.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Krantz** | **Thomas** | | **1450** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **143 Hoyt St** | **Stamford** | **CT** | **06905** |

| Principal Occupation | Name of Employer |
|---|---|
| **retired** | **retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/25/2026**

Aggregate Contributions: **$710.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Quarello** | **James** | | **1453** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **28 Edgewood Dr** | **Wallingford** | **CT** | |

| Principal Occupation | Name of Employer |
|---|---|
| **Home Inspector** | **JRV Home Inspection Svcs llc** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/25/2026**

Aggregate Contributions: **$75.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Elliott** | **William** | | **1459** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **116 Battis Rd** | **Hamden** | **CT** | **06514** |

| Principal Occupation | Name of Employer |
|---|---|
| **Flight attendant** | **Delta Air Lines** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/25/2026**

Aggregate Contributions: **$20.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Crabtree** | **Davida** | | **1462** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **400 Seabury Dr** | **Bloomfield** | **CT** | **06002** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/25/2026**

Aggregate Contributions: **$25.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Taylor | Sarah | | 1441 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 4672 Kirkwood Ct | Boulder | CO | 80301 |

| Principal Occupation | Name of Employer |
|---|---|
| Therapist | Anchor and Fields Therapies |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/26/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Kleindienst | Jennifer | | 1442 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 241 West St | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Sustainability Director | Wesleyan University |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/26/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Becker | Bill | | 1443 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 574 Bebbington Rd | Ashford | CT | 06278 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/26/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Carini | Jill | | 1444 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 10 Corey | Niantic | CT | 06357 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/26/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Thompson | Dorothy | | 1445 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 71 Garden St | Manchester | CT | 06040 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired-disabled | Retired-disabled |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/26/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Naddeo | James | | 1446 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 14 Country Way | Bethel | CT | 06801 |

| Principal Occupation | Name of Employer |
|---|---|
| Advertising & Marketing Consultant | Gemini Strategies |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/26/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Thompson | David | | 1447 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 22 Montclair Dr | West Hartford | CT | 06107 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/26/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Boshuyzen | Megan | | 1448 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 41 Margaret Dr | Coventry | CT | 06238 |

| Principal Occupation | Name of Employer |
|---|---|
| Email Developer | Inbox Army |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/26/2026

Aggregate Contributions: $75.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McGuire | Cyndie | | 1449 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 34 Redwood Dr | Bethel | CT | 06801 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 01/26/2026 | $5.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Baker** | **Joseph** | **R** | **1438** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **14 Maplewood Dr** | **New Milford** | **CT** | **06776** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| **01/27/2026** | **$100.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Ramirez | Adam | | 1435 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 40 Shady Knoll Ln | New Canaan | CT | 06840 |

| Principal Occupation | Name of Employer |
|---|---|
| Chief Risk Officer | Tokyo Century (USA) Inc. |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 01/27/2026 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Brown-Swanson | Leah | | 1436 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 24 Thorburn Ave | Trumbull | CT | 06611 |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | Fairfield Board of Education |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 01/27/2026 | $25.00 |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Karp | Gerald | | 1437 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 105 Deerfield Dr | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| Mechanical Engineer | Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/27/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Baker~~ | ~~Joe~~ | | ~~1438~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~14 Maplewood Dr~~ | ~~New Milford~~ | ~~CT~~ | ~~06776~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~None~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/27/2026~~

Aggregate Contributions: ~~$150.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Stover | Dwight | | 1439 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 72 Kings Hwy | North Haven | CT | 06473 |

| Principal Occupation | Name of Employer |
|---|---|
| Office Assistant | State od Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/27/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Waggner | Matthew | | 1440 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 125 Sterling St | Fairfield | CT | 06825 |

| Principal Occupation | Name of Employer |
|---|---|
| Registrar of Voters | Town of Fairfield |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/27/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Heimer** | **Alyson** | | **1417** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **6 Everit St** | **New Haven** | **CT** | **06511** |

| Principal Occupation | Name of Employer |
|---|---|
| **Realtor** | **Farnam Realty** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **01/28/2026** | **$150.00** | **$150.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Friday | Sandra | | 1411 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 44 Gordon St | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 01/28/2026 | $122.00 | $50.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| VanDuzee | Kathleen | | 1412 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 198 Whisconier Rd . | Brookfield | CT | 06804 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 01/28/2026 | $25.00 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Ziffer | Amy | | 1413 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 128 Green Pond Rd | Sherman | CT | 06784 |

| Principal Occupation | Name of Employer |
|---|---|
| retired acoustician | Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 01/28/2026 | $75.00 | $75.00 |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Schramm | Michael | | 1414 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 28 Cricket Knl | Wethersfield | CT | 06109 |

| Principal Occupation | Name of Employer |
|---|---|
| Fundraiser | Wesleyan University |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/28/2026

Aggregate Contributions: $30.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Sartori | John | | 1415 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 126 Elmfield St | West Hartford | CT | 06110 |

| Principal Occupation | Name of Employer |
|---|---|
| Contracts Manager | Kinsley Group, Inc |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/28/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Tomassi | Alexa | | 1416 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 40 S Meadow Ln | Meriden | CT | 06450 |

| Principal Occupation | Name of Employer |
|---|---|
| Communications Officer | Yale School of Medicine |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/28/2026

Aggregate Contributions: $15.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Heimer~~ | ~~Alyson~~ | | ~~1417~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~6 Everit St~~ | ~~New Haven~~ | ~~CT~~ | ~~06511~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Realtor~~ | ~~Farnam Realty~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/28/2026~~

Aggregate Contributions: ~~$300.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Garsson | Geoffrey | | 1418 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 140 New Rd | Avon | CT | 06001 |

| Principal Occupation | Name of Employer |
|---|---|
| Tutor | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/28/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Farnsworth | Peter | | 1419 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 82 Chichester Rd | New Canaan | CT | 06840 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $220.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/28/2026

Aggregate Contributions: $320.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Corrigan | Carly | | 1420 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 5 Chestnut Dr | Avon | CT | 06001 |

| Principal Occupation | Name of Employer |
|---|---|
| Controls operations | Beazley |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/28/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Mccaw | Amanda | | 1421 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 38 Rudolph Rd | Bristol | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Quality Engineer | Ensign Bickford |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/28/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Zartman | Justin | | 1422 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 158 Hillcrest Ter | Meriden | CT | 06450 |

| Principal Occupation | Name of Employer |
|---|---|
| Lawyer | CT Education Association |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 01/28/2026 | $275.00 | $150.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Caffrey | Karen | | 1423 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 30 Jenny Cliff Rd | Manchester | CT | 06040 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 01/28/2026 | $510.00 | $320.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| York | Jason | | 1424 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 150 Dowd St | Newington | CT | 06111 |

| Principal Occupation | Name of Employer |
|---|---|
| Communications Manager | State of Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 01/28/2026 | $75.00 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McEvoy | Emily | | 1425 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 254 Carriage Crossing Ln | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Organizer | 4Cs SEIU Local 1973 |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 01/28/2026 | $45.00 | $20.00 |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Schulz | Carolyn | | 1426 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 2 Boulder Rd | Colchester | CT | 06415 |

| Principal Occupation | Name of Employer |
|---|---|
| Digital Implementation Manager | Thermo Fisher Scientific |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $320.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/28/2026

Aggregate Contributions: $320.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Beman | Elizabeth | | 1427 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 21 Wicker St | Putnam | CT | 06260 |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | Town of Douglas MA |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $15.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/28/2026

Aggregate Contributions: $85.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Heimer | Win | | 1428 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 799 Prospect Ave # A2 | West Hartford | CT | 06105 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/28/2026

Aggregate Contributions: $70.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Orban | Laura | | 1429 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 95 Stony Hill Rd | Brookfield | CT | 06804 |

| Principal Occupation | Name of Employer |
|---|---|
| Communications and Technology Manager | Heritage Village |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/28/2026

Aggregate Contributions: $125.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hardy | Travis | | 1430 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 7 Homer St | Norwalk | CT | 06851 |

| Principal Occupation | Name of Employer |
|---|---|
| Consultant | Classroom Champions |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/28/2026

Aggregate Contributions: $225.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Miller | Susan | | 1431 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 130 Palisado Ave | Windsor | CT | 06095 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/28/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Murphy | Patrick | | 1432 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 593 Vauxhall Street Ext | Waterford | CT | 06385 |

| Principal Occupation | Name of Employer |
|---|---|
| Registered Nurse | Vitas Healthcare |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/28/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Bruyette | Jennifer | | 1433 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 83 Park Ave | Enfield | CT | 06082 |

| Principal Occupation | Name of Employer |
|---|---|
| Accountant | Hartford Healthcare |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/28/2026

Aggregate Contributions: $50.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Platt | Halina | | 1434 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 200 Leeder Hill Dr | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/28/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Dawson~~ | ~~Brian~~ | | ~~1400~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~69 Cooley Rd~~ | ~~North Granby~~ | ~~CT~~ | ~~06060~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Lobbyist~~ | ~~CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/29/2026~~

Aggregate Contributions: ~~$200.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Perkins | Lindsay | | 1401 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 25 Bishop Rd | West Hartford | CT | 06119 |

| Principal Occupation | Name of Employer |
|---|---|
| School Administrator | Kingswood Oxford School |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/29/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Das~~ | ~~Riju~~ | | ~~1402~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~4 Talcott Gln~~ | ~~Farmington~~ | ~~CT~~ | ~~06032~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Attorney~~ | ~~State of Virginia~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/29/2026~~

Aggregate Contributions: ~~$50.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| DeLude | Brian | | 1403 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 19 Quail Run | Berlin | CT | 06037 |

| Principal Occupation | Name of Employer |
|---|---|
| Program Manager | State of Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/29/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hill | Winton | | 1404 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 24 Radio Pl | Stamford | CT | 06906 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired Clergyman | Retired Clegy |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $200.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/29/2026

Aggregate Contributions: $200.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Crawford~~ | ~~Vanessa~~ | | ~~1405~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~129 Russell St~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Student~~ | ~~CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/29/2026~~

Aggregate Contributions: ~~$200.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Boulton | Wayne | | 1406 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 111 Pearl St | Hartford | CT | 06103 |

| Principal Occupation | Name of Employer |
|---|---|
| insurance attorney | XL Insurance America, Inc. |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/29/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Snodgrass | Ryann | | 1407 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 85 Vesper St | Fairfield | CT | 06825 |

| Principal Occupation | Name of Employer |
|---|---|
| Tax Advisor | IBM |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/29/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Yuabov | Mark | | 1408 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 83 Trumpet Brook Rd | Waterbury | CT | 06708 |

| Principal Occupation | Name of Employer |
|---|---|
| Computer Programmer | Masonicare |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $320.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/29/2026

Aggregate Contributions: $325.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Prasad | Padmini | | 1409 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1282 Royal Pointe Ln | Ormond Beach | FL | 32174 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/29/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Maxwell-frechette | Malcolm | | 1410 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 41 Burns Ave | Enfield | CT | 06082 |

| Principal Occupation | Name of Employer |
|---|---|
| NDT technician | Element material technology |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/29/2026

Aggregate Contributions: $5.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Crawford** | **Vanessa** | | **1405** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **129 Russell St** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Student** | **Student** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/29/2026**

Aggregate Contributions: **$100.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Dawson** | **Brian** | | **1400** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **69 Cooley Rd** | **North Granby** | **CT** | **06060** |

| Principal Occupation | Name of Employer |
|---|---|
| **Lobbyist** | **Gallo&Robinson** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/29/2026**

Aggregate Contributions: **$125.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Das** | **Riju** | | **1402** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **4B Talcott Gln** | **Farmington** | **CT** | **06032** |

| Principal Occupation | Name of Employer |
|---|---|
| **Attorney** | **State of Virginia** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/29/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Bromley | Sarah | | 1392 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 27 Norway St | Milford | CT | 06461 |

| Principal Occupation | Name of Employer |
|---|---|
| Preschool Teacher | Bright Horizons |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/30/2026

Aggregate Contributions: $340.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Maitland | Michelle | | 1393 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 6 Acorn Dr | Niantic | CT | 06357 |

| Principal Occupation | Name of Employer |
|---|---|
| Project Management Specialist | Town of Groton Public Works |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $33.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/30/2026

Aggregate Contributions: $51.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Mead | Thomas | | 1394 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 245 Hillfield Rd | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $290.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/30/2026

Aggregate Contributions: $290.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cardwell | Sean | | 1395 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 47 Amherst St | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| Civil Engineer | Town of Greenwich |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/30/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Yagla~~ | ~~Betsy~~ | | ~~1396~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~59 Hesse Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Operations and development~~ | ~~Connecticut Voices for Children~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/30/2026~~

Aggregate Contributions: ~~$150.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Weaver | Cathy | | 1397 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 213 Grassy Hill Rd | Lyme | CT | 06371 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/30/2026

Aggregate Contributions: $10.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McFarland | Reed | | 1398 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 12 Acorn Dr | Niantic | CT | 06357 |

| Principal Occupation | Name of Employer |
|---|---|
| Special Education Teacher | Middletown Public Schools |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/30/2026

Aggregate Contributions: $20.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Velez | Sophia | | 1399 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 19 Lincoln Ave | Norwalk | CT | 06854 |

| Principal Occupation | Name of Employer |
|---|---|
| Attorney | NYS OCA |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/30/2026

Aggregate Contributions: $225.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Yagla** | **Elizabeth** | | **1396** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **59 Hesse Rd** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Operations and development** | **Connecticut Voices for Children** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/30/2026**

Aggregate Contributions: **$75.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Kline~~ | ~~Arleen~~ | | ~~1333~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~43 Cope Farms Rd~~ | ~~Farmington~~ | ~~CT~~ | ~~06032~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/31/2026~~

Aggregate Contributions: ~~$70.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Taylor~~ | ~~Karen~~ | | ~~1334~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~35 Whitney St~~ | ~~Hartford~~ | ~~CT~~ | ~~06105~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Psychotherapist~~ | ~~Future Path Collaborative, PLLC~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$18.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/31/2026~~

Aggregate Contributions: ~~$36.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Ellner~~ | ~~Abbey~~ | | ~~1335~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~44 Gordon St~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Wellness Services Coordinator~~ | ~~Western CT Area Agency on Aging~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/31/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Donato~~ | ~~Frank~~ | | ~~1336~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~15 Beech Tree Hill Rd~~ | ~~Shelton~~ | ~~CT~~ | ~~06484~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~None~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/31/2026~~

Aggregate Contributions: ~~$35.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Devin~~ | ~~Nichole~~ | | ~~1337~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~397 Main St~~ | ~~Terryville~~ | ~~CT~~ | ~~06786~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Echosonographer~~ | ~~Hospital of Central CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/31/2026~~

Aggregate Contributions: ~~$95.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Amadasun~~ | ~~Harrison~~ | | ~~1338~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1474 Ellington Rd~~ | ~~South Windsor~~ | ~~CT~~ | ~~06074~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Manager~~ | ~~Travelers~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/31/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Powell~~ | ~~Chris~~ | | ~~1339~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~5 Chestnut St~~ | ~~Trumbull~~ | ~~CT~~ | ~~06611~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Student~~ | ~~Student~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/31/2026~~

Aggregate Contributions: ~~$75.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Jamieson~~ | ~~Diane~~ | | ~~1340~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~490 Sunset Hill Rd~~ | ~~North Grosvenordale~~ | ~~CT~~ | ~~06255~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/31/2026~~

Aggregate Contributions: ~~$75.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Bessette~~ | ~~Michael~~ | | ~~1341~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~360 Abbe Rd~~ | ~~South Windsor~~ | ~~CT~~ | ~~06074~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Financial Examiner~~ | ~~State of Connecticut Department of Banking~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/31/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Marquez~~ | ~~Caroline~~ | | ~~1342~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~37 Tobey Ave~~ | ~~Windsor~~ | ~~CT~~ | ~~06095~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Academic Advisor~~ | ~~CCSU~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/31/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~McDonald~~ | ~~Ivar~~ | | ~~1343~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~510 Dugg Hill Rd~~ | ~~Woodstock~~ | ~~CT~~ | ~~06281~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Researcher~~ | ~~Bristol Myers Squibb~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/31/2026~~

Aggregate Contributions: ~~$225.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Hanusch~~ | ~~Daniel~~ | | ~~1344~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~214 Woodruff St~~ | ~~Southington~~ | ~~CT~~ | ~~06489~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Accountant~~ | ~~Laticrete~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/31/2026~~

Aggregate Contributions: ~~$100.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Smith~~ | ~~Debra~~ | | ~~1345~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1139 New Haven Ave~~ | ~~Milford~~ | ~~CT~~ | ~~06460~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Head teacher~~ | ~~YMCA~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/31/2026~~

Aggregate Contributions: ~~$175.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Bashevkin~~ | ~~Rachel~~ | | ~~1346~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~135 Cleveland Rd~~ | ~~New Haven~~ | ~~CT~~ | ~~06515~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~retired~~ | ~~retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/31/2026~~

Aggregate Contributions: ~~$300.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~van Luling~~ | ~~Zachary~~ | | ~~1347~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~18 Boulder Dr~~ | ~~Rocky Hill~~ | ~~CT~~ | ~~06067~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~political consultant~~ | ~~City and State, Ltd.~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$40.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/31/2026~~

Aggregate Contributions: ~~$80.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Barber~~ | ~~Jan~~ | | ~~1348~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~72 Woodbine St~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$20.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/31/2026~~

Aggregate Contributions: ~~$360.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Henry~~ | ~~Francis E~~ | | ~~1349~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~26 Hemlock St~~ | ~~Bridgeport~~ | ~~CT~~ | ~~06605~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/31/2026~~

Aggregate Contributions: ~~$77.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Furnival~~ | ~~Lawrence~~ | | ~~1350~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~978 Ridge Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/31/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Pruslow~~ | ~~Darren~~ | | ~~1351~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~115 Bellevue Ave~~ | ~~West Haven~~ | ~~CT~~ | ~~06516~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Lawyer~~ | ~~Connecticut Veterans Legal Center~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/31/2026~~

Aggregate Contributions: ~~$127.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Dunn~~ | ~~Greg~~ | | ~~1352~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~25 Bonnie View Dr~~ | ~~Trumbull~~ | ~~CT~~ | ~~06611~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/31/2026~~

Aggregate Contributions: ~~$10.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Stubbs | Linda | | 1353 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 25 Fox Hunt Rd | Shelton | CT | 06484 |

| Principal Occupation | Name of Employer |
|---|---|
| Baker | Baker |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/31/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Flynn Harris~~ | ~~Patti~~ | | ~~1354~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~360 Carlton Dr~~ | ~~Cheshire~~ | ~~CT~~ | ~~06410~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/31/2026~~

Aggregate Contributions: ~~$200.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| DiVito | Nicholas | | 1355 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 127 S Vine St | Meriden | CT | 06451 |

| Principal Occupation | Name of Employer |
|---|---|
| waste recycling inspector | city of Hartford |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/31/2026

Aggregate Contributions: $10.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cobb | Celeste | | 1356 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 10 Tunxis Trl | Redding | CT | 06896 |

| Principal Occupation | Name of Employer |
|---|---|
| Founder | Insurance Marketing Solutions |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/31/2026

Aggregate Contributions: $150.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Lombardo | Wayne | | 1357 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 571 Town St | Moodus | CT | 06469 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/31/2026

Aggregate Contributions: $20.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Marra | Jennifer | | 1358 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 75 Redwood Dr | East Haven | CT | 06513 |

| Principal Occupation | Name of Employer |
|---|---|
| Project Manager | Merck & Co |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/31/2026

Aggregate Contributions: $125.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Conroy | Bruce | | 1359 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 13 Burke Heights Dr | Wallingford | CT | 06492 |

| Principal Occupation | Name of Employer |
|---|---|
| Union Carpenter | Brownstone Construction |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/31/2026

Aggregate Contributions: $200.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Farrell | Joanne | | 1360 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 30 Brettonwood Dr | Simsbury | CT | 06070 |

| Principal Occupation | Name of Employer |
|---|---|
| Court Reporter | Self-employed |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/31/2026

Aggregate Contributions: $50.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Grzadko | Krzysztof | | 1361 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 11 Sunnyside Ave . | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| IT | AMAZON |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/31/2026

Aggregate Contributions: $154.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Kent~~ | ~~Phil~~ | | ~~1362~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~160 Carmalt Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Attorney~~ | ~~Brenner, Saltzman & Wallman LLP~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/31/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Martinez | Maura | | 1363 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 87 Frederic Rd | Vernon | CT | 06066 |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | Enfield public schools |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/31/2026

Aggregate Contributions: $15.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Velez | Sophia | | 1364 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 19 Lincoln Ave | Norwalk | CT | 06854 |

| Principal Occupation | Name of Employer |
|---|---|
| Attorney | NYS OCA |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/31/2026

Aggregate Contributions: $300.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Crow | Trevor | | 1365 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 11 River Rd | Cos Cob | CT | 06807 |

| Principal Occupation | Name of Employer |
|---|---|
| LMFT | Trevor, LLC |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/31/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Lepore~~ | ~~Jennifer~~ | | ~~1366~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~28 Cobblestone Dr~~ | ~~Hamden~~ | ~~CT~~ | ~~06518~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Attorney~~ | ~~CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$20.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/31/2026~~

Aggregate Contributions: ~~$40.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Morgan | Collin | | 1367 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 2 Foley Rd | Portland | CT | 06480 |

| Principal Occupation | Name of Employer |
|---|---|
| Software Engineer | Sonalysts, inc. |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/31/2026

Aggregate Contributions: $154.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Sanchez | Teofilo | | 1368 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 109 Pease Rd | Woodbridge | CT | 06525 |

| Principal Occupation | Name of Employer |
|---|---|
| No | No |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/31/2026

Aggregate Contributions: $150.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hughes | Anne | | 1369 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 67 North St . | Easton | CT | 06612 |

| Principal Occupation | Name of Employer |
|---|---|
| Legislator | State of Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/31/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Chappell | Christopher | | 1370 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 132 Summer Hill Rd | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Factory worker | Forrest Machine |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/31/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Popp~~ | ~~Cathy~~ | | ~~1371~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~69 Belden Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06514~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~retired~~ | ~~Connecticut~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/31/2026~~

Aggregate Contributions: ~~$277.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Caizzi | Vincent | | 1372 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 34 Chelsea St | Stratford | CT | 06615 |

| Principal Occupation | Name of Employer |
|---|---|
| Machine Repair Technician | Sikorsky Aircraft |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/31/2026

Aggregate Contributions: $15.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Huizenga | Curt | | 1373 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 36 Surrey Dr | Wallingford | CT | 06492 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $12.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/31/2026

Aggregate Contributions: $52.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Phillips | Jeanie | | 1374 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 50 Appletree Dr | East Hartford | CT | 06118 |

| Principal Occupation | Name of Employer |
|---|---|
| Legislative aide | State of CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $40.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/31/2026

Aggregate Contributions: $340.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Appleton | Sheila | | 1375 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 161 Woodland Dr | South Windsor | CT | 06074 |

| Principal Occupation | Name of Employer |
|---|---|
| Manager | Disney |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☒ Yes ☐ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/31/2026

Aggregate Contributions: $100.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Menta~~ | ~~Anne-Marie~~ | | ~~1376~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~365 Mather St Unit 190~~ | ~~Hamden~~ | ~~CT~~ | ~~06514~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/31/2026~~

Aggregate Contributions: ~~$30.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Edwards | Kimberly | | 1377 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 122 Sheffield Ave | New Haven | CT | 06511 |

| Principal Occupation | Name of Employer |
|---|---|
| Maintenance Administrator/Dispatch | Frontier Communications |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/31/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Johnson | Tracy | | 1378 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 62 Grant Rd | Bethany | CT | 06524 |

| Principal Occupation | Name of Employer |
|---|---|
| Veterinarian | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/31/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Baker | Andre Jr | | 1379 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 985 Stratford Ave | Bridgeport | CT | 06607 |

| Principal Occupation | Name of Employer |
|---|---|
| Funeral Director | Baker Isaac funeral home |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/31/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Liebman | Carol | | 1380 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 894 Saybrook Rd | Haddam | CT | 06438 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/31/2026

Aggregate Contributions: $10.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Sacco | Jennifer | | 1381 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 54 Thompson St | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| Professor | Quinnipiac University |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/31/2026

Aggregate Contributions: $45.26

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Coffey~~ | ~~David~~ | | ~~1382~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~25 Springside Ave~~ | ~~New Haven~~ | ~~CT~~ | ~~06515~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Educator~~ | ~~Guitar Center~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$30.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/31/2026~~

Aggregate Contributions: ~~$87.00~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Burgio | Anne | | 1383 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 554 Toby Hill Rd | Westbrook | CT | 06498 |

| Principal Occupation | Name of Employer |
|---|---|
| North Regional Manager | Knights Bridge Winery |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/31/2026

Aggregate Contributions: $250.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Clark | Suzanne | | 1384 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 265 Windsorville Rd | Ellington | CT | 06029 |

| Principal Occupation | Name of Employer |
|---|---|
| Organizer | NEHCEU District 1199 SEIU |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/31/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Taccogna | Steven | | 1385 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1319 E Main St | Stratford | CT | 06614 |

| Principal Occupation | Name of Employer |
|---|---|
| Manager, Strategic Initiatives | Levi & Korsinsky |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/31/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McCallister | Steven | | 1386 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 7 Darrows Ct | East Lyme | CT | 06333 |

| Principal Occupation | Name of Employer |
|---|---|
| Physician | ViiV Healthcare |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/31/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Gauthier | Nicholas | | 1387 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 38 Norman St | Waterford | CT | 06385 |

| Principal Occupation | Name of Employer |
|---|---|
| State Representative | Connecticut General Assembly |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/31/2026

Aggregate Contributions: $106.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| DANSKY | REBECCA | | 1388 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 8113 Norwood Dr | Alexandria | VA | 22309 |

| Principal Occupation | Name of Employer |
|---|---|
| Home Organizer | VA |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/31/2026

Aggregate Contributions: $150.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Dorman | Brett | | 1389 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 54 Cedar Ridge Dr | Glastonbury | CT | 06033 |

| Principal Occupation | Name of Employer |
|---|---|
| Engineering Technician | City of Meriden |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/31/2026

Aggregate Contributions: $450.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Greenlaw | Alison | | 1390 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 32 Adams Rd . | Bloomfield | CT | 06002 |

| Principal Occupation | Name of Employer |
|---|---|
| Financial Clerk | State of Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/31/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hendrickson | Mary | | 1391 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 45 Barry Ln | Simsbury | CT | 06070 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired Teacher | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/31/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Lepore** | **Jennifer** | | **1366** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **28 Cobblestone Dr** | **Hamden** | **CT** | **06518** |

| Principal Occupation | Name of Employer |
|---|---|
| **Attorney** | **State of CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$20.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/31/2026**

Aggregate Contributions: **$20.00**

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Coffey** | **David** | | **1382** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **25 Springside Ave** | **New Haven** | **CT** | **06515** |

| Principal Occupation | Name of Employer |
|---|---|
| **Educator** | **Guitar Center** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$30.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/31/2026**

Aggregate Contributions: **$57.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Kent** | **Philip** | | **1362** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **160 Carmalt Rd** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Attorney** | **Brenner, Saltzman & Wallman LLP** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/31/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Popp** | **Cathy** | | **1371** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **69 Belden Rd** | **Hamden** | **CT** | **06514** |

| Principal Occupation | Name of Employer |
|---|---|
| **retired** | **retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/31/2026**

Aggregate Contributions: **$202.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Menta** | **Anne Marie** | | **1376** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **365 Mather St Unit 190** | **Hamden** | **CT** | **06514** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/31/2026**

Aggregate Contributions: **$15.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Kline** | **Arleen** | | **1333** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **43 Cope Farms Rd** | **Farmington** | **CT** | **06032** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/31/2026**

Aggregate Contributions: **$60.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Taylor** | **Karen** | | **1334** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **35 Whitney St** | **Hartford** | **CT** | **06105** |

| Principal Occupation | Name of Employer |
|---|---|
| **Psychotherapist** | **Future Path Collaborative, PLLC** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$18.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/31/2026**

Aggregate Contributions: **$18.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Ellner** | **Abbey** | | **1335** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **44 Gordon St** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Wellness Services Coordinator** | **Western CT Area Agency on Aging** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/31/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Donato** | **Frank** | | **1336** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **15 Beech Tree Hill Rd** | **Shelton** | **CT** | **06484** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **None** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/31/2026**

Aggregate Contributions: **$25.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Devin~~ | ~~Nichole~~ | | ~~1337~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~397 Main St~~ | ~~Terryville~~ | ~~CT~~ | ~~06786~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Echosonographer~~ | ~~Hospital of Central CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~01/31/2026~~

Aggregate Contributions: ~~$70.00~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Amadasun | Harrison | | 1338 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1474 Ellington Rd | South Windsor | CT | 06074 |

| Principal Occupation | Name of Employer |
|---|---|
| Manager | Travelers |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/31/2026

Aggregate Contributions: $50.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Jamieson | Diane | | 1340 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 490 Sunset Hill Rd | North Grosvenordale | CT | 06255 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/31/2026

Aggregate Contributions: $50.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Bessette | Michael | | 1341 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 360 Abbe Rd | South Windsor | CT | 06074 |

| Principal Occupation | Name of Employer |
|---|---|
| Financial Examiner | State of Connecticut Department of Banking |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 01/31/2026

Aggregate Contributions: $75.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Marquez** | **Caroline** | | **1342** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **37 Tobey Ave** | **Windsor** | **CT** | **06095** |

| Principal Occupation | Name of Employer |
|---|---|
| **Academic Advisor** | **CCSU** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/31/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **McDonald** | **Ivar** | | **1343** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **510 Dugg Hill Rd** | **Woodstock** | **CT** | **06281** |

| Principal Occupation | Name of Employer |
|---|---|
| **Researcher** | **Bristol Myers Squibb** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/31/2026**

Aggregate Contributions: **$150.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Hanusch** | **Daniel** | | **1344** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **214 Woodruff St** | **Southington** | **CT** | **06489** |

| Principal Occupation | Name of Employer |
|---|---|
| **Accountant** | **Laticrete** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/31/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Smith** | **Debra** | | **1345** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **1139 New Haven Ave** | **Milford** | **CT** | **06460** |

| Principal Occupation | Name of Employer |
|---|---|
| **Head teacher** | **YMCA** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/31/2026**

Aggregate Contributions: **$125.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Bashevkin** | **Rachel** | | **1346** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **135 Cleveland Rd** | **New Haven** | **CT** | **06515** |

| Principal Occupation | Name of Employer |
|---|---|
| **retired** | **retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$150.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/31/2026**

Aggregate Contributions: **$150.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **van Luling** | **Zachary** | | **1347** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **18 Boulder Dr** | **Rocky Hill** | **CT** | **06067** |

| Principal Occupation | Name of Employer |
|---|---|
| **political consultant** | **City and State, Ltd.** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$40.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/31/2026**

Aggregate Contributions: **$40.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Barber** | **Jan** | | **1348** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **72 Woodbine St** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$20.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/31/2026**

Aggregate Contributions: **$340.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Henry** | **Francis E** | | **1349** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **26 Hemlock St** | **Bridgeport** | **CT** | **06605** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/31/2026**

Aggregate Contributions: **$52.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Furnival** | **Lawrence** | | **1350** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **978 Ridge Rd** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/31/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Pruslow** | **Darren** | | **1351** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **115 Bellevue Ave** | **West Haven** | **CT** | **06516** |

| Principal Occupation | Name of Employer |
|---|---|
| **Lawyer** | **Connecticut Veterans Legal Center** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/31/2026**

Aggregate Contributions: **$77.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Dunn** | **Greg** | | **1352** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **25 Bonnie View Dr** | **Trumbull** | **CT** | **06611** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/31/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Flynn-Harris** | **Patti** | | **1354** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **360 Carlton Dr** | **Cheshire** | **CT** | **06410** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **01/31/2026**

Aggregate Contributions: **$100.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Powell** | **Chris** | | **1339** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **5 Chestnut St** | **Trumbull** | **CT** | **06611** |

| Principal Occupation | Name of Employer |
|---|---|
| **Student** | **Student** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **01/31/2026** | **$50.00** | **$25.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Devin** | **Nichole** | | **1337** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **397 Main St** | **Terryville** | **CT** | **06786** |

| Principal Occupation | Name of Employer |
|---|---|
| **Echosonographer** | **Hospital of Central CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **01/31/2026** | **$70.00** | **$25.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Caron~~ | ~~Kim~~ | | ~~3266~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~69 Massachusetts Dr~~ | ~~Bristol~~ | ~~CT~~ | ~~06010~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Executive Administrator~~ | ~~New Opportunities Inc~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| ~~02/01/2026~~ | ~~$100.00~~ | ~~$25.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Chu | Jennifer | | 3267 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 78 Lynn Rd | Ivoryton | CT | 06442 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 02/01/2026 | $300.00 | $300.00 |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Crouch | Maurine | | 3268 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 156 Lakeview Ave | Hamden | CT | 06514 |

| Principal Occupation | Name of Employer |
|---|---|
| Public health | Yale |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/01/2026

Aggregate Contributions: $125.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Durso | Daniel | | 3269 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1490 Forbes St | East Hartford | CT | 06118 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/01/2026

Aggregate Contributions: $30.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Elia | Cathy | | 3270 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 164 Dorrance St | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/01/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Epstein | Janet | | 3271 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 76 Old Dike Rd | Trumbull | CT | 06611 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Reitred |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/01/2026

Aggregate Contributions: $5.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Evermore | Michele | | 3272 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 195 Fairlane Dr | Wethersfield | CT | 06109 |

| Principal Occupation | Name of Employer |
|---|---|
| Senior Fellow | National Academy of Social Insurance |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 02/01/2026 | $225.00 | $75.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Hansen~~ | ~~Fritz~~ | | ~~3273~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~55 Fernwood Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~graphic designer~~ | ~~self: Fritz Hansen Graphic Design~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| ~~02/01/2026~~ | ~~$750.00~~ | ~~$150.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| jayne | callie mackenzie | | 3274 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 151 First Ave | Kingston | NY | 12401 |

| Principal Occupation | Name of Employer |
|---|---|
| Social Change Worker | Self Employed - callie mackenzie |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 02/01/2026 | $64.00 | $10.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Persechino | Antonio | | 3275 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 820 W Hill Rd | New Hartford | CT | 06057 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 02/01/2026 | $20.00 | $20.00 |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Roy | Selena | | 3276 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 24 N Broad St | Pawcatuck | CT | 06379 |

| Principal Occupation | Name of Employer |
|---|---|
| Engineer | Gen Dynamics Electric Boat |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/01/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Slaybaugh | Dan | | 3277 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 108 Ryegate Ter | Stratford | CT | 06615 |

| Principal Occupation | Name of Employer |
|---|---|
| Firefighter | Town of Stratford |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/01/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Hansen~~ | ~~Fritz~~ | | ~~3273~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~55 Fernwood Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~graphic designer~~ | ~~Fritz Hansen Graphic Design~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/01/2026~~

Aggregate Contributions: ~~$600.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Caron** | **Kimberly** | | **3266** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **69 Massachusetts Dr** | **Bristol** | **CT** | **06010** |

| Principal Occupation | Name of Employer |
|---|---|
| **Executive Administrator** | **New Opportunities Inc** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/01/2026**

Aggregate Contributions: **$75.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Hansen** | **Fritz** | | **3273** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **55 Fernwood Rd** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **graphic designer** | **Fritz Hansen Graphic Design** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$150.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/01/2026**

Aggregate Contributions: **$600.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Elliott** | **William** | | **3283** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **116 Battis Rd** | **Hamden** | **CT** | **06514** |

| Principal Occupation | Name of Employer |
|---|---|
| **Flight attendant** | **Delta Air Lines** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/02/2026**

Aggregate Contributions: **$15.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Albis | James | | 3278 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 324 Old Mill Rd | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Partner | Graff Public Solutions |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/02/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Bell Jr | Donald | | 3279 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 105 Ridgewood Rd | East Hartford | CT | 06118 |

| Principal Occupation | Name of Employer |
|---|---|
| Policy Counsel | Project On Government Oversight |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/02/2026

Aggregate Contributions: $75.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Caron | Richard | | 3280 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 189 Ingham Hill Rd | Old Saybrook | CT | 06475 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/02/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| CONGDON-MARR | LINDA | | 3281 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 11A Brickyard Rd | Woodstock | CT | 06281 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/02/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cooney | Suzanne | | 3282 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 35 Filbert St | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/02/2026

Aggregate Contributions: $277.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Elliott~~ | ~~Billy~~ | | ~~3283~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~116 Battis Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06514~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Flight attendant~~ | ~~Delta Air Lines~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/02/2026~~

Aggregate Contributions: ~~$25.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Feely | Christine | | 3284 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 282 Westpoint Ter | West Hartford | CT | 06107 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/02/2026

Aggregate Contributions: $175.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Gagnon | Gail | | 3285 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 35 Overbrook Dr | East Hartford | CT | 06118 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/02/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Gaughan | Elena | | 3286 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 63 Grove Ave | Bristol | CT | 06010 |

| Principal Occupation | Name of Employer |
|---|---|
| EMT | Hunter AMS Ambulance |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $190.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/02/2026

Aggregate Contributions: $190.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Gottlieb | Andrew | | 3287 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 680 Tanner Marsh Rd | Guilford | CT | 06437 |

| Principal Occupation | Name of Employer |
|---|---|
| Researcher | LegiStorm |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/02/2026

Aggregate Contributions: $75.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Grewal | Elena | | 3288 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 130 Edgehill Rd | New Haven | CT | 06511 |

| Principal Occupation | Name of Employer |
|---|---|
| Data science | Elenas on Orange owner, Data science consultant, l |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $190.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/02/2026

Aggregate Contributions: $340.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hochberg | Andrew | | 3289 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 6 Saw Mill Hill Rd | Ridgefield | CT | 06877 |

| Principal Occupation | Name of Employer |
|---|---|
| Insurance | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/02/2026

Aggregate Contributions: $125.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hummel | Amy | | 3290 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 43 Devonshire Ln | Madison | CT | 06443 |

| Principal Occupation | Name of Employer |
|---|---|
| Regulatory Compliance | Yale University |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/02/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hussey | Mark | | 3291 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 12 Linda Ln | Simsbury | CT | 06070 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/02/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Johnston | Elizabeth | | 3292 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 85 Beverly Rd | New Haven | CT | 06515 |

| Principal Occupation | Name of Employer |
|---|---|
| Administrator | Yale University |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/02/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Kearney | Frederick T | | 3293 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 16 James Ave | Quaker Hill | CT | 06375 |

| Principal Occupation | Name of Employer |
|---|---|
| retired attorney and carpenter | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/02/2026

Aggregate Contributions: $35.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Ku | Jared | | 3294 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 28 Platts Hill Rd | Newtown | CT | 06470 |

| Principal Occupation | Name of Employer |
|---|---|
| Ice Rink Worker | UConn |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/02/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Lester Salchert | Catherine | | 3295 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 32 E Woodhaven Dr | Avon | CT | 06001 |

| Principal Occupation | Name of Employer |
|---|---|
| Attroney | City of Somerville |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/02/2026

Aggregate Contributions: $5.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Lomartire | Jon | | 3296 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 293 Green Hill Rd | Madison | CT | 06443 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 02/02/2026 | $100.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| M Kohan | Jeffrey | | 3297 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 10 Whispering Pines Dr | Wallingford | CT | 06492 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 02/02/2026 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McManus | Michael | | 3298 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 5 Broadview Rd | Brookfield | CT | 06804 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 02/02/2026 | $75.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Moran | Casey | | 3299 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1 Linden Pl | Hartford | CT | 06106 |

| Principal Occupation | Name of Employer |
|---|---|
| Manager | Transformative Veentures LLC |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $340.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 02/02/2026 | $340.00 |

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Pierson | Rachel | | 3300 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 7 Wheeler Dr | Pawcatuck | CT | 06379 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/02/2026

Aggregate Contributions: $80.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Rice | Andrew | | 3301 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 35 Quaker Pl | Milford | CT | 06460 |

| Principal Occupation | Name of Employer |
|---|---|
| Unemployed | Unemployed |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/02/2026

Aggregate Contributions: $340.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Stoddard | Paul | | 3302 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 5079 Main St | Stratford | CT | 06614 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $170.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/02/2026

Aggregate Contributions: $170.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Weigt | Donald | | 3303 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 21 Reed Ct | Bloomfield | CT | 06002 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/02/2026

Aggregate Contributions: $45.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Winkler | Phyllis | | 3304 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 20 Gottier Dr | Vernon | CT | 06066 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/02/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Brown | Debra | | 3305 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 157 Santamaria Dr | Torrington | CT | 06790 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/03/2026

Aggregate Contributions: $320.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Waldron | Mary | | 3306 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 30 Bokum Rd # 103 | Essex | CT | 06426 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/03/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Wilusz~~ | ~~Tony~~ | | ~~3307~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~157 Santamaria Dr~~ | ~~Torrington~~ | ~~CT~~ | ~~06790~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$20.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/03/2026~~

Aggregate Contributions: ~~$360.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Wilusz** | **Tony** | | **3307** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **157 Santamaria Dr** | **Torrington** | **CT** | **06790** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **02/03/2026** | **$340.00** | **$20.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Gartland** | **Daniel** | | **3315** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **26 Laurel St** | **Norwalk** | **CT** | **06855** |

| Principal Occupation | Name of Employer |
|---|---|
| **Journalist** | **Sports Illustrated** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **02/04/2026** | **$115.00** | **$75.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Baxter | Alice | | 3308 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 75 Churchill Rd | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 02/04/2026 | $200.00 | $100.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cartier | Wendy | | 3309 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 15 Pilgim Dr | Groton | CT | 06340 |

| Principal Occupation | Name of Employer |
|---|---|
| Designer | Electric Boat |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 02/04/2026 | $15.00 | $15.00 |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Couture | Steve | | 3310 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 128 Lakewood Cir S | Manchester | CT | 06040 |

| Principal Occupation | Name of Employer |
|---|---|
| Sales and marketing | Self |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $340.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/04/2026

Aggregate Contributions: $340.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Durao | Keith | | 3311 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 24 Hayes Ave | Ellington | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Administrative Specialist | USDA |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $340.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/04/2026

Aggregate Contributions: $340.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Dykstra | Joshua | | 3312 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 221 Park Rd | Oxford | CT | 06478 |

| Principal Occupation | Name of Employer |
|---|---|
| Project Manager | Lockheed Martin |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/04/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Freiser | Jeffrey | | 3313 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 247 Natchaug Dr | Meriden | CT | 06450 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/04/2026

Aggregate Contributions: $50.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Fritsch | Walter | | 3314 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 96 Victor St | East Haven | CT | 06512 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/04/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Gartland~~ | ~~Daniel~~ | | ~~3315~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~26 Laurel St~~ | ~~Norwalk~~ | ~~CT~~ | ~~06855~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Journalist~~ | ~~Sports Illustrated~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/04/2026~~

Aggregate Contributions: ~~$190.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Gernat | Jessica | | 3316 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 145 Coppermine Rd | Oxford | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| | |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/04/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Luxenberg | Geoffrey | | 3317 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 93 Plymouth Ln | Manchester | CT | 06040 |

| Principal Occupation | Name of Employer |
|---|---|
| Legislator | State of CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/04/2026

Aggregate Contributions: $100.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McDonagh | Joseph | | 3318 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 3656 Whitney Ave | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| Insurance Agent | Joseph P. McDonagh, CLU |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $250.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/04/2026

Aggregate Contributions: $250.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~McLellan~~ | ~~Ann~~ | | ~~3319~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~23 Clayton Rd~~ | ~~Danbury~~ | ~~CT~~ | ~~06811~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/04/2026~~

Aggregate Contributions: ~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Soto | Cynthia | | 3320 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 4 Charter Rd | Ellington | CT | 06029 |

| Principal Occupation | Name of Employer |
|---|---|
| Home daycare | Jacks Playhouse |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/04/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Tehan~~ | ~~John~~ | | ~~3321~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~26 Eldredge Mills Rd~~ | ~~Willington~~ | ~~CT~~ | ~~06279~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/04/2026~~

Aggregate Contributions: ~~$150.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Templeton | Vivian | | 3322 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1008 Bullet Hill Rd | Southbury | CT | 06488 |

| Principal Occupation | Name of Employer |
|---|---|
| Farmer | Aradia Farm |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/04/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Weaver | Robert | | 3323 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 213 Grassy Hill Rd | Old Lyme | CT | 06371 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/04/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **McLellan** | **Ann** | | **3319** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **23 Clayton Rd** | **Danbury** | **CT** | **06811** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/04/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Tehan** | **John** | | **3321** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **26 Eldredge Mills Rd** | **Willington** | **CT** | **06279** |

| Principal Occupation | Name of Employer |
|---|---|
| **Operations Manager** | **Great Sky Solar Inc** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/04/2026**

Aggregate Contributions: **$75.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Bowman | Phaedrel | | 3324 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 211 Shepard Ave | Hamden | CT | 06514 |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | Kelly Services |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/05/2026

Aggregate Contributions: $10.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| DeCampos | Sandy | | 3325 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 691 N Main St | Manchester | CT | 06042 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/05/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Sorna | Sarker | | 3326 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 79 Briari Hill Rd | Norwich | CT | 06360 |

| Principal Occupation | Name of Employer |
|---|---|
| Dentist | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/05/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Rosenberg** | **Stephen** | | **2361** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **117 Harmon St** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Attorney** | **Eversource Energy** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/06/2026**

Aggregate Contributions: **$25.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Jabaily** | **Margaret** | | **2363** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **20 Oakridge Dr** | **Granby** | **CT** | **06035** |

| Principal Occupation | Name of Employer |
|---|---|
| **Teacher** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/06/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Bolinsky** | **Mitch** | | **2364** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **3 Wiley Ln** | **Newtown** | **CT** | **06470** |

| Principal Occupation | Name of Employer |
|---|---|
| **State Representative** | **State of Connecticut** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/06/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~**Rosenberg**~~ | ~~**Samuel**~~ | | ~~**2365**~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~**117 Harmon St**~~ | ~~**Hamden**~~ | ~~**CT**~~ | ~~**06517**~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~**Student**~~ | ~~**Yale University**~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~**$25.00**~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~**02/06/2026**~~

Aggregate Contributions: ~~**$50.00**~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Buhler** | **William** | | **2366** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **8 Winchester Way** | **Cromwell** | **CT** | **06416** |

| Principal Occupation | Name of Employer |
|---|---|
| **retired** | **retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/06/2026**

Aggregate Contributions: **$350.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Heath-Johnston** | **Pam** | | **2367** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **260 Cavan Ln** | **Glastonbury** | **CT** | **06033** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/06/2026**

Aggregate Contributions: **$10.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Galla** | **Traci** | | **2368** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **6300 Main St .** | **Trumbull** | **CT** | **06611** |

| Principal Occupation | Name of Employer |
|---|---|
| **Teacher** | **Oxford Board of Education** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/06/2026**

Aggregate Contributions: **$10.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Gioiello** | **David** | | **2369** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **65 Walnut Tree Hill Rd** | **Shelton** | **CT** | **06484** |

| Principal Occupation | Name of Employer |
|---|---|
| **consultant** | **Ihsc, llc** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/06/2026**

Aggregate Contributions: **$75.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Giskin** | **Daniel** | | **2370** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **40 S Cherry St** | **Wallingford** | **CT** | **06492** |

| Principal Occupation | Name of Employer |
|---|---|
| **Sales Manager** | **SolarShip Corp** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/06/2026**

Aggregate Contributions: **$25.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Giering** | **Andrew** | | **2371** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **43 Harbour Close** | **New Haven** | **CT** | **06519** |

| Principal Occupation | Name of Employer |
|---|---|
| **Attorney** | **U.S. Courts** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/06/2026**

Aggregate Contributions: **$100.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Knighton** | **James** | | **2372** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **140 Davis Rd** | **Storrs** | **CT** | **06268** |

| Principal Occupation | Name of Employer |
|---|---|
| **Faculty** | **UConn** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/06/2026**

Aggregate Contributions: **$75.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Krantz** | **Thomas** | | **2373** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **143 Hoyt St** | **Stamford** | **CT** | **06905** |

| Principal Occupation | Name of Employer |
|---|---|
| **retired** | **retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/06/2026**

Aggregate Contributions: **$810.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Machuga** | **Marcia** | | **2374** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **25 Sunset Rd** | **Old Saybrook** | **CT** | **06475** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/06/2026**

Aggregate Contributions: **$75.00**

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Madore** | **Paul** | | **2375** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **63 Greenwoods Rd E** | **Norfolk** | **CT** | **06058** |

| Principal Occupation | Name of Employer |
|---|---|
| **retired** | **retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/06/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Villone** | **Craig** | | **2376** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **60 Elika Rd** | **Wallingford** | **CT** | **06492** |

| Principal Occupation | Name of Employer |
|---|---|
| **retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$30.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/06/2026**

Aggregate Contributions: **$85.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Scully** | **Kathleen** | | **2377** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **127 Quarry Village Rd** | **Cheshire** | **CT** | **06410** |

| Principal Occupation | Name of Employer |
|---|---|
| **retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/06/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Fox** | **Larry** | | **2378** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **60 Mountain View Dr** | **West Hartford** | **CT** | **06117** |

| Principal Occupation | Name of Employer |
|---|---|
| **retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/06/2026**

Aggregate Contributions: **$300.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Mauro | Vin | | 2379 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 945 State St | New Haven | CT | 06512 |

| Principal Occupation | Name of Employer |
|---|---|
| Counsel | Mccarter and English |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/06/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Rebillard | Jean | | 2380 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 447 Cherry Brook Rd | Canton | CT | 06019 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/06/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| cooke | judy-ann | | 2382 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 16 Sage Park Rd | Windsor | CT | 06095 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $34.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/06/2026

Aggregate Contributions: $34.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~King~~ | ~~Gini~~ | | ~~2383~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~264 State St~~ | ~~Guilford~~ | ~~CT~~ | ~~06437~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~retired~~ | ~~retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/06/2026~~

Aggregate Contributions: ~~$300.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Scanley | Jules | | 2384 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 485 Lighthouse Rd | New Haven | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/06/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hunter | Karen | | 2385 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 37 Hillside Dr | New Fairfield | CT | 06812 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/06/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| King | Gini | | 2383 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 264 State St | Guilford | CT | 06437 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/06/2026

Aggregate Contributions: $300.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Rosenberg | Samuel | | 2365 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 117 Harmon St | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Student | Student |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/06/2026

Aggregate Contributions: $50.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Sanchione** | **Louise** | | **2381** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **315 Eastern St .** | **New Haven** | **CT** | **06513** |

| Principal Occupation | Name of Employer |
|---|---|
| **retired** | **retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **02/06/2026** | **$5.00** | **$5.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Garrett | Merry | C | 1655 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 151 Kozley Rd | Tolland | CT | 06084 |

| Principal Occupation | Name of Employer |
|---|---|
| Reitred | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☒ Personal Check ☐ Money Order ☐ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 02/06/2026 | $50.00 | $50.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Rosenberg~~ | ~~Stephen~~ | | ~~2361~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~117 Harmon St~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Eversource Energy~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| ~~02/06/2026~~ | ~~$50.00~~ | ~~$25.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Sparano | Mark | | 2362 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 88 Hickory Ln | Madison | CT | 06443 |

| Principal Occupation | Name of Employer |
|---|---|
| | Board Member |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 02/06/2026 | $100.00 | $100.00 |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Jabaily~~ | ~~Margaret~~ | | ~~2363~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~20 Oakridge Dr~~ | ~~Granby~~ | ~~CT~~ | ~~06035~~ |

Principal Occupation:

Name of Employer: ~~CT~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/06/2026~~

Aggregate Contributions: ~~$50.00~~

~~$25.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Bolinsky~~ | ~~Mitch~~ | | ~~2364~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~3 Wiley Ln~~ | ~~Newtown~~ | ~~CT~~ | ~~06470~~ |

Principal Occupation:

Name of Employer: ~~State of Connecticut~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/06/2026~~

Aggregate Contributions: ~~$100.00~~

~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Rosenberg~~ | ~~Samuel~~ | | ~~2365~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~117 Harmon St~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

Principal Occupation:

Name of Employer: ~~Yale University~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/06/2026~~

Aggregate Contributions: ~~$75.00~~

~~$25.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Buhler~~ | ~~William~~ | | ~~2366~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~8 Winchester Way~~ | ~~Cromwell~~ | ~~CT~~ | ~~06416~~ |

Principal Occupation:

Name of Employer: ~~retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/06/2026~~

Aggregate Contributions: ~~$400.00~~

~~$50.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Heath Johnston~~ | ~~Pam~~ | | ~~2367~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~260 Cavan Ln~~ | ~~Glastonbury~~ | ~~CT~~ | ~~06033~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/06/2026~~

Aggregate Contributions: ~~$20.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Galla~~ | ~~Traci~~ | | ~~2368~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~6300 Main St .~~ | ~~Trumbull~~ | ~~CT~~ | ~~06611~~ |

Principal Occupation:

Name of Employer: ~~Oxford Board of Education~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/06/2026~~

Aggregate Contributions: ~~$20.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Gioiello~~ | ~~David~~ | | ~~2369~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~65 Walnut Tree Hill Rd~~ | ~~Shelton~~ | ~~CT~~ | ~~06484~~ |

Principal Occupation:

Name of Employer: ~~Ihsc, llc~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/06/2026~~

Aggregate Contributions: ~~$150.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Giskin~~ | ~~Daniel~~ | | ~~2370~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~40 S Cherry St~~ | ~~Wallingford~~ | ~~CT~~ | ~~06492~~ |

Principal Occupation:

Name of Employer: ~~SolarShip Corp~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/06/2026~~

Aggregate Contributions: ~~$50.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Giering~~ | ~~Andrew~~ | | ~~2371~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~43 Harbour Close~~ | ~~New Haven~~ | ~~CT~~ | ~~06519~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~U.S. Courts~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/06/2026~~

Aggregate Contributions: ~~$200.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Knighton~~ | ~~James~~ | | ~~2372~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~140 Davis Rd~~ | ~~Storrs~~ | ~~CT~~ | ~~06268~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~UConn~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/06/2026~~

Aggregate Contributions: ~~$150.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Krantz~~ | ~~Thomas~~ | | ~~2373~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~143 Hoyt St~~ | ~~Stamford~~ | ~~CT~~ | ~~06905~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/06/2026~~

Aggregate Contributions: ~~$885.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Machuga~~ | ~~Marcia~~ | | ~~2374~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~25 Sunset Rd~~ | ~~Old Saybrook~~ | ~~CT~~ | ~~06475~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/06/2026~~

Aggregate Contributions: ~~$100.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Madore~~ | ~~Paul~~ | | ~~2375~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~63 Greenwoods Rd E~~ | ~~Norfolk~~ | ~~CT~~ | ~~06058~~ |

Principal Occupation:

Name of Employer: ~~retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/06/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Villone~~ | ~~Craig~~ | | ~~2376~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~60 Elika Rd~~ | ~~Wallingford~~ | ~~CT~~ | ~~06492~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$30.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/06/2026~~

Aggregate Contributions: ~~$115.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Scully~~ | ~~Kathleen~~ | | ~~2377~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~127 Quarry Village Rd~~ | ~~Cheshire~~ | ~~CT~~ | ~~06410~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/06/2026~~

Aggregate Contributions: ~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Fox~~ | ~~Larry~~ | | ~~2378~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~60 Mountain View Dr~~ | ~~West Hartford~~ | ~~CT~~ | ~~06117~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/06/2026~~

Aggregate Contributions: ~~$400.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Mauro~~ | ~~Vin~~ | | ~~2379~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~945 State St~~ | ~~New Haven~~ | ~~CT~~ | ~~06512~~ |

Principal Occupation:

Name of Employer: ~~Mccarter and English~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/06/2026~~

Aggregate Contributions: ~~$200.00~~

~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Rebillard~~ | ~~Jean~~ | | ~~2380~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~447 Cherry Brook Rd~~ | ~~Canton~~ | ~~CT~~ | ~~06019~~ |

Principal Occupation:

Name of Employer: ~~None~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/06/2026~~

Aggregate Contributions: ~~$50.00~~

~~$25.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Sanchione~~ | ~~Louise~~ | | ~~2381~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~315 Eastern St .~~ | ~~New Haven~~ | ~~CT~~ | ~~06513~~ |

Principal Occupation:

Name of Employer: ~~CT~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/06/2026~~

Aggregate Contributions: ~~$10.00~~

~~$5.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~cooke~~ | ~~judy ann~~ | | ~~2382~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~16 Sage Park Rd~~ | ~~Windsor~~ | ~~CT~~ | ~~06095~~ |

Principal Occupation:

Name of Employer: ~~retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/06/2026~~

Aggregate Contributions: ~~$68.00~~

~~$34.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~King~~ | ~~Gini~~ | | ~~2383~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~264 State St~~ | ~~Guilford~~ | ~~CT~~ | ~~06437~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Clergy retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/06/2026~~ | ~~$450.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Scanley~~ | ~~Jules~~ | | ~~2384~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~485 Lighthouse Rd~~ | ~~New Haven~~ | ~~CT~~ | |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/06/2026~~ | ~~$300.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Hunter~~ | ~~Karen~~ | | ~~2385~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~37 Hillside Dr~~ | ~~New Fairfield~~ | ~~CT~~ | ~~06812~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/06/2026~~ | ~~$100.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Powell | Chris | | 2386 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 5 Chestnut St | Trumbull | CT | 06611 |

| Principal Occupation | Name of Employer |
|---|---|
| | Student |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: $30.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 02/06/2026 | $105.00 |

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Dove** | **Elaine** | | **2348** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **137 Santa Fe Ave** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Social Worker** | **Elaine M Dove** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **02/07/2026** | **$50.00** | **$50.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Brody** | **Leslie** | | **2349** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **2 Nutmeg Ln** | **Sherman** | **CT** | **06784** |

| Principal Occupation | Name of Employer |
|---|---|
| **retired** | **retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **02/07/2026** | **$200.00** | **$200.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Goslin** | **Megan** | | **2350** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **83 Haverford St** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Psychologist** | **Yale University** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **02/07/2026** | **$100.00** | **$50.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Ginsburg** | **Jeff** | | **2351** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **6 North Cv** | **Sherman** | **CT** | **06784** |

| Principal Occupation | Name of Employer |
|---|---|
| **retired** | **retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **02/07/2026** | **$75.00** | **$75.00** |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McDonald | Wendy | | 2352 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 27 Old Willimantic Rd | Columbia | CT | 06237 |

| Principal Occupation | Name of Employer |
|---|---|
| Realtor | Century 21 AllPoints Realty |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $30.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/07/2026

Aggregate Contributions: $30.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Abad | Joey | | 2353 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 187 Hampton Ave | West Hartford | CT | 06110 |

| Principal Occupation | Name of Employer |
|---|---|
| Staff | Trinity College |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/07/2026

Aggregate Contributions: $15.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Pope | Jennifer | | 2354 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 37 Woodstock Rd | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Clinical Research Manager | Yale University |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $215.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/07/2026

Aggregate Contributions: $340.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Kevorkian | Corinne | | 2355 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1 Jericho Rd S | Sherman | CT | 06784 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/07/2026

Aggregate Contributions: $100.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Ellner | Abbey | | 2356 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 44 Gordon St | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Wellness Services Coordinator | Western CT Area Agency on Aging |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/07/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hatcher | Patrick | | 2357 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 7 Pheasant Run | Windsor | CT | 06095 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/07/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Petersen Hatcher | Karen | | 2358 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 7 Pheasant Run | Windsor | CT | 06095 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/07/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Shere | Victoria | | 2359 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 581A Heritage Vlg | Southbury | CT | 06488 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/07/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Pilaar** | **Jeremy** | | **2360** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **144 Hepburn Rd** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Associate Research Scholar** | **Yale Law School** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/07/2026**

Aggregate Contributions: **$150.00**

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Dove~~ | ~~Elaine~~ | | ~~2348~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~137 Santa Fe Ave~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~self employed~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/07/2026~~

Aggregate Contributions: ~~$100.00~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Brody~~ | ~~Leslie~~ | | ~~2349~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~2 Nutmeg Ln~~ | ~~Sherman~~ | ~~CT~~ | ~~06784~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$200.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/07/2026~~

Aggregate Contributions: ~~$400.00~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Goslin~~ | ~~Megan~~ | | ~~2350~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~83 Haverford St~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Yale University~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/07/2026~~

Aggregate Contributions: ~~$150.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Ginsburg~~ | ~~Jeff~~ | | ~~2351~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~6 North Cv~~ | ~~Sherman~~ | ~~CT~~ | ~~06784~~ |

Principal Occupation:

Name of Employer: ~~retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/07/2026~~

Aggregate Contributions: ~~$150.00~~

~~$75.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~McDonald~~ | ~~Wendy~~ | | ~~2352~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~27 Old Willimantic Rd~~ | ~~Columbia~~ | ~~CT~~ | ~~06237~~ |

Principal Occupation:

Name of Employer: ~~Century 21 AllPoints Realty~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/07/2026~~

Aggregate Contributions: ~~$60.00~~

~~$30.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Abad~~ | ~~Joey~~ | | ~~2353~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~187 Hampton Ave~~ | ~~West Hartford~~ | ~~CT~~ | ~~06110~~ |

Principal Occupation:

Name of Employer: ~~Trinity College~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/07/2026~~

Aggregate Contributions: ~~$20.00~~

~~$5.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Pope~~ | ~~Jennifer~~ | | ~~2354~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~37 Woodstock Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

Principal Occupation:

Name of Employer: ~~Yale University~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/07/2026~~

Aggregate Contributions: ~~$555.00~~

~~$215.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Kevorkian~~ | ~~Corinne~~ | | ~~2355~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1 Jericho Rd S~~ | ~~Sherman~~ | ~~CT~~ | ~~06784~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/07/2026~~ | ~~$200.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Ellner~~ | ~~Abbey~~ | | ~~2356~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~44 Gordon St~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Western CT Area Agency on Aging~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/07/2026~~ | ~~$200.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Hatcher~~ | ~~Patrick~~ | | ~~2357~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~7 Pheasant Run~~ | ~~Windsor~~ | ~~CT~~ | ~~06095~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/07/2026~~ | ~~$100.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Petersen Hatcher~~ | ~~Karen~~ | | ~~2358~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~7 Pheasant Run~~ | ~~Windsor~~ | ~~CT~~ | ~~06095~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/07/2026~~ | ~~$100.00~~ |

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Shere~~ | ~~Victoria~~ | | ~~2359~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~581A Heritage Vlg~~ | ~~Southbury~~ | ~~CT~~ | ~~06488~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/07/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Pilaar~~ | ~~Jeremy~~ | | ~~2360~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~144 Hepburn Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Yale Law School~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/07/2026~~

Aggregate Contributions: ~~$250.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Noel** | **Judy** | | **2341** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **33 11th Section Rd** | **Hampton** | **CT** | **06247** |

| Principal Occupation | Name of Employer |
|---|---|
| **Care Navigator** | **United Services** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☒ Yes ☐ No

If yes, list Event # **02082026D**

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/08/2026**

Aggregate Contributions: **$100.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Smith** | **Deborah** | | **2344** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **87 E Gate Ln** | **Hamden** | **CT** | **06514** |

| Principal Occupation | Name of Employer |
|---|---|
| **retired** | **retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/08/2026**

Aggregate Contributions: **$75.00**

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Hoffman~~ | ~~Diane~~ | | ~~2345~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~190 Wilmot Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06514~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~retired~~ | ~~retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/08/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Noel~~ | ~~Judy~~ | | ~~2341~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~33 11th Section Rd~~ | ~~Hampton~~ | ~~CT~~ | ~~06247~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~United Services~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☒ Yes ☐ No

If yes, list Event # ~~02082026D~~

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/08/2026~~

Aggregate Contributions: ~~$200.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Vaughan | Barbara | | 2342 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 772 Warrenville Rd | Mansfield Center | CT | 06250 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☒ Yes ☐ No

If yes, list Event # 02082026E

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/08/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Krieger | Irwin | | 2343 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 115 Lakeview Dr | Ashford | CT | 06278 |

| Principal Occupation | Name of Employer |
|---|---|
| | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☒ Yes ☐ No

If yes, list Event # 02082026D

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/08/2026

Aggregate Contributions: $50.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Smith~~ | ~~Deborah~~ | | ~~2344~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~87 E Gate Ln~~ | ~~Hamden~~ | ~~CT~~ | ~~06514~~ |

Principal Occupation:

Name of Employer: ~~retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/08/2026~~

Aggregate Contributions: ~~$100.00~~

~~$25.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Hoffman~~ | ~~Diane~~ | | ~~2345~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~190 Wilmot Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06514~~ |

Principal Occupation:

Name of Employer: ~~retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/08/2026~~

Aggregate Contributions: ~~$150.00~~

~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Douglas | Lenore | | 2346 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 2 Pratt Is | Darien | CT | 06820 |

Principal Occupation:

Name of Employer: Writer

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/08/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Aldrich | Sarah | | 2347 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 45 Filbert St | Hamden | CT | 06517 |

Principal Occupation:

Name of Employer: No

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/08/2026

Aggregate Contributions: $175.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Holness** | **Wendy** | | **2322** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **31 Barkledge Dr Newington Ct # 6111** | **Newington** | **CT** | |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/09/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Rousey** | **Micah** | | **2323** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **129 Stagecoach Rd** | **Avon** | **CT** | **06001** |

| Principal Occupation | Name of Employer |
|---|---|
| **Data Officer** | **Vizient, Inc** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/09/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Armentano** | **Francis** | | **2324** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **204 Mountain Rd** | **North Granby** | **CT** | **06060** |

| Principal Occupation | Name of Employer |
|---|---|
| **retired** | **retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/09/2026**

Aggregate Contributions: **$75.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Eaton** | **Jackie** | | **2325** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **6 Redwood Ln** | **New Milford** | **CT** | **06776** |

| Principal Occupation | Name of Employer |
|---|---|
| **Community Liaison** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$150.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/09/2026**

Aggregate Contributions: **$150.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Sullivan** | **Joe** | | **2326** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **20 Deepwood Dr** | **Avon** | **CT** | **06001** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/09/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Gagnon** | **Adam** | | **2327** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **35 Overbrook Dr** | **East Hartford** | **CT** | **06118** |

| Principal Occupation | Name of Employer |
|---|---|
| **Advertising Operations Coordinator** | **Comcast Advertising** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$150.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/09/2026**

Aggregate Contributions: **$150.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~**Vigneau**~~ | ~~**Matthew**~~ | | ~~**2328**~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~**5 Gilbert St**~~ | ~~**South Burlington**~~ | ~~**VT**~~ | ~~**05403**~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~**labor organizer**~~ | ~~**VT**~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~**$10.00**~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~**02/09/2026**~~

Aggregate Contributions: ~~**$20.00**~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Weiner** | **Eric** | | **2329** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **150 Broad St** | **Windsor** | **CT** | **06095** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/09/2026**

Aggregate Contributions: **$25.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Meyer~~ | ~~Kristen~~ | | ~~2330~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~9 School Hill Ln~~ | ~~Westbrook~~ | ~~CT~~ | ~~06498~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Research Administrator~~ | ~~Yale University~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/09/2026~~

Aggregate Contributions: ~~$275.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Dugan | James | | 2333 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 6 Redwood Ln | New Milford | CT | 06776 |

| Principal Occupation | Name of Employer |
|---|---|
| Disabled | Disabled |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/09/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Dyess | Reona | | 2332 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 4 Harbor Ln | New London | CT | 06320 |

| Principal Occupation | Name of Employer |
|---|---|
| Executive Director | The Center: A Drop-In Community Learning and Resou |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/09/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Gallo | Elizabeth | | 2334 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 2 Pond Rd | Truro | MA | 03652 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/09/2026

Aggregate Contributions: $50.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Meyer | Kristen | | 2330 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 9 School Hill Ln | Westbrook | CT | 06498 |

| Principal Occupation | Name of Employer |
|---|---|
| Research Administrator | Yale University |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/09/2026

Aggregate Contributions: $275.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Dwyer | Chris | | 2335 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 47 Toilsome Ave | Norwalk | CT | 06851 |

| Principal Occupation | Name of Employer |
|---|---|
| Unemployed | Unemployed |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/09/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Vigneau | Matthew | | 2328 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 5 Gilbert St | South Burlington | VT | 05403 |

| Principal Occupation | Name of Employer |
|---|---|
| labor organizer | VT State Labor Council AFL-CIO |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/09/2026

Aggregate Contributions: $20.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| MCCLEARY | Rita | | 2331 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 926 Ridge Rd | Hamden | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| psychotherapist (psychologist) | Rita W McCleary, PsyD |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/09/2026

Aggregate Contributions: $100.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Holness~~ | ~~Wendy~~ | | ~~2322~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~31 Barkledge Dr Newington Ct # 6111~~ | ~~Newington~~ | ~~CT~~ | |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/09/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Rousey~~ | ~~Micah~~ | | ~~2323~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~129 Stagecoach Rd~~ | ~~Avon~~ | ~~CT~~ | ~~06001~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Vizient, Inc~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/09/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Armentano~~ | ~~Francis~~ | | ~~2324~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~204 Mountain Rd~~ | ~~North Granby~~ | ~~CT~~ | ~~06060~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/09/2026~~

Aggregate Contributions: ~~$150.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Eaton~~ | ~~Jackie~~ | | ~~2325~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~6 Redwood Ln~~ | ~~New Milford~~ | ~~CT~~ | ~~06776~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/09/2026~~

Aggregate Contributions: ~~$300.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Sullivan~~ | ~~Joe~~ | | ~~2326~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~20 Deepwood Dr~~ | ~~Avon~~ | ~~CT~~ | ~~06001~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/09/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Gagnon~~ | ~~Adam~~ | | ~~2327~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~35 Overbrook Dr~~ | ~~East Hartford~~ | ~~CT~~ | ~~06118~~ |

Principal Occupation:

Name of Employer: ~~Comcast Advertising~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/09/2026~~

Aggregate Contributions: ~~$300.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Vigneau~~ | ~~Matthew~~ | | ~~2328~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~5 Gilbert St~~ | ~~South Burlington~~ | ~~VT~~ | ~~05403~~ |

Principal Occupation:

Name of Employer: ~~VT~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/09/2026~~

Aggregate Contributions: ~~$30.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Weiner~~ | ~~Eric~~ | | ~~2329~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~150 Broad St~~ | ~~Windsor~~ | ~~CT~~ | ~~06095~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/09/2026~~

Aggregate Contributions: ~~$50.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Meyer~~ | ~~Kristen~~ | | ~~2330~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~9 School Hill Ln~~ | ~~Westbrook~~ | ~~CT~~ | ~~06498~~ |

Principal Occupation:

Name of Employer: ~~Yale University~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/09/2026~~

Aggregate Contributions: ~~$350.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~MCCLEARY~~ | ~~Rita~~ | | ~~2331~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~926 Ridge Rd~~ | ~~Hamden~~ | ~~CT~~ | |

Principal Occupation:

Name of Employer: ~~self-employed~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/09/2026~~

Aggregate Contributions: ~~$150.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Dyess~~ | ~~Reona~~ | | ~~2332~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~4 Harbor Ln~~ | ~~New London~~ | ~~CT~~ | ~~06320~~ |

Principal Occupation:

Name of Employer: ~~The Center: A Drop-In Community Learning and Resou~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/09/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Dugan~~ | ~~James~~ | | ~~2333~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~6 Redwood Ln~~ | ~~New Milford~~ | ~~CT~~ | ~~06776~~ |

Principal Occupation:

Name of Employer: ~~Disabled~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/09/2026~~

Aggregate Contributions: ~~$300.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Gallo~~ | ~~Elizabeth~~ | | ~~2334~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~2 Pond Rd~~ | ~~Truro~~ | ~~MA~~ | ~~03652~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/09/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Dwyer~~ | ~~Chris~~ | | ~~2335~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~47 Toilsome Ave~~ | ~~Norwalk~~ | ~~CT~~ | ~~06851~~ |

Principal Occupation:

Name of Employer: ~~Self-employed~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/09/2026~~

Aggregate Contributions: ~~$300.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Berube~~ | ~~Marc~~ | | ~~2336~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~531 Highland St~~ | ~~Wethersfield~~ | ~~CT~~ | ~~06109~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/09/2026~~

Aggregate Contributions: ~~$20.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Poulos | Linda | | 2337 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 29 Doubleday Rd | Columbia | CT | 06237 |

Principal Occupation: Retired

Name of Employer: Retired

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☒ Yes ☐ No

If yes, list Event #: 02082026E

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/09/2026

Aggregate Contributions: $100.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Watson~~ | ~~Gavin~~ | | ~~2338~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~70 Crescent Dr~~ | ~~Ridgefield~~ | ~~CT~~ | ~~06877~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/09/2026~~ | ~~$425.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Michalsen~~ | ~~Sheila~~ | | ~~2339~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~896 Dunbar Hill Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06514~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~NA~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/09/2026~~ | ~~$50.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Donnelly~~ | ~~Kate~~ | | ~~2340~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~202 Station Rd~~ | ~~Hampton~~ | ~~CT~~ | ~~06247~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/09/2026~~ | ~~$250.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Berube** | **Marc** | | **2336** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **531 Highland St** | **Wethersfield** | **CT** | **06109** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| **02/09/2026** | **$10.00** |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Watson** | **Gavin** | | **2338** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **70 Crescent Dr** | **Ridgefield** | **CT** | **06877** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/09/2026**

Aggregate Contributions: **$350.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Michalsen** | **Sheila** | | **2339** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **896 Dunbar Hill Rd** | **Hamden** | **CT** | **06514** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/09/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Donnelly** | **Kate** | | **2340** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **202 Station Rd** | **Hampton** | **CT** | **06247** |

| Principal Occupation | Name of Employer |
|---|---|
| **retired** | **retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/09/2026**

Aggregate Contributions: **$150.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Foley** | **Douglas** | | **2318** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **11 Doren Ave** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Sales Director** | **Please & Thank You** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$150.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/10/2026**

Aggregate Contributions: **$200.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Frampton** | **Will** | | **2319** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **6 Pebble Rd** | **Newtown** | **CT** | **06470** |

| Principal Occupation | Name of Employer |
|---|---|
| **Chief Operating Officer** | **Hart Transit** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/10/2026**

Aggregate Contributions: **$10.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Flynn** | **Kevin** | | **2320** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **67 Sachem Rd** | **Fairfield** | **CT** | |

| Principal Occupation | Name of Employer |
|---|---|
| **Corporate Social Repsonisbiity officer** | **CT Depratment of Labor** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/10/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Finn** | **Daniel** | | **2321** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **85 Champion Hill Rd** | **East Hampton** | **CT** | **06424** |

| Principal Occupation | Name of Employer |
|---|---|
| **Financial Advisor** | **New York Life Insurance Company** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$150.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/10/2026**

Aggregate Contributions: **$150.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Foley~~ | ~~Douglas~~ | | ~~2318~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~11 Doren Ave~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Please & Thank You~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/10/2026~~

Aggregate Contributions: ~~$350.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Frampton~~ | ~~Will~~ | | ~~2319~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~6 Pebble Rd~~ | ~~Newtown~~ | ~~CT~~ | ~~06470~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Hart Transit~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/10/2026~~

Aggregate Contributions: ~~$20.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Flynn~~ | ~~Kevin~~ | | ~~2320~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~67 Sachem Rd~~ | ~~Fairfield~~ | ~~CT~~ | |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CT Depratment of Labor~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/10/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Finn~~ | ~~Daniel~~ | | ~~2321~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~85 Champion Hill Rd~~ | ~~East Hampton~~ | ~~CT~~ | ~~06424~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~New York Life Insurance Company~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/10/2026~~

Aggregate Contributions: ~~$300.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Zetye** | **Philip** | | **2315** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **983 Rainbow Trl** | **Orange** | **CT** | **06477** |

| Principal Occupation | Name of Employer |
|---|---|
| **teacher** | **Fairfield Public Schools** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/11/2026**

Aggregate Contributions: **$10.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Elliott** | **William** | | **2314** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **116 Battis Rd** | **Hamden** | **CT** | **06514** |

| Principal Occupation | Name of Employer |
|---|---|
| **Flight Attendant** | **Delta Air Lines** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/11/2026**

Aggregate Contributions: **$40.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Caldwell** | **Jennifer** | | **2305** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **69 Kimberly Cir North Hvn # 6473** | **North Haven** | **CT** | **06473** |

| Principal Occupation | Name of Employer |
|---|---|
| **Project Manager** | **Chnct** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/11/2026**

Aggregate Contributions: **$75.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Thomson** | **Ellen** | | **2306** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **250 Salmon Brook St** | **Granby** | **CT** | **06035** |

| Principal Occupation | Name of Employer |
|---|---|
| **retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$200.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/11/2026**

Aggregate Contributions: **$200.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Paulson** | **Eric** | | **2307** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **69 Brittany Ave** | **Trumbull** | **CT** | **06611** |

| Principal Occupation | Name of Employer |
|---|---|
| **Network Consultant** | **Eric G Paulson LLC** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/11/2026**

Aggregate Contributions: **$25.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Fagerstal** | **Christina** | | **2308** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **289 Weed St** | **New Canaan** | **CT** | **06840** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/11/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Kohler** | **Cheryl** | | **2309** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **105 Fiddler Green Rd Unit** | **Stratford** | **CT** | **06614** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/11/2026**

Aggregate Contributions: **$10.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **cohen** | **debra** | | **2310** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **73 Church St** | **Wethersfield** | **CT** | **06109** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/11/2026**

Aggregate Contributions: **$105.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Kruger** | **Margaret** | | **2311** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **220 Westledge Dr** | **Torrington** | **CT** | **06790** |

| Principal Occupation | Name of Employer |
|---|---|
| **retired** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/11/2026**

Aggregate Contributions: **$5.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Coleman | Alyce | | 2312 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 2459 Whitney Ave . | Hamden | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| retired | HomeServe |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/11/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Gianini | Donna | | 2313 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 5 Butternut Cir | Avon | CT | 06001 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/11/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Elliott~~ | ~~William~~ | | ~~2314~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~116 Battis Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06514~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Flight Attendant~~ | ~~Delta Air Lines~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/11/2026~~

Aggregate Contributions: ~~$60.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Zetye~~ | ~~Philip~~ | | ~~2315~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~983 Rainbow Trl~~ | ~~Orange~~ | ~~CT~~ | ~~06477~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~teaher~~ | ~~NA~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/11/2026~~

Aggregate Contributions: ~~$10.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Smith** | **Stephen** | | **2316** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **70 Karen Dr** | **Manchester** | **CT** | **06042** |

| Principal Occupation | Name of Employer |
|---|---|
| **Union Labor** | **Pratt and Whitney** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| **02/11/2026** | **$25.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Schomaker** | **Kathleen** | | **2317** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **37 Hepburn Rd** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **retired** | **retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| **02/11/2026** | **$50.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Caldwell~~ | ~~Jennifer~~ | | ~~2305~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~69 Kimberly Cir North Hvn # 6473~~ | ~~North Haven~~ | ~~CT~~ | ~~06473~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Chnct~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/11/2026~~ | ~~$150.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Thomson~~ | ~~Ellen~~ | | ~~2306~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~PO Box 322~~ | ~~Granby~~ | ~~CT~~ | ~~06035~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$200.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/11/2026~~ | ~~$400.00~~ |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Paulson~~ | ~~Eric~~ | | ~~2307~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~69 Brittany Ave~~ | ~~Trumbull~~ | ~~CT~~ | ~~06611~~ |

Principal Occupation:

Name of Employer: ~~Eric G Paulson LLC~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/11/2026~~

Aggregate Contributions: ~~$50.00~~

Amount of Contribution: ~~$25.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Fagerstal~~ | ~~Christina~~ | | ~~2308~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~289 Weed St~~ | ~~New Canaan~~ | ~~CT~~ | ~~06840~~ |

Principal Occupation:

Name of Employer: ~~CT~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/11/2026~~

Aggregate Contributions: ~~$100.00~~

Amount of Contribution: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Kohler~~ | ~~Cheryl~~ | | ~~2309~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~105 Fiddler Green Rd Unit~~ | ~~Stratford~~ | ~~CT~~ | ~~06614~~ |

Principal Occupation:

Name of Employer: ~~CT~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/11/2026~~

Aggregate Contributions: ~~$20.00~~

Amount of Contribution: ~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~cohen~~ | ~~debra~~ | | ~~2310~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~73 Church St~~ | ~~Wethersfield~~ | ~~CT~~ | ~~06109~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/11/2026~~

Aggregate Contributions: ~~$205.00~~

Amount of Contribution: ~~$100.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Kruger~~ | ~~Margaret~~ | | ~~2311~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~220 Westledge Dr~~ | ~~Torrington~~ | ~~CT~~ | ~~06790~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/11/2026~~ | ~~$10.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Coleman~~ | ~~Alyce~~ | | ~~2312~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~2459 Whitney Ave .~~ | ~~Hamden~~ | ~~CT~~ | |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~HomeServe~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/11/2026~~ | ~~$10.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Gianini~~ | ~~Donna~~ | | ~~2313~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~5 Butternut Cir~~ | ~~Avon~~ | ~~CT~~ | ~~06001~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/11/2026~~ | ~~$50.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Elliott~~ | ~~William~~ | | ~~2314~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~116 Battis Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06514~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Delta Air Lines~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/11/2026~~ | ~~$70.00~~ |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Zetye~~ | ~~Philip~~ | | ~~2315~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~983 Rainbow Trl~~ | ~~Orange~~ | ~~CT~~ | ~~06477~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~NA~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/11/2026~~

Aggregate Contributions: ~~$15.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Smith~~ | ~~Stephen~~ | | ~~2316~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~70 Karen Dr~~ | ~~Manchester~~ | ~~CT~~ | ~~06042~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Pratt and Whitney~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/11/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Schomaker~~ | ~~Kathleen~~ | | ~~2317~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~37 Hepburn Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/11/2026~~

Aggregate Contributions: ~~$75.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Budai** | **Jennifer** | | **2302** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **173 Woodcrest Ave** | **Stratford** | **CT** | **06614** |

| Principal Occupation | Name of Employer |
|---|---|
| **Unemployed** | **Unemployed** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/12/2026**

Aggregate Contributions: **$20.00**

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Heimer** | **Robert** | | **2300** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **56 Cold Spring St** | **New Haven** | **CT** | **06511** |

| Principal Occupation | Name of Employer |
|---|---|
| **Professor** | **Yale University** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/12/2026**

Aggregate Contributions: **$200.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Katz** | **Elin** | | **2301** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **12 Forest Hills Ln** | **West Hartford** | **CT** | **06117** |

| Principal Occupation | Name of Employer |
|---|---|
| **Consultant** | **Blue Swan Energy Steategies, LLC** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/12/2026**

Aggregate Contributions: **$60.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Caro~~ | ~~Jen~~ | | ~~2284~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~169 Russo Dr~~ | ~~Hamden~~ | ~~CT~~ | ~~06518~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~State of CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/12/2026~~

Aggregate Contributions: ~~$87.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Johnson~~ | ~~Michael~~ | | ~~2285~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~66 Eastford Rd Apt 1~~ | ~~Eastford~~ | ~~CT~~ | ~~06242~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/12/2026~~

Aggregate Contributions: ~~$50.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Duchesneau~~ | ~~Wilfred~~ | | ~~2286~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~200 West Rd~~ | ~~Ellington~~ | ~~CT~~ | ~~06029~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/12/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Ramos | Juan | | 2287 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 29 Kathleen Dr | Willimantic | CT | 06226 |

Principal Occupation:

Name of Employer: Retired

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/12/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Poulos | Charles | | 2288 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 29 Doubleday Rd | Columbia | CT | 06237 |

Principal Occupation: Retired

Name of Employer: Retired

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☒ Yes ☐ No

If yes, list Event #: 02082026E

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/12/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Vono~~ | ~~Angelina~~ | | ~~2289~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~21 N Maple St .~~ | ~~Enfield~~ | ~~CT~~ | ~~06082~~ |

Principal Occupation:

Name of Employer: ~~Bath & Body Works~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/12/2026~~

Aggregate Contributions: ~~$20.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Greene~~ | ~~Nicholas~~ | | ~~2290~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~13 Spruce Dr .~~ | ~~Prospect~~ | ~~CT~~ | ~~06712~~ |

Principal Occupation:

Name of Employer: ~~The Brooke Team at eXp Realty~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$20.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/12/2026~~

Aggregate Contributions: ~~$40.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Lance~~ | ~~Katie~~ | | ~~2291~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~468 Trout Brook Dr~~ | ~~West Hartford~~ | ~~CT~~ | ~~06110~~ |

Principal Occupation:

Name of Employer: ~~Unemployed~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/12/2026~~

Aggregate Contributions: ~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~McGrath~~ | ~~Holly~~ | | ~~2292~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~2 Old Barge Rd~~ | ~~Simsbury~~ | ~~CT~~ | ~~06070~~ |

Principal Occupation:

Name of Employer: ~~Homemaker~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/12/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Guillet~~ | ~~Nicole~~ | | ~~2293~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1 Freestone Ave~~ | ~~Cromwell~~ | ~~CT~~ | ~~06416~~ |

Principal Occupation:

Name of Employer: ~~Newington board of education~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$20.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/12/2026~~

Aggregate Contributions: ~~$55.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Carey~~ | ~~Marijane~~ | | ~~2294~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~26 Lincoln St~~ | ~~Hamden~~ | ~~CT~~ | ~~06518~~ |

Principal Occupation:

Name of Employer: ~~Marijane Carey~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/12/2026~~

Aggregate Contributions: ~~$300.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Wade~~ | ~~Donna~~ | | ~~2295~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~241 Hogan Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06518~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/12/2026~~

Aggregate Contributions: ~~$250.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Cooney~~ | ~~Suzanne~~ | | ~~2296~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~35 Filbert St~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/12/2026~~

Aggregate Contributions: ~~$327.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Henry~~ | ~~Francis E~~ | | ~~2297~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~26 Hemlock St~~ | ~~Bridgeport~~ | ~~CT~~ | ~~06605~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$27.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/12/2026~~

Aggregate Contributions: ~~$131.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Martin~~ | ~~Lori~~ | | ~~2298~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~24 Sherland Ave~~ | ~~New Haven~~ | ~~CT~~ | ~~06513~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Haven,Äôs Harvest~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/12/2026~~

Aggregate Contributions: ~~$150.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~KINSLOE BYERS~~ | ~~SUSI~~ | | ~~2299~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~35 Nedwied~~ | ~~Tolland~~ | ~~CT~~ | ~~06084~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$15.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/12/2026~~

Aggregate Contributions: ~~$40.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Heimer~~ | ~~Robert & Nov´l~~ | | ~~2300~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~56 Cold Spring St~~ | ~~New Haven~~ | ~~CT~~ | ~~06511~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Yale University~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/12/2026~~

Aggregate Contributions: ~~$300.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Katz~~ | ~~Elin~~ | | ~~2301~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~12 Forest Hills Ln~~ | ~~West Hartford~~ | ~~CT~~ | ~~06117~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Consultant~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/12/2026~~

Aggregate Contributions: ~~$85.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Budai~~ | ~~Jen~~ | | ~~2302~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~173 Woodcrest Ave~~ | ~~Stratford~~ | ~~CT~~ | ~~06614~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~N/A~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/12/2026~~ | ~~$25.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~McDougal~~ | ~~Robert~~ | | ~~2303~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~6 Everit St~~ | ~~New Haven~~ | ~~CT~~ | ~~06511~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Yale~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/12/2026~~ | ~~$100.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~McLeer~~ | ~~Jennifer~~ | | ~~2304~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~15 Centerfield St~~ | ~~Manchester~~ | ~~CT~~ | ~~06042~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~University of Hartford~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$49.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/12/2026~~ | ~~$98.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Caro** | **Jen** | | **2284** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **169 Russo Dr** | **Hamden** | **CT** | **06518** |

| Principal Occupation | Name of Employer |
|---|---|
| **Land Surveyor** | **State of CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| **02/12/2026** | **$62.00** |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Johnson** | **Michael** | | **2285** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **66 Eastford Rd Apt 1** | **Eastford** | **CT** | **06242** |

| Principal Occupation | Name of Employer |
|---|---|
| **retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **02/12/2026** | **$25.00** | **$25.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Duchesneau** | **Wilfred** | | **2286** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **200 West Rd** | **Ellington** | **CT** | **06029** |

| Principal Occupation | Name of Employer |
|---|---|
| **retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **02/12/2026** | **$25.00** | **$25.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Vono** | **Angelina** | | **2289** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **21 N Maple St .** | **Enfield** | **CT** | **06082** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retail Manager** | **Bath & Body Works** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **02/12/2026** | **$10.00** | **$10.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Greene** | **Nicholas** | | **2290** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **13 Spruce Dr .** | **Prospect** | **CT** | **06712** |

| Principal Occupation | Name of Employer |
|---|---|
| **Realtor** | **The Brooke Team at eXp Realty** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **02/12/2026** | **$20.00** | **$20.00** |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Lance | Katie | | 2291 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 468 Trout Brook Dr | West Hartford | CT | 06110 |

| Principal Occupation | Name of Employer |
|---|---|
| Unemployed | Unemployed |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/12/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McGrath | Holly | | 2292 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 2 Old Barge Rd | Simsbury | CT | 06070 |

| Principal Occupation | Name of Employer |
|---|---|
| Homemaker | Homemaker |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/12/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Guillet | Nicole | | 2293 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1 Freestone Ave | Cromwell | CT | 06416 |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | Newington board of education |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/12/2026

Aggregate Contributions: $35.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Carey~~ | ~~Marijane~~ | | ~~2294~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~26 Lincoln St~~ | ~~Hamden~~ | ~~CT~~ | ~~06518~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Self Employed~~ | ~~Marijane Carey~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/12/2026~~

Aggregate Contributions: ~~$200.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Wade | Donna | | 2295 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 241 Hogan Rd | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/12/2026

Aggregate Contributions: $175.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cooney | Suzanne | | 2296 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 35 Filbert St | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/12/2026

Aggregate Contributions: $302.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Henry | Francis E | | 2297 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 26 Hemlock St | Bridgeport | CT | 06605 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $27.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/12/2026

Aggregate Contributions: $79.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Martin | Lori | | 2298 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 24 Sherland Ave | New Haven | CT | 06513 |

| Principal Occupation | Name of Employer |
|---|---|
| Executive Director | Haven,Äôs Harvest |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/12/2026

Aggregate Contributions: $125.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| KINSLOE-BYERS | SUSI | | 2299 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 35 Nedwied | Tolland | CT | 06084 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $15.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/12/2026

Aggregate Contributions: $25.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Heimer~~ | ~~Robert & Nov´l~~ | | ~~2300~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~56 Cold Spring St~~ | ~~New Haven~~ | ~~CT~~ | ~~06511~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Professor~~ | ~~Yale University~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/12/2026~~

Aggregate Contributions: ~~$200.00~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Katz~~ | ~~Elin~~ | | ~~2301~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~12 Forest Hills Ln~~ | ~~West Hartford~~ | ~~CT~~ | ~~06117~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Consultant~~ | ~~Consultant~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/12/2026~~

Aggregate Contributions: ~~$60.00~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Budai~~ | ~~Jen~~ | | ~~2302~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~173 Woodcrest Ave~~ | ~~Stratford~~ | ~~CT~~ | ~~06614~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Unemployed~~ | ~~N/A~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/12/2026~~

Aggregate Contributions: ~~$20.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McDougal | Robert | | 2303 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 6 Everit St | New Haven | CT | 06511 |

| Principal Occupation | Name of Employer |
|---|---|
| Professor | Yale |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/12/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McLeer | Jennifer | | 2304 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 15 Centerfield St | Manchester | CT | 06042 |

| Principal Occupation | Name of Employer |
|---|---|
| Professor | University of Hartford |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $49.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/12/2026

Aggregate Contributions: $49.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Carey | Marijane | | 2294 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 26 Lincoln St | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| Maternal and Child Health Consultant | Carey Consulting |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/12/2026

Aggregate Contributions: $200.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Maher | Anaka | | 2271 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 112 Grennan Rd | West Hartford | CT | 06107 |

| Principal Occupation | Name of Employer |
|---|---|
| Engineer | Capitol Region Council of Governments |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/13/2026

Aggregate Contributions: $150.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| schultz | emma | | 2283 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 64 W Main St | Stafford Springs | CT | 06076 |

| Principal Occupation | Name of Employer |
|---|---|
| package handler | Fedex Ground |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/13/2026

Aggregate Contributions: $10.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Webb | Heather | | 2273 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 487 Bassetts Bridge Rd | Mansfield Center | CT | 06250 |

| Principal Occupation | Name of Employer |
|---|---|
| Author | Heather Webb |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/13/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Monahan | Michael | | 2279 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 24 Greenwood Ave | Stamford | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Director | Altus Power |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $200.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/13/2026

Aggregate Contributions: $400.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Anwar | Taseen | | 2281 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 93 Rockledge Dr | South Windsor | CT | 06074 |

| Principal Occupation | Name of Employer |
|---|---|
| | Student |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/13/2026

Aggregate Contributions: $5.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Ryus** | **Caitlin** | | **2267** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **31 Brookwood Dr** | **Woodbridge** | **CT** | **06525** |

| Principal Occupation | Name of Employer |
|---|---|
| **Physician** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **02/13/2026** | **$340.00** | **$190.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Wirt** | **Martin** | | **2268** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **26 Emerson St** | **Norwalk** | **CT** | **06855** |

| Principal Occupation | Name of Employer |
|---|---|
| **Teacher** | **Rown od** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **02/13/2026** | **$340.00** | **$340.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Corzo** | **Richard** | | **2269** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **55 Mill Plain Rd** | **Danbury** | **CT** | **06811** |

| Principal Occupation | Name of Employer |
|---|---|
| **Computer Programmer** | **Western Connecticut State University** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **02/13/2026** | **$25.00** | **$25.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Giangrave** | **Paul** | | **2270** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **718 Church St .** | **Newington** | **CT** | |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **02/13/2026** | **$5.00** | **$5.00** |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Maher~~ | ~~Anaka~~ | | ~~2271~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~112 Grennan Rd~~ | ~~West Hartford~~ | ~~CT~~ | ~~06107~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Engineer~~ | ~~Capitol Region Council of Governments~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/13/2026~~

Aggregate Contributions: ~~$150.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| BARNES | DAWN | | 2272 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 177 Beach 129 St | Belle Harbor | NY | 11694 |

| Principal Occupation | Name of Employer |
|---|---|
| Trucking | NY |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $300.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/13/2026

Aggregate Contributions: $300.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~webb~~ | ~~heather~~ | | ~~2273~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~487 Bassetts Bridge Rd~~ | ~~Mansfield Center~~ | ~~CT~~ | ~~06250~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Author~~ | ~~Self~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/13/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Keitt | Sarah | | 2274 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 538 Winnepoge Dr | Fairfield | CT | 06825 |

| Principal Occupation | Name of Employer |
|---|---|
| State Representative | State of CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/13/2026

Aggregate Contributions: $250.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Seavy | Charmaine | | 2275 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 18 Quarry Rd | Simsbury | CT | 06070 |

| Principal Occupation | Name of Employer |
|---|---|
| Avertising | CV MEDIA, INC. |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/13/2026

Aggregate Contributions: $225.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Rabon | Pierce | | 2276 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1476 Chicago Blvd | Detroit | MI | 48206 |

| Principal Occupation | Name of Employer |
|---|---|
| Systems Configutor | General Motors |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $290.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/13/2026

Aggregate Contributions: $340.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Darasz | Wendy | | 2277 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 781 South Rd | Harwinton | CT | 06791 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/13/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Loomis-Davern | Lisa | | 2278 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 88 Crystal Lake Rd | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | Hartford Public Schools |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/13/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Monahan~~ | ~~Michael~~ | | ~~2279~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~24 Greenwood Ave~~ | ~~Stamford~~ | ~~CT~~ | |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Auditor~~ | ~~Connecticut~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$200.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/13/2026~~

Aggregate Contributions: ~~$400.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Ryden | Barbara | | 2280 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 88 Notch Hill Rd | North Branford | CT | 06471 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/13/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Damio | Grace | | 2282 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 3 Woods Rd | Mansfield Center | CT | 06250 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☒ Yes ☐ No

If yes, list Event # 12142025D

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/13/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~schultz~~ | ~~emma~~ | | ~~2283~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~64 W Main St~~ | ~~Stafford Springs~~ | ~~CT~~ | ~~06076~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~n/a~~ | ~~n/a~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/13/2026~~

Aggregate Contributions: ~~$10.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Ryus~~ | ~~Caitlin~~ | | ~~2267~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~31 Brookwood Dr~~ | ~~Woodbridge~~ | ~~CT~~ | ~~06525~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$190.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/13/2026~~

Aggregate Contributions: ~~$530.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Wirt~~ | ~~Martin~~ | | ~~2268~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~26 Emerson St~~ | ~~Norwalk~~ | ~~CT~~ | ~~06855~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Rown od~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$340.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/13/2026~~

Aggregate Contributions: ~~$680.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Corzo~~ | ~~Richard~~ | | ~~2269~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~55 Mill Plain Rd~~ | ~~Danbury~~ | ~~CT~~ | ~~06811~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Western Connecticut State University~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/13/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Giangrave~~ | ~~Paul~~ | | ~~2270~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~718 Church St .~~ | ~~Newington~~ | ~~CT~~ | |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/13/2026~~

Aggregate Contributions: ~~$10.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Maher~~ | ~~Anaka~~ | | ~~2271~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~112 Grennan Rd~~ | ~~West Hartford~~ | ~~CT~~ | ~~06107~~ |

Principal Occupation:

Name of Employer: ~~Capitol Region Council of Governments~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/13/2026~~

Aggregate Contributions: ~~$225.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~BARNES~~ | ~~DAWN~~ | | ~~2272~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~177 Beach 129 St~~ | ~~Belle Harbor~~ | ~~NY~~ | ~~11694~~ |

Principal Occupation:

Name of Employer: ~~NY~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$300.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/13/2026~~

Aggregate Contributions: ~~$600.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~webb~~ | ~~heather~~ | | ~~2273~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~487 Bassetts Bridge Rd~~ | ~~Mansfield Center~~ | ~~CT~~ | ~~06250~~ |

Principal Occupation:

Name of Employer: ~~Self~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/13/2026~~

Aggregate Contributions: ~~$75.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Keitt~~ | ~~Sarah~~ | | ~~2274~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~538 Winnepoge Dr~~ | ~~Fairfield~~ | ~~CT~~ | ~~06825~~ |

Principal Occupation:

Name of Employer: ~~State of CT~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/13/2026~~

Aggregate Contributions: ~~$350.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Seavy~~ | ~~Charmaine~~ | | ~~2275~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~18 Quarry Rd~~ | ~~Simsbury~~ | ~~CT~~ | ~~06070~~ |

Principal Occupation:

Name of Employer: ~~CV MEDIA, INC.~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/13/2026~~

Aggregate Contributions: ~~$275.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Rabon~~ | ~~Pierce~~ | | ~~2276~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1476 Chicago Blvd~~ | ~~Detroit~~ | ~~MI~~ | ~~48206~~ |

Principal Occupation:

Name of Employer: ~~General Motors~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$290.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/13/2026~~

Aggregate Contributions: ~~$630.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Darasz~~ | ~~Wendy~~ | | ~~2277~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~781 South Rd~~ | ~~Harwinton~~ | ~~CT~~ | ~~06791~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/13/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Loomis-Davern~~ | ~~Lisa~~ | | ~~2278~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~88 Crystal Lake Rd~~ | ~~Middletown~~ | ~~CT~~ | ~~06457~~ |

Principal Occupation:

Name of Employer: ~~Hartford Public Schools~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/13/2026~~

Aggregate Contributions: ~~$50.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Monahan~~ | ~~Michael~~ | | ~~2279~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~24 Greenwood Ave~~ | ~~Stamford~~ | ~~CT~~ | |

Principal Occupation:

Name of Employer: ~~Connecticut~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$200.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/13/2026~~

Aggregate Contributions: ~~$600.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Ryden~~ | ~~Barbara~~ | | ~~2280~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~88 Notch Hill Rd~~ | ~~North Branford~~ | ~~CT~~ | ~~06471~~ |

Principal Occupation:

Name of Employer: ~~retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/13/2026~~

Aggregate Contributions: ~~$200.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Anwar~~ | ~~Taseen~~ | | ~~2281~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~93 Rockledge Dr~~ | ~~South Windsor~~ | ~~CT~~ | ~~06074~~ |

Principal Occupation:

Name of Employer: ~~Student~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/13/2026~~

Aggregate Contributions: ~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Damio~~ | ~~Grace~~ | | ~~2282~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~3 Woods Rd~~ | ~~Mansfield Center~~ | ~~CT~~ | ~~06250~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☒ Yes ☐ No

If yes, list Event #: ~~12142025D~~

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/13/2026~~

Aggregate Contributions: ~~$150.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~schultz~~ | ~~emma~~ | | ~~2283~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~64 W Main St~~ | ~~Stafford Springs~~ | ~~CT~~ | ~~06076~~ |

Principal Occupation:

Name of Employer: ~~n/a~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/13/2026~~

Aggregate Contributions: ~~$15.00~~

~~$5.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Johnson** | **Loren** | | **2260** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **580 Pudding Hill Rd** | **Hampton** | **CT** | **06247-1502** |

Principal Occupation: **Retired**

Name of Employer: **Retired**

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/14/2026**

Aggregate Contributions: **$150.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Kiely~~ | ~~Kathleen~~ | | ~~2259~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~69 Augur St~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

Principal Occupation:

Name of Employer: ~~Hamden Public Schools~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/14/2026~~

Aggregate Contributions: ~~$150.00~~

~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Johnson~~ | ~~Loren~~ | | ~~2260~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~317 S Main St~~ | ~~Putnam~~ | ~~CT~~ | ~~06247~~ |

Principal Occupation:

Name of Employer: ~~CT~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/14/2026~~

Aggregate Contributions: ~~$225.00~~

~~$75.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Siegel-Miles~~ | ~~Alyssa~~ | | ~~2261~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~712 Colonel Ledyard Hwy~~ | ~~Ledyard~~ | ~~CT~~ | ~~06339~~ |

Principal Occupation:

Name of Employer: ~~University of Connecticut~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/14/2026~~

Aggregate Contributions: ~~$115.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~falk~~ | ~~harris~~ | | ~~2262~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~14 Overlook Rd~~ | ~~Westport~~ | ~~CT~~ | ~~06880~~ |

Principal Occupation:

Name of Employer: ~~Harris Falk~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$200.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/14/2026~~

Aggregate Contributions: ~~$400.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Bowens~~ | ~~Tracy~~ | | ~~2263~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~152 Country Hills Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06514~~ |

Principal Occupation:

Name of Employer: ~~Unilever~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/14/2026~~

Aggregate Contributions: ~~$350.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Zuidema~~ | ~~Lee~~ | | ~~2264~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~31 Woodland St .~~ | ~~Hartford~~ | ~~CT~~ | ~~06105~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/14/2026~~

Aggregate Contributions: ~~$150.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Broderick | Thomas | | 2265 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 20 Woolsley Ave | Trumbull | CT | 06611 |

| Principal Occupation | Name of Employer |
|---|---|
| Educator | Ridgefield Public Schools |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☒ Yes ☐ No

If yes, list Event # 02152026F

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/14/2026

Aggregate Contributions: $150.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Harris-Stone~~ | ~~Jae~~ | | ~~2266~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~26 Lido Rd~~ | ~~Unionville~~ | ~~CT~~ | ~~06085~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~swlf employed~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/14/2026~~

Aggregate Contributions: ~~$50.00~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Kiely** | **Kathleen** | | **2259** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **69 Augur St** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Teacher** | **Hamden Public Schools** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/14/2026**

Aggregate Contributions: **$100.00**

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~**Johnson**~~ | ~~**Loren**~~ | | ~~**2260**~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~**317 S Main St**~~ | ~~**Putnam**~~ | ~~**CT**~~ | ~~**06247**~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~**n/a**~~ | ~~**CT**~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~**$75.00**~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~**02/14/2026**~~

Aggregate Contributions: ~~**$150.00**~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Siegel-Miles** | **Alyssa** | | **2261** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **712 Colonel Ledyard Hwy** | **Ledyard** | **CT** | **06339** |

| Principal Occupation | Name of Employer |
|---|---|
| **Program Aide** | **University of Connecticut** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **02/14/2026** | **$90.00** | **$25.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **falk** | **harris** | | **2262** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **14 Overlook Rd** | **Westport** | **CT** | **06880** |

| Principal Occupation | Name of Employer |
|---|---|
| **Consultant** | **Harris Falk** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **02/14/2026** | **$200.00** | **$200.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Bowens** | **Tracy** | | **2263** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **152 Country Hills Rd** | **Hamden** | **CT** | **06514** |

| Principal Occupation | Name of Employer |
|---|---|
| **Consultant** | **Unilever** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **02/14/2026** | **$250.00** | **$100.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Zuidema** | **Lee** | | **2264** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **31 Woodland St .** | **Hartford** | **CT** | **06105** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **02/14/2026** | **$75.00** | **$75.00** |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Harris-Stone** | **Jac** | | **2266** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **26 Lido Rd** | **Unionville** | **CT** | **06085** |

| Principal Occupation | Name of Employer |
|---|---|
| **Musician** | **swlf employed** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/14/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Larkin** | **Judith** | **E** | **2253** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **9 Jay Ct** | **Avon** | **CT** | **06001** |

| Principal Occupation | Name of Employer |
|---|---|
| **retired** | **retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/15/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Wood** | **Sarah** | | **2242** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **198 Gulf St .** | **Milford** | **CT** | **06460** |

| Principal Occupation | Name of Employer |
|---|---|
| **social media strategist** | **Relevate Strategies LLC** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/15/2026**

Aggregate Contributions: **$150.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Reynolds** | **Michelle** | | **2234** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **319 Auburn Rd** | **West Hartford** | **CT** | **06119** |

| Principal Occupation | Name of Employer |
|---|---|
| **Homemaker** | **Homemaker** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/15/2026**

Aggregate Contributions: **$50.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Darer~~ | ~~Sarah~~ | | ~~2238~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~15 Rock Rd~~ | ~~Milford~~ | ~~CT~~ | ~~06460~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~writer~~ | ~~self-employed (d/b/a Sarah Darer Littman), State o~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☒ Yes ☐ No

If yes, list Event # ~~02152026G~~

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/15/2026~~

Aggregate Contributions: ~~$150.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Wood~~ | ~~Sarah~~ | | ~~2242~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~198 Gulf St .~~ | ~~Milford~~ | ~~CT~~ | ~~06460~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~social media strategist~~ | ~~Self-employed~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/15/2026~~

Aggregate Contributions: ~~$150.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Barrett | Bruce | | 2244 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 47 Point Beach Dr | Milford | CT | 06460 |

| Principal Occupation | Name of Employer |
|---|---|
| CFO | Barrett Outdoor Communications |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $340.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/15/2026

Aggregate Contributions: $340.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Gadkar-Wilcox | Sujata | | 2246 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 36 Overlook Pl | Trumbull | CT | 06611 |

| Principal Occupation | Name of Employer |
|---|---|
| Faculty. State Rep | Quinnipiac. State of Connecticut. |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $200.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/15/2026

Aggregate Contributions: $200.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Templeton** | **Barbara** | | **2247** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **7 Hill Rd .** | **Redding** | **CT** | **06896** |

| Principal Occupation | Name of Employer |
|---|---|
| **therapist** | **Barbara Templeton LMFT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$20.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/15/2026**

Aggregate Contributions: **$20.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Eagle** | **Zachary** | | **2248** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **8 Johnson Rd** | **Charleston** | **SC** | **29407** |

| Principal Occupation | Name of Employer |
|---|---|
| **healthcare practice manager** | **NOBA Services, LLC** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$13.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/15/2026**

Aggregate Contributions: **$13.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Kaye** | **Beverly Sue** | | **2249** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **15 Lorraine Dr .** | **Woodbridge** | **CT** | **06525** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired. Closed my business in 2021** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/15/2026**

Aggregate Contributions: **$10.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Cook** | **Jessica** | | **2250** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **967 Asylum Ave** | **Hartford** | **CT** | **06105** |

| Principal Occupation | Name of Employer |
|---|---|
| **Educator** | **CREC** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/15/2026**

Aggregate Contributions: **$5.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Klein** | **Linda** | | **2251** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **107 Autumn St** | **New Haven** | **CT** | **06511** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **02/15/2026** | **$25.00** | **$25.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Ruzzo** | **Adam** | | **2252** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **216 Woodland St** | **Manchester** | **CT** | **06042** |

| Principal Occupation | Name of Employer |
|---|---|
| **Sales Manager** | **Connecticut** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **02/15/2026** | **$25.00** | **$25.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~**larkin**~~ | ~~**judy**~~ | | ~~**2253**~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~**9 Jay Ct**~~ | ~~**Avon**~~ | ~~**CT**~~ | ~~**06001**~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~**retired**~~ | ~~**retired**~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| ~~**02/15/2026**~~ | ~~**$50.00**~~ | ~~**$25.00**~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Krauss** | **Pamela** | | **2254** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **2 Cove Rd** | **Brookfield** | **CT** | **06804** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **02/15/2026** | **$150.00** | **$150.00** |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Wilkinson** | **Karen** | | **2255** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **69 Lake Ridge Dr** | **Marlborough** | **CT** | **06447** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/15/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Salsich** | **James** | | **2256** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **43 Herrick Rd** | **Brooklyn** | **CT** | **06234** |

| Principal Occupation | Name of Employer |
|---|---|
| **Teacher** | **Eastford Elementary School** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/15/2026**

Aggregate Contributions: **$75.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Vanacore** | **Jade** | | **2257** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **87 Country Club Rd** | **Avon** | **CT** | **06001** |

| Principal Occupation | Name of Employer |
|---|---|
| **Physician Assistant** | **Trinity Health of New England** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/15/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Sarna Fennelly** | **Camille** | | **2258** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **31 Parker Dr** | **East Lyme** | **CT** | **06333** |

| Principal Occupation | Name of Employer |
|---|---|
| **Special Ed Teacher** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/15/2026**

Aggregate Contributions: **$5.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Reynolds~~ | ~~Michelle~~ | | ~~2234~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~319 Auburn Rd~~ | ~~West Hartford~~ | ~~CT~~ | ~~06119~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Homemaker~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/15/2026~~

Aggregate Contributions: ~~$100.00~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Nicolari | Patty | | 2235 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 56 Harbour Close | New Haven | CT | 06519 |

| Principal Occupation | Name of Employer |
|---|---|
| Executive Director | Education |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☒ Yes ☐ No

If yes, list Event # 02152026G

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/15/2026

Aggregate Contributions: $100.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Silva | Paul | | 2236 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 111 Lexington Way N | Milford | CT | 06461 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $340.00

Is this contribution associated with an event reported in Section J1? ☒ Yes ☐ No

If yes, list Event # 02152026G

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/15/2026

Aggregate Contributions: $340.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McNamee | Julia | | 2237 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 256 Booth Hill Rd | Trumbull | CT | 06611 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☒ Yes ☐ No

If yes, list Event # 02152026F

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/15/2026

Aggregate Contributions: $100.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Darer~~ | ~~Sarah~~ | | ~~2238~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~15 Rock Rd~~ | ~~Milford~~ | ~~CT~~ | ~~06460~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~writer~~ | ~~self-employed (d/b/a Sarah Darer Littman), State o~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☒ Yes ☐ No

If yes, list Event # ~~02152026G~~

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/15/2026~~

Aggregate Contributions: ~~$225.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Barrett | Nina | | 2239 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 32 Hawley Ave | Milford | CT | 06460 |

| Principal Occupation | Name of Employer |
|---|---|
| homemaker | Unemployed |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $340.00

Is this contribution associated with an event reported in Section J1? ☒ Yes ☐ No

If yes, list Event # 02152026G

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/15/2026

Aggregate Contributions: $340.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| LoMonaco | Martha | | 2240 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 37 Hilldale Ct | Milford | CT | 06460 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☒ Yes ☐ No

If yes, list Event # 02152026G

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/15/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Mackintosh | Barbara | | 2241 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 12 Sandpiper Cres | Milford | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☒ Yes ☐ No

If yes, list Event # 02152026G

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/15/2026

Aggregate Contributions: $150.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Wood~~ | ~~Sarah~~ | | ~~2242~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~198 Gulf St .~~ | ~~Milford~~ | ~~CT~~ | ~~06460~~ |

Principal Occupation:

Name of Employer: ~~Self employed~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/15/2026~~

Aggregate Contributions: ~~$225.00~~

~~$75.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Watson | Tobias | | 2243 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 65 Elmsford Rd | Bridgeport | CT | 06606 |

Principal Occupation: Retired

Name of Employer: Retired

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☒ Yes ☐ No

If yes, list Event # 02152026F

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/15/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Barrett~~ | ~~Bruce~~ | | ~~2244~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~47 Point Beach Dr~~ | ~~Milford~~ | ~~CT~~ | ~~06460~~ |

Principal Occupation:

Name of Employer: ~~Barrett Outdoor Communications~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/15/2026~~

Aggregate Contributions: ~~$680.00~~

~~$340.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Dunn | Matthew | | 2245 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 25 Bonnie View Dr | Trumbull | CT | 06611 |

Principal Occupation: software engineer

Name of Employer: Synchrony Financial

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☒ Yes ☐ No

If yes, list Event # 02152026F

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/15/2026

Aggregate Contributions: $5.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Gadkar-Wilcox~~ | ~~Sujata~~ | | ~~2246~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~36 Overlook Pl~~ | ~~Trumbull~~ | ~~CT~~ | ~~06611~~ |

Principal Occupation:

Name of Employer: ~~Quinnipiac. State of Connecticut.~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$200.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/15/2026~~

Aggregate Contributions: ~~$400.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Templeton~~ | ~~Barbara~~ | | ~~2247~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~7 Hill Rd .~~ | ~~Redding~~ | ~~CT~~ | ~~06896~~ |

Principal Occupation:

Name of Employer: ~~Barbara Templeton LMFT~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$20.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/15/2026~~

Aggregate Contributions: ~~$40.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Eagle~~ | ~~Zachary~~ | | ~~2248~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~8 Johnson Rd~~ | ~~Charleston~~ | ~~SC~~ | ~~29407~~ |

Principal Occupation:

Name of Employer: ~~NOBA Services, LLC~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$13.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/15/2026~~

Aggregate Contributions: ~~$26.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Kaye~~ | ~~Beverly Sue~~ | | ~~2249~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~15 Lorraine Dr .~~ | ~~Woodbridge~~ | ~~CT~~ | ~~06525~~ |

Principal Occupation:

Name of Employer: ~~Retired. Closed my business in 2021~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/15/2026~~

Aggregate Contributions: ~~$20.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Cook~~ | ~~Jessica~~ | | ~~2250~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~967 Asylum Ave~~ | ~~Hartford~~ | ~~CT~~ | ~~06105~~ |

Principal Occupation:

Name of Employer: ~~CREC~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/15/2026~~

Aggregate Contributions: ~~$10.00~~

~~$5.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Klein~~ | ~~Linda~~ | | ~~2251~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~107 Autumn St~~ | ~~New Haven~~ | ~~CT~~ | ~~06511~~ |

Principal Occupation:

Name of Employer: ~~retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/15/2026~~

Aggregate Contributions: ~~$50.00~~

~~$25.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Ruzzo~~ | ~~Adam~~ | | ~~2252~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~216 Woodland St~~ | ~~Manchester~~ | ~~CT~~ | ~~06042~~ |

Principal Occupation:

Name of Employer: ~~Connecticut~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/15/2026~~

Aggregate Contributions: ~~$50.00~~

~~$25.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~larkin~~ | ~~judy~~ | | ~~2253~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~9 Jay Ct~~ | ~~Avon~~ | ~~CT~~ | ~~06001~~ |

Principal Occupation:

Name of Employer: ~~retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/15/2026~~

Aggregate Contributions: ~~$75.00~~

~~$25.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Krauss~~ | ~~Pamela~~ | | ~~2254~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~2 Cove Rd~~ | ~~Brookfield~~ | ~~CT~~ | ~~06804~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/15/2026~~

Aggregate Contributions: ~~$300.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Wilkinson~~ | ~~Karen~~ | | ~~2255~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~69 Lake Ridge Dr~~ | ~~Marlborough~~ | ~~CT~~ | ~~06447~~ |

Principal Occupation:

Name of Employer: ~~CT~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/15/2026~~

Aggregate Contributions: ~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Salsich~~ | ~~James~~ | | ~~2256~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~43 Herrick Rd~~ | ~~Brooklyn~~ | ~~CT~~ | ~~06234~~ |

Principal Occupation:

Name of Employer: ~~Eastford Elementary School~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/15/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Vanacore~~ | ~~Jade~~ | | ~~2257~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~87 Country Club Rd~~ | ~~Avon~~ | ~~CT~~ | ~~06001~~ |

Principal Occupation:

Name of Employer: ~~Trinity Health of New England~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/15/2026~~

Aggregate Contributions: ~~$10.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Sarna-Fennelly~~ | ~~Camille~~ | | ~~2258~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~31 Parker Dr~~ | ~~East Lyme~~ | ~~CT~~ | ~~06333~~ |

Principal Occupation:

Name of Employer: ~~CT~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/15/2026~~

Aggregate Contributions: ~~$10.00~~

Amount of Contribution: ~~$5.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Darer** | **Sarah** | | **2238** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **15 Rock Rd** | **Milford** | **CT** | **06460** |

Principal Occupation: **author**

Name of Employer: **Sarah Darer d/b/a Sarah Darer Littman**

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☒ Yes ☐ No

If yes, list Event # **02152026G**

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/15/2026**

Aggregate Contributions: **$150.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Franchini** | **Robert** | | **2222** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **1 Merwin Ave** | **Milford** | **CT** | **06460** |

Principal Occupation: **Retired**

Name of Employer: **Retired**

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$20.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/16/2026**

Aggregate Contributions: **$40.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Harris-Stone** | **Jac** | | **2226** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **26 Lido Rd** | **Unionville** | **CT** | **06085** |

Principal Occupation: **Musician**

Name of Employer: **Jacqueline Harris-Stone**

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/16/2026**

Aggregate Contributions: **$100.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Dykstra~~ | ~~Nicole~~ | | ~~2218~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~221 Park Rd~~ | ~~Oxford~~ | ~~CT~~ | ~~06478~~ |

Principal Occupation:

Name of Employer: ~~State of Connecticut~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/16/2026~~

Aggregate Contributions: ~~$275.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Cadoff~~ | ~~Evan~~ | | ~~2219~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~438 Evergreen Rd~~ | ~~Torrington~~ | ~~CT~~ | ~~06790~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/16/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~levitt~~ | ~~Amanda~~ | | ~~2220~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~30 Swarthmore St~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

Principal Occupation:

Name of Employer: ~~Whole Health Natural Family Medicine~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/16/2026~~

Aggregate Contributions: ~~$400.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Drew~~ | ~~Jill~~ | | ~~2221~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~10 Dakin Rd~~ | ~~Sharon~~ | ~~CT~~ | ~~06069~~ |

Principal Occupation:

Name of Employer: ~~Drew Associates~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$190.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/16/2026~~

Aggregate Contributions: ~~$530.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Franchini~~ | ~~R~~ | | ~~2222~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1 Merwin Ave~~ | ~~Milford~~ | ~~CT~~ | ~~06460~~ |

Principal Occupation:

Name of Employer: ~~N/A~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/16/2026~~

Aggregate Contributions: ~~$60.00~~

~~$20.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Cartier~~ | ~~Angela~~ | | ~~2223~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~15 Pilgrim Dr~~ | ~~Groton~~ | ~~CT~~ | ~~06340~~ |

Principal Occupation:

Name of Employer: ~~Curaleaf~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/16/2026~~

Aggregate Contributions: ~~$10.00~~

~~$5.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Suchy~~ | ~~Rebecca~~ | | ~~2224~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~334 S Main St~~ | ~~Wallingford~~ | ~~CT~~ | ~~06492~~ |

Principal Occupation:

Name of Employer: ~~Regional School District 13~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/16/2026~~

Aggregate Contributions: ~~$50.00~~

~~$25.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Damon~~ | ~~Barbara~~ | | ~~2225~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~130 Fairchild Ave~~ | ~~Fairfield~~ | ~~CT~~ | ~~06825~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/16/2026~~

Aggregate Contributions: ~~$20.00~~

~~$10.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Harris-Stone~~ | ~~Jae~~ | | ~~2226~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~26 Lido Rd~~ | ~~Unionville~~ | ~~CT~~ | ~~06085~~ |

Principal Occupation:

Name of Employer: ~~self~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/16/2026~~

Aggregate Contributions: ~~$125.00~~

~~$25.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Yuabov~~ | ~~Mark~~ | | ~~2227~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~83 Trumpet Brook Rd~~ | ~~Waterbury~~ | ~~CT~~ | ~~06708~~ |

Principal Occupation:

Name of Employer: ~~Masonicare~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/16/2026~~

Aggregate Contributions: ~~$355.00~~

~~$15.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Wilkinson~~ | ~~Marcus~~ | | ~~2228~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~69 Lake Ridge Dr~~ | ~~Marlborough~~ | ~~CT~~ | ~~06447~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/16/2026~~

Aggregate Contributions: ~~$10.00~~

~~$5.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Kane~~ | ~~Peter~~ | | ~~2229~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~22 Dawes Ave~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

Principal Occupation:

Name of Employer: ~~Home~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/16/2026~~

Aggregate Contributions: ~~$375.00~~

~~$150.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Sanchez~~ | ~~Teofilo~~ | | ~~2230~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~109 Pease Rd~~ | ~~Woodbridge~~ | ~~CT~~ | ~~06525~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~No~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/16/2026~~

Aggregate Contributions: ~~$200.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Barrett~~ | ~~John~~ | | ~~2231~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~32 Hawley Ave~~ | ~~Milford~~ | ~~CT~~ | ~~06460~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$340.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/16/2026~~

Aggregate Contributions: ~~$680.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Berube~~ | ~~Marc~~ | | ~~2232~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~531 Highland St~~ | ~~Wethersfield~~ | ~~CT~~ | ~~06109~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$20.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/16/2026~~

Aggregate Contributions: ~~$60.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Zuidema~~ | ~~Trudi~~ | | ~~2233~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~31 Woodland St~~ | ~~Hartford~~ | ~~CT~~ | ~~06105~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/16/2026~~

Aggregate Contributions: ~~$150.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Dykstra | Nicole | | 2218 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 221 Park Rd | Oxford | CT | 06478 |

| Principal Occupation | Name of Employer |
|---|---|
| Research Analyst | State of Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/16/2026

Aggregate Contributions: $175.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cadoff | Evan | | 2219 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 438 Evergreen Rd | Torrington | CT | 06790 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/16/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| levitt | Amanda | | 2220 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 30 Swarthmore St | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Naturopathic physician | Whole Health Natural Family Medicine |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/16/2026

Aggregate Contributions: $300.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Drew | Jill | | 2221 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 10 Dakin Rd | Sharon | CT | 06069 |

| Principal Occupation | Name of Employer |
|---|---|
| Manager | Drew Associates |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $190.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/16/2026

Aggregate Contributions: $340.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Franchini~~ | ~~R~~ | | ~~2222~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1 Merwin Ave~~ | ~~Milford~~ | ~~CT~~ | ~~06460~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~N/A~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$20.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/16/2026~~ | ~~$40.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cartier | Angela | | 2223 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 15 Pilgrim Dr | Groton | CT | 06340 |

| Principal Occupation | Name of Employer |
|---|---|
| Budtender | Curaleaf |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 02/16/2026 | $5.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Suchy | Rebecca | | 2224 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 334 S Main St | Wallingford | CT | 06492 |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | Regional School District 13 |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 02/16/2026 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Damon | Barbara | | 2225 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 130 Fairchild Ave | Fairfield | CT | 06825 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 02/16/2026 | $10.00 |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Harris-Stone~~ | ~~Jac~~ | | ~~2226~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~26 Lido Rd~~ | ~~Unionville~~ | ~~CT~~ | ~~06085~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~self employed~~ | ~~self~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/16/2026~~

Aggregate Contributions: ~~$75.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Yuabov | Mark | | 2227 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 83 Trumpet Brook Rd | Waterbury | CT | 06708 |

| Principal Occupation | Name of Employer |
|---|---|
| Computer Programmer | Masonicare |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $15.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/16/2026

Aggregate Contributions: $340.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Wilkinson | Marcus | | 2228 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 69 Lake Ridge Dr | Marlborough | CT | 06447 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/16/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Kane | Peter | | 2229 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 22 Dawes Ave | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Clinical Social Worker | Home |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/16/2026

Aggregate Contributions: $225.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Sanchez** | **Teofilo** | | **2230** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **109 Pease Rd** | **Woodbridge** | **CT** | **06525** |

| Principal Occupation | Name of Employer |
|---|---|
| **No** | **No** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/16/2026**

Aggregate Contributions: **$175.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Barrett** | **John** | | **2231** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **32 Hawley Ave** | **Milford** | **CT** | **06460** |

| Principal Occupation | Name of Employer |
|---|---|
| **Partner** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$340.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/16/2026**

Aggregate Contributions: **$340.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Berube** | **Marc** | | **2232** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **531 Highland St** | **Wethersfield** | **CT** | **06109** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$20.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/16/2026**

Aggregate Contributions: **$30.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Zuidema** | **Trudi** | | **2233** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **31 Woodland St** | **Hartford** | **CT** | **06105** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/16/2026**

Aggregate Contributions: **$75.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Koleva** | **Radostina** | | **2213** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **25 Fernwood Rd** | **Avon** | **CT** | **06001** |

| Principal Occupation | Name of Employer |
|---|---|
| **Manager** | **Otis** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$150.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/17/2026**

Aggregate Contributions: **$325.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **O'Connor** | **Carol** | | **2199** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **174 Centerbrook Rd** | **Hamden** | **CT** | **06518** |

| Principal Occupation | Name of Employer |
|---|---|
| **Social worker** | **CHDI** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/17/2026**

Aggregate Contributions: **$100.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Rosati** | **Thomas** | | **2214** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **141 Colony St** | **Hamden** | **CT** | **06518** |

| Principal Occupation | Name of Employer |
|---|---|
| **Teacher** | **Cooperative Educational Services** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$20.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/17/2026**

Aggregate Contributions: **$40.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Smith** | **Mary Jane** | | **2208** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **634 W 1820 N** | **Orem** | **UT** | **84057** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/17/2026**

Aggregate Contributions: **$10.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Hall** | **Persephone** | | **2193** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **248 Old Turnpike Rd** | **Southington** | **CT** | **06489** |

| Principal Occupation | Name of Employer |
|---|---|
| **Associate Executive Director** | **Connecticut College** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/17/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Ryan Papacoda** | **Karolyn** | | **2194** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **29 Veranda Ave** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Attoney** | **Self** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/17/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Japely** | **Christine A** | | **2195** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **875 W 181st St** | **New York** | **NY** | **10033** |

| Principal Occupation | Name of Employer |
|---|---|
| **Professor** | **CT State CC - Norwalk** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/17/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Heimer** | **Noel** | | **2196** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **56 Cold Spring St** | **New Haven** | **CT** | **06511** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/17/2026**

Aggregate Contributions: **$100.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Collette~~ | ~~Sara~~ | | ~~2197~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~825 Hollyhock Ln~~ | ~~Orange~~ | ~~CT~~ | ~~06477~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Education Administrator~~ | ~~N/A~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/17/2026~~ | ~~$200.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Moore | Leland | | 2198 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 189 Concord St | New Haven | CT | 06512 |

| Principal Occupation | Name of Employer |
|---|---|
| Attorney | State of CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $40.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 02/17/2026 | $340.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~O'Connor~~ | ~~Carol~~ | | ~~2199~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~174 Centerbrook Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06518~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Social worker~~ | ~~Consultant to CHDI which receives some funding fro~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/17/2026~~ | ~~$100.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| p.romano | ODTC | | 2200 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 107 Sunrise Hill Cir | Orange | CT | 06477 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 02/17/2026 | $100.00 |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cromey | Leigh | | 2201 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 52 Woodbine St | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/17/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Schmidt | Theresa | | 2202 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 62 Pond Cir | Somers | CT | 06071 |

| Principal Occupation | Name of Employer |
|---|---|
| RN | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $200.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/17/2026

Aggregate Contributions: $200.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Meister | Arthur | | 2203 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1035 Southford Rd . | Southbury | CT | 06488 |

| Principal Occupation | Name of Employer |
|---|---|
| Architect | Self employed |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/17/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McGee | John | | 2204 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 41 Zinfandel Cir | Tolland | CT | 06084 |

| Principal Occupation | Name of Employer |
|---|---|
| Consultant | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/17/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Roberts** | **Trevor** | | **2205** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **64 Nollet Rd** | **Mansfield Center** | **CT** | **06250** |

| Principal Occupation | Name of Employer |
|---|---|
| **Para ducator** | **Mansfield public schools** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/17/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Mallone** | **Cat** | | **2206** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **203 Buddington Rd** | **Shelton** | **CT** | **06484** |

| Principal Occupation | Name of Employer |
|---|---|
| **Bartender** | **Oko Restaurant** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/17/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Raftery** | **Linda** | | **2207** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **34 Merwin Brook Rd** | **Brookfield** | **CT** | **06804** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/17/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~**Smith**~~ | ~~**Mary Jane**~~ | | ~~**2208**~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~**634 W 1820 N**~~ | ~~**Orem**~~ | ~~**UT**~~ | ~~**84057**~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~**Retired**~~ | ~~**Retired**~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~**$5.00**~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~**02/17/2026**~~

Aggregate Contributions: ~~**$10.00**~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Dahl | Nancy | | 2209 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 313 Long Mountain Rd | New Milford | CT | 06776 |

| Principal Occupation | Name of Employer |
|---|---|
| Homemaker | Homemaker |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/17/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Larkin | Joyce A | | 2210 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 31 Macarthur Dr | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| No | No |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/17/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Arpin | Cynthia | | 2211 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1 Harris Rd | Moosup | CT | 06354 |

| Principal Occupation | Name of Employer |
|---|---|
| RN | State of CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/17/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Edelson | Ed | | 2212 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 609B Heritage Vlg | Southbury | CT | 06488 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/17/2026

Aggregate Contributions: $50.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Koleva~~ | ~~Radostina~~ | | ~~2213~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~25 Fernwood Rd~~ | ~~Avon~~ | ~~CT~~ | ~~06001~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Manager~~ | ~~Otis~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/17/2026~~ | ~~$325.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Rosati~~ | ~~Tommy~~ | | ~~2214~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~141 Colony St~~ | ~~Hamden~~ | ~~CT~~ | ~~06518~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Teacher~~ | ~~Cooperative Educational Services~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$20.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/17/2026~~ | ~~$40.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Willard | Lynellen | | 2215 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 5212 Town Rdg | Middletown | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Technical Writer | Repligen |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 02/17/2026 | $50.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Zwolinski | Rudd | | 2216 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 68 Pond St | Fairfield | CT | 06825 |

| Principal Occupation | Name of Employer |
|---|---|
| software engineer | Zearn |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 02/17/2026 | $25.00 |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Verrill** | **Anthony** | | **2217** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **34 Oakridge Dr** | **Brooklyn** | **CT** | **06234** |

| Principal Occupation | Name of Employer |
|---|---|
| **retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/17/2026**

Aggregate Contributions: **$75.00**

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Hall~~ | ~~Persephone~~ | | ~~2193~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~248 Old Turnpike Rd~~ | ~~Southington~~ | ~~CT~~ | ~~06489~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Connecticut College~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/17/2026~~

Aggregate Contributions: ~~$50.00~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Ryan Papacoda~~ | ~~Karolyn~~ | | ~~2194~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~29 Veranda Ave~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Self~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/17/2026~~

Aggregate Contributions: ~~$100.00~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Japely~~ | ~~Christine A~~ | | ~~2195~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~875 W 181st St~~ | ~~New York~~ | ~~NY~~ | ~~10033~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CT State CC - Norwalk~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/17/2026~~

Aggregate Contributions: ~~$50.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Heimer~~ | ~~Noel~~ | | ~~2196~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~56 Cold Spring St~~ | ~~New Haven~~ | ~~CT~~ | ~~06511~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/17/2026~~ | ~~$200.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Collette~~ | ~~Sara~~ | | ~~2197~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~825 Hollyhock Ln~~ | ~~Orange~~ | ~~CT~~ | ~~06477~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~N/A~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/17/2026~~ | ~~$300.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Moore~~ | ~~Leland~~ | | ~~2198~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~189 Concord St~~ | ~~New Haven~~ | ~~CT~~ | ~~06512~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~State of CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$40.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/17/2026~~ | ~~$380.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~O,ÄôConnor~~ | ~~Carol~~ | | ~~2199~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~174 Centerbrook Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06518~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Consultant to CHDI which receives some funding fro~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/17/2026~~ | ~~$150.00~~ |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| p.romano | ODTC | | 2200 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 107 Sunrise Hill Cir | Orange | CT | 06477 |

Principal Occupation:

Name of Employer: Retired

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/17/2026

Aggregate Contributions: $200.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cromey | Leigh | | 2201 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 52 Woodbine St | Hamden | CT | 06517 |

Principal Occupation:

Name of Employer: Retired

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/17/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Schmidt | Theresa | | 2202 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 62 Pond Cir | Somers | CT | 06071 |

Principal Occupation:

Name of Employer: retired

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: $200.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/17/2026

Aggregate Contributions: $400.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Meister | Arthur | | 2203 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1035 Southford Rd . | Southbury | CT | 06488 |

Principal Occupation:

Name of Employer: Self employed

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/17/2026

Aggregate Contributions: $10.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~McGee~~ | ~~John~~ | | ~~2204~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~41 Zinfandel Cir~~ | ~~Tolland~~ | ~~CT~~ | ~~06084~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/17/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Roberts~~ | ~~Trevor~~ | | ~~2205~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~64 Nollet Rd~~ | ~~Mansfield Center~~ | ~~CT~~ | ~~06250~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Mansfield public schools~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/17/2026~~

Aggregate Contributions: ~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Mallone~~ | ~~Cat~~ | | ~~2206~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~203 Buddington Rd~~ | ~~Shelton~~ | ~~CT~~ | ~~06484~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Oko Restaurant~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/17/2026~~

Aggregate Contributions: ~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Raftery~~ | ~~Linda~~ | | ~~2207~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~34 Merwin Brook Rd~~ | ~~Brookfield~~ | ~~CT~~ | ~~06804~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/17/2026~~

Aggregate Contributions: ~~$50.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Smith~~ | ~~Mary Jane~~ | | ~~2208~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~634 W 1820 N~~ | ~~Orem~~ | ~~UT~~ | ~~84057~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/17/2026~~ | ~~$15.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Dahl~~ | ~~Nancy~~ | | ~~2209~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~313 Long Mountain Rd~~ | ~~New Milford~~ | ~~CT~~ | ~~06776~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Homemaker~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/17/2026~~ | ~~$10.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Larkin~~ | ~~Joyce A~~ | | ~~2210~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~31 Macarthur Dr~~ | ~~Hamden~~ | ~~CT~~ | ~~06518~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~No~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/17/2026~~ | ~~$50.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Arpin~~ | ~~Cynthia~~ | | ~~2211~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1 Harris Rd~~ | ~~Moosup~~ | ~~CT~~ | ~~06354~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~State of CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/17/2026~~ | ~~$50.00~~ |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Edelson~~ | ~~Ed~~ | | ~~2212~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~609B Heritage Vlg~~ | ~~Southbury~~ | ~~CT~~ | ~~06488~~ |

Principal Occupation:

Name of Employer: ~~retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/17/2026~~

Aggregate Contributions: ~~$100.00~~

~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Koleva~~ | ~~Radostina~~ | | ~~2213~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~25 Fernwood Rd~~ | ~~Avon~~ | ~~CT~~ | ~~06001~~ |

Principal Occupation:

Name of Employer: ~~Otis~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/17/2026~~

Aggregate Contributions: ~~$475.00~~

~~$150.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Rosati~~ | ~~Tommy~~ | | ~~2214~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~141 Colony St~~ | ~~Hamden~~ | ~~CT~~ | ~~06518~~ |

Principal Occupation:

Name of Employer: ~~Cooperative Educational Services~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/17/2026~~

Aggregate Contributions: ~~$60.00~~

~~$20.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Willard~~ | ~~Lynellen~~ | | ~~2215~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~5212 Town Rdg~~ | ~~Middletown~~ | ~~CT~~ | |

Principal Occupation:

Name of Employer: ~~Repligen~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/17/2026~~

Aggregate Contributions: ~~$100.00~~

~~$50.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Zwolinski~~ | ~~Rudd~~ | | ~~2216~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~68 Pond St~~ | ~~Fairfield~~ | ~~CT~~ | ~~06825~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Zearn~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/17/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Verrill~~ | ~~Anthony~~ | | ~~2217~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~34 Oakridge Dr~~ | ~~Brooklyn~~ | ~~CT~~ | ~~06234~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/17/2026~~

Aggregate Contributions: ~~$150.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Collette** | **Sara** | | **2197** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **825 Hollyhock Ln** | **Orange** | **CT** | **06477** |

| Principal Occupation | Name of Employer |
|---|---|
| **Special Education Supervisor** | **Milford Public Schools** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/17/2026**

Aggregate Contributions: **$200.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Raja** | **Alex** | | **2185** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **673 Orange St** | **New Haven** | **CT** | **06510** |

| Principal Occupation | Name of Employer |
|---|---|
| **Jr. Property Manager** | **FG Property Solutions LLC** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/18/2026**

Aggregate Contributions: **$10.00**

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Menapace** | **Nicholas** | | **2180** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **38 Hope St** | **Niantic** | **CT** | **06357** |

| Principal Occupation | Name of Employer |
|---|---|
| **Legislator** | **State of Connecticut** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/18/2026**

Aggregate Contributions: **$100.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Balsley** | **Elaine** | | **2188** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **63 Tracy Ave** | **Waterbury** | **CT** | **06706** |

| Principal Occupation | Name of Employer |
|---|---|
| **occupational therapist** | **Reachout Inc.** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/18/2026**

Aggregate Contributions: **$150.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Beman~~ | ~~Elizabeth~~ | | ~~2179~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~21 Wicker St~~ | ~~Putnam~~ | ~~CT~~ | ~~06260~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~N/A~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/18/2026~~

Aggregate Contributions: ~~$135.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Menapace~~ | ~~Nicholas~~ | | ~~2180~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~38 Hope St~~ | ~~Niantic~~ | ~~CT~~ | ~~06357~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~State of Connecticut~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/18/2026~~

Aggregate Contributions: ~~$125.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Furnival~~ | ~~Lawrence~~ | | ~~2181~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~978 Ridge Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$340.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/18/2026~~

Aggregate Contributions: ~~$780.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Formica~~ | ~~Marcia~~ | | ~~2182~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~57 High Ridge Rd~~ | ~~Glastonbury~~ | ~~CT~~ | ~~06073~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/18/2026~~

Aggregate Contributions: ~~$150.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Graesser~~ | ~~Christine~~ | | ~~2183~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~28 Lawrence Ave~~ | ~~Avon~~ | ~~CT~~ | ~~06001~~ |

Principal Occupation:

Name of Employer: ~~CT~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/18/2026~~

Aggregate Contributions: ~~$699.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Sharnick~~ | ~~Michelle~~ | | ~~2184~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~3 Roller Ter~~ | ~~Milford~~ | ~~CT~~ | ~~06461~~ |

Principal Occupation:

Name of Employer: ~~CT~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/18/2026~~

Aggregate Contributions: ~~$125.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Raja~~ | ~~Alex~~ | | ~~2185~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~673 Orange St~~ | ~~New Haven~~ | ~~CT~~ | ~~06510~~ |

Principal Occupation:

Name of Employer: ~~N/a~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/18/2026~~

Aggregate Contributions: ~~$15.00~~

~~$5.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Felton~~ | ~~Joey~~ | | ~~2186~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~107 Whitney Ave~~ | ~~New Haven~~ | ~~CT~~ | ~~06511~~ |

Principal Occupation:

Name of Employer: ~~N/A~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/18/2026~~

Aggregate Contributions: ~~$20.00~~

~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Levitansky | Aviva | | 2187 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1820 Ella T Grasso Blvd | New Haven | CT | 06511 |

Principal Occupation:

Name of Employer: Na

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/18/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Balsley~~ | ~~Elaine~~ | | ~~2188~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~63 Tracy Ave~~ | ~~Waterbury~~ | ~~CT~~ | ~~06706~~ |

Principal Occupation:

Name of Employer: ~~Reachout Inc.~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/18/2026~~

Aggregate Contributions: ~~$225.00~~

~~$75.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Siegelbaum~~ | ~~Beth~~ | | ~~2189~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~57 Russell St~~ | ~~Norwalk~~ | ~~CT~~ | ~~06855~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/18/2026~~

Aggregate Contributions: ~~$80.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Denis** | **Susan M** | | **2192** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **67 Charlton Hill Rd** | **Hamden** | **CT** | **06518** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/18/2026**

Aggregate Contributions: **$100.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Miller~~ | ~~Aaliyah~~ | | ~~2190~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~81 Cheney Ln~~ | ~~East Hartford~~ | ~~CT~~ | ~~06118~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Capitol Region Council of Governments~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/18/2026~~

Aggregate Contributions: ~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Green~~ | ~~Christopher~~ | | ~~2191~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~550 Housatonic Ave~~ | ~~Stratford~~ | ~~CT~~ | ~~06615~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/18/2026~~

Aggregate Contributions: ~~$100.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Denis~~ | ~~Susan M~~ | | ~~2192~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~67 Charlton Hill Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06518~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/18/2026~~ | ~~$150.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Beman** | **Elizabeth** | | **2179** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **21 Wicker St** | **Putnam** | **CT** | **06260** |

| Principal Occupation | Name of Employer |
|---|---|
| **Teaher** | **N/A** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| **02/18/2026** | **$110.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~**Menapace**~~ | ~~**Nicholas**~~ | | ~~**2180**~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~**38 Hope St**~~ | ~~**Niantic**~~ | ~~**CT**~~ | ~~**06357**~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~**Legislator**~~ | ~~**State of Connecticut**~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~**02/18/2026**~~ | ~~**$100.00**~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Furnival** | **Lawrence** | | **2181** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **978 Ridge Rd** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$340.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| **02/18/2026** | **$390.00** |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Formica** | **Marcia** | | **2182** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **57 High Ridge Rd** | **Glastonbury** | **CT** | **06073** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/18/2026**

Aggregate Contributions: **$75.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Graesser** | **Christine** | | **2183** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **28 Lawrence Ave** | **Avon** | **CT** | **06001** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$150.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/18/2026**

Aggregate Contributions: **$549.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Sharnick** | **Michelle** | | **2184** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **3 Roller Ter** | **Milford** | **CT** | **06461** |

| Principal Occupation | Name of Employer |
|---|---|
| **Digital Marketing** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/18/2026**

Aggregate Contributions: **$75.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~**Raja**~~ | ~~**Alex**~~ | | ~~**2185**~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~**673 Orange St**~~ | ~~**New Haven**~~ | ~~**CT**~~ | ~~**06510**~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~**n/a**~~ | ~~**N/a**~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~**$5.00**~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~**02/18/2026**~~

Aggregate Contributions: ~~**$10.00**~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Felton** | **Joey** | | **2186** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **107 Whitney Ave** | **New Haven** | **CT** | **06511** |

| Principal Occupation | Name of Employer |
|---|---|
| **n/a** | **N/A** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/18/2026**

Aggregate Contributions: **$10.00**

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~**Balsley**~~ | ~~**Elaine**~~ | | ~~**2188**~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~**63 Tracy Ave**~~ | ~~**Waterbury**~~ | ~~**CT**~~ | ~~**06706**~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~**occupational therapist**~~ | ~~**Reachout Inc.**~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~**$75.00**~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~**02/18/2026**~~

Aggregate Contributions: ~~**$150.00**~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Siegelbaum** | **Beth** | | **2189** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **57 Russell St** | **Norwalk** | **CT** | **06855** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/18/2026**

Aggregate Contributions: **$55.00**

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Miller** | **Aaliyah** | | **2190** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **81 Cheney Ln** | **East Hartford** | **CT** | **06118** |

| Principal Occupation | Name of Employer |
|---|---|
| **Storyteller** | **Capitol Region Council of Governments** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/18/2026**

Aggregate Contributions: **$5.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Green** | **Christopher** | | **2191** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **550 Housatonic Ave** | **Stratford** | **CT** | **06615** |

| Principal Occupation | Name of Employer |
|---|---|
| **Financial Advisor** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/18/2026**

Aggregate Contributions: **$75.00**

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~**Denis**~~ | ~~**Susan M**~~ | | ~~**2192**~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~**67 Charlton Hill Rd**~~ | ~~**Hamden**~~ | ~~**CT**~~ | ~~**06518**~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~**Retired**~~ | ~~**Retired**~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~**$50.00**~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~**02/18/2026**~~

Aggregate Contributions: ~~**$100.00**~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Parkinson~~ | ~~Angie~~ | | ~~2162~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~31 High St~~ | ~~East Hartford~~ | ~~CT~~ | ~~06118~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Colchester BoE~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/19/2026~~

Aggregate Contributions: ~~$275.00~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Gracey-Edwin~~ | ~~James~~ | | ~~2163~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~16 Morgan Rd~~ | ~~Canton~~ | ~~CT~~ | ~~06019~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Unemployed~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/19/2026~~

Aggregate Contributions: ~~$50.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Robinson~~ | ~~Ben~~ | | ~~2164~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~79 Elm St~~ | ~~Guilford~~ | ~~CT~~ | ~~06437~~ |

Principal Occupation:

Name of Employer: ~~CT~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/19/2026~~

Aggregate Contributions: ~~$225.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Lary~~ | ~~Doug~~ | | ~~2165~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~183 Summit St~~ | ~~Willimantic~~ | ~~CT~~ | ~~06226~~ |

Principal Occupation:

Name of Employer: ~~NECCOG~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$235.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/19/2026~~

Aggregate Contributions: ~~$705.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Soto~~ | ~~Chris~~ | | ~~2166~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~519 Florida Ave NE~~ | ~~Washington~~ | ~~DC~~ | ~~20002~~ |

Principal Occupation:

Name of Employer: ~~Pesoni Corp.~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$90.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/19/2026~~

Aggregate Contributions: ~~$270.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Forman~~ | ~~David~~ | | ~~2167~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~156 Willard St~~ | ~~New Haven~~ | ~~CT~~ | ~~06515~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/19/2026~~

Aggregate Contributions: ~~$50.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Lomartire~~ | ~~Jon~~ | | ~~2168~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~293 Green Hill Rd~~ | ~~Madison~~ | ~~CT~~ | ~~06443~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/19/2026~~

Aggregate Contributions: ~~$300.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Latus~~ | ~~Jane~~ | | ~~2169~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~8 Uplands Dr~~ | ~~Canton~~ | ~~CT~~ | ~~06019~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Canton Board of Education~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$15.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/19/2026~~

Aggregate Contributions: ~~$30.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Smith~~ | ~~Nicholas~~ | | ~~2170~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1400 20th St NW~~ | ~~Washington~~ | ~~DC~~ | ~~20036~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Greenpeace USA~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$215.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/19/2026~~

Aggregate Contributions: ~~$580.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Duncan~~ | ~~Michael~~ | | ~~2171~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~13 Sharon Dr~~ | ~~Shelton~~ | ~~CT~~ | ~~06484~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~No~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/19/2026~~

Aggregate Contributions: ~~$450.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Lentini~~ | ~~Jerald~~ | | ~~2172~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~524 Birch Mountain Rd~~ | ~~Manchester~~ | ~~CT~~ | ~~06040~~ |

Principal Occupation:

Name of Employer: ~~CHRO~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$140.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/19/2026~~

Aggregate Contributions: ~~$480.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Lemar~~ | ~~Roland~~ | | ~~2173~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~552 Chapel St~~ | ~~New Haven~~ | ~~CT~~ | ~~06511~~ |

Principal Occupation:

Name of Employer: ~~CT~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$140.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/19/2026~~

Aggregate Contributions: ~~$480.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~VanDuzee~~ | ~~Kathleen~~ | | ~~2174~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~198 Whisconier Rd~~ | ~~Brookfield~~ | ~~CT~~ | ~~06804~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/19/2026~~

Aggregate Contributions: ~~$125.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Baker-Rabe~~ | ~~Lelah~~ | | ~~2175~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~23 Winfield Ct~~ | ~~Norwalk~~ | ~~CT~~ | |

Principal Occupation:

Name of Employer: ~~Westport Writers' Workshop~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/19/2026~~

Aggregate Contributions: ~~$50.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Hoff~~ | ~~Renee~~ | | ~~2176~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~151 Ridge Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

Principal Occupation:

Name of Employer: ~~State of CT~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/19/2026~~

Aggregate Contributions: ~~$200.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Hass~~ | ~~David~~ | | ~~2177~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~826 Rail Fence Rd~~ | ~~Orange~~ | ~~CT~~ | ~~06477~~ |

Principal Occupation:

Name of Employer: ~~CT~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$340.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/19/2026~~

Aggregate Contributions: ~~$680.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Lettieri~~ | ~~Lisa~~ | | ~~2178~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~31 Woodland St~~ | ~~Hartford~~ | ~~CT~~ | ~~06105~~ |

Principal Occupation:

Name of Employer: ~~Lpl~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/19/2026~~

Aggregate Contributions: ~~$150.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Duncan** | **Michael** | | **2171** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **13 Sharon Dr** | **Shelton** | **CT** | **06484** |

Principal Occupation: **Sales Strategy Director**

Name of Employer: **Tata Consumer Products**

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$150.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/19/2026**

Aggregate Contributions: **$300.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Lary** | **Douglas** | | **2165** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **183 Summit St** | **Willimantic** | **CT** | **06226** |

| Principal Occupation | Name of Employer |
|---|---|
| **Regional Election Advisor** | **NECCOG** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$235.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/19/2026**

Aggregate Contributions: **$470.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Robinson** | **John** | | **2164** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **79 Elm St** | **Guilford** | **CT** | **06437** |

| Principal Occupation | Name of Employer |
|---|---|
| **software engineer** | **Travelers** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/19/2026**

Aggregate Contributions: **$150.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Soto** | **Chris** | | **2166** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **519 Florida Ave NE** | **Washington** | **DC** | **20002** |

| Principal Occupation | Name of Employer |
|---|---|
| **consultant** | **Pesoni Corp.** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$90.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/19/2026**

Aggregate Contributions: **$180.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Parkinson** | **Angela** | | **2162** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **31 High St** | **East Hartford** | **CT** | **06118** |

| Principal Occupation | Name of Employer |
|---|---|
| **Teacher** | **Colchester BoE** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/19/2026**

Aggregate Contributions: **$175.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Parkinson~~ | ~~Angie~~ | | ~~2162~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~31 High St~~ | ~~East Hartford~~ | ~~CT~~ | ~~06118~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Teacher~~ | ~~Colchester BoE~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/19/2026~~ | ~~$200.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Gracey-Edwin | James | | 2163 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 16 Morgan Rd | Canton | CT | 06019 |

| Principal Occupation | Name of Employer |
|---|---|
| Unemployed | Unemployed |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 02/19/2026 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Robinson~~ | ~~Ben~~ | | ~~2164~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~79 Elm St~~ | ~~Guilford~~ | ~~CT~~ | ~~06437~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~software engineer~~ | ~~CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/19/2026~~ | ~~$150.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Lary~~ | ~~Doug~~ | | ~~2165~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~183 Summit St~~ | ~~Willimantic~~ | ~~CT~~ | ~~06226~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Regional Election Advisor~~ | ~~NECCOG~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$235.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/19/2026~~ | ~~$470.00~~ |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Soto~~ | ~~Chris~~ | | ~~2166~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~519 Florida Ave NE~~ | ~~Washington~~ | ~~DC~~ | ~~20002~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~consultant~~ | ~~Pesoni Corp.~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$90.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/19/2026~~ | ~~$180.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Forman | David | | 2167 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 156 Willard St | New Haven | CT | 06515 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 02/19/2026 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Lomartire | Jon | | 2168 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 293 Green Hill Rd | Madison | CT | 06443 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 02/19/2026 | $200.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Latus | Jane | | 2169 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 8 Uplands Dr | Canton | CT | 06019 |

| Principal Occupation | Name of Employer |
|---|---|
| Special Ed paraprofessional | Canton Board of Education |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $15.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 02/19/2026 | $15.00 |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Smith** | **Nicholas** | | **2170** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **1400 20th St NW** | **Washington** | **DC** | **20036** |

| Principal Occupation | Name of Employer |
|---|---|
| **Digital Strategist** | **Greenpeace USA** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$215.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/19/2026**

Aggregate Contributions: **$365.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~**Duncan**~~ | ~~**Michael**~~ | | ~~**2171**~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~**13 Sharon Dr**~~ | ~~**Shelton**~~ | ~~**CT**~~ | ~~**06484**~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~**No**~~ | ~~**No**~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~**$150.00**~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~**02/19/2026**~~

Aggregate Contributions: ~~**$300.00**~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Lentini** | **Jerald** | | **2172** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **524 Birch Mountain Rd** | **Manchester** | **CT** | **06040** |

| Principal Occupation | Name of Employer |
|---|---|
| **Human Rights Attorney** | **CHRO** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$140.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/19/2026**

Aggregate Contributions: **$340.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Lemar** | **Roland** | | **2173** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **552 Chapel St** | **New Haven** | **CT** | **06511** |

| Principal Occupation | Name of Employer |
|---|---|
| **State Legislator** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$140.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/19/2026**

Aggregate Contributions: **$340.00**

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **VanDuzee** | **Kathleen** | | **2174** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **198 Whisconier Rd** | **Brookfield** | **CT** | **06804** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/19/2026**

Aggregate Contributions: **$100.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Baker-Rabe** | **Lelah** | | **2175** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **23 Winfield Ct** | **Norwalk** | **CT** | |

| Principal Occupation | Name of Employer |
|---|---|
| **Author** | **Westport Writers' Workshop** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/19/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Hoff** | **Renee** | | **2176** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **151 Ridge Rd** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Manager** | **State of CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/19/2026**

Aggregate Contributions: **$100.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Hass** | **David** | | **2177** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **826 Rail Fence Rd** | **Orange** | **CT** | **06477** |

| Principal Occupation | Name of Employer |
|---|---|
| **MD** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$340.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/19/2026**

Aggregate Contributions: **$340.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Lettieri | Lisa | | 2178 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 31 Woodland St | Hartford | CT | 06105 |

| Principal Occupation | Name of Employer |
|---|---|
| Financial Planner | LPL |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/19/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Goodrich | Robert | | 2151 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 15 Derenthal Dr | Madison | CT | 06443 |

| Principal Occupation | Name of Employer |
|---|---|
| Education and nonprofit consultant | Robert M Goodrich |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $250.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/20/2026

Aggregate Contributions: $500.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Gordon | Laura | | 2156 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 421 New Haven Ave | Milford | CT | 06460 |

| Principal Occupation | Name of Employer |
|---|---|
| lawyer | Laura P. Gordon |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☒ Yes ☐ No

If yes, list Event # 02152026G

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/20/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Lemar | Anika Singh | | 2153 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 552 Chapel St | New Haven | CT | 06511 |

| Principal Occupation | Name of Employer |
|---|---|
| Law professor | Yale University |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/20/2026

Aggregate Contributions: $40.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Balmer~~ | ~~Paul~~ | | ~~2146~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~42 Rippowam Rd~~ | ~~New Canaan~~ | ~~CT~~ | ~~06840~~ |

Principal Occupation:

Name of Employer: ~~Self employed~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/20/2026~~

Aggregate Contributions: ~~$10.00~~

~~$5.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Cantelmo~~ | ~~John~~ | | ~~2147~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~46 Sunset Hill Rd~~ | ~~Simsbury~~ | ~~CT~~ | ~~06070~~ |

Principal Occupation:

Name of Employer: ~~CT~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/20/2026~~

Aggregate Contributions: ~~$20.00~~

~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Smith~~ | ~~Diane~~ | | ~~2148~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~603 Briarwood Ct~~ | ~~Rocky Hill~~ | ~~CT~~ | ~~06067~~ |

Principal Occupation:

Name of Employer: ~~ct~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/20/2026~~

Aggregate Contributions: ~~$50.00~~

~~$25.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~keefe~~ | ~~Diane~~ | | ~~2149~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~249 Chestnut Hill Rd~~ | ~~Norwalk~~ | ~~CT~~ | ~~06851~~ |

Principal Occupation:

Name of Employer: ~~CT~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/20/2026~~

Aggregate Contributions: ~~$300.00~~

~~$150.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~LaVerne~~ | ~~Darren~~ | | ~~2150~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~77 Woodridge Cir~~ | ~~New Canaan~~ | ~~CT~~ | ~~06840~~ |

Principal Occupation:

Name of Employer: ~~Gibson Dunn~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/20/2026~~

Aggregate Contributions: ~~$150.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Goodrich~~ | ~~Robert~~ | | ~~2151~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~15 Derenthal Dr~~ | ~~Madison~~ | ~~CT~~ | ~~06443~~ |

Principal Occupation:

Name of Employer: ~~self-employed~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$250.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/20/2026~~

Aggregate Contributions: ~~$750.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Villani~~ | ~~Jason~~ | | ~~2152~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~47 Parker Farms Rd~~ | ~~Wallingford~~ | ~~CT~~ | ~~06492~~ |

Principal Occupation:

Name of Employer: ~~New Britain Public Library~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/20/2026~~

Aggregate Contributions: ~~$75.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Lemar~~ | ~~Anika Singh~~ | | ~~2153~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~552 Chapel St~~ | ~~New Haven~~ | ~~CT~~ | ~~06511~~ |

Principal Occupation:

Name of Employer: ~~Yale University~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$20.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/20/2026~~

Aggregate Contributions: ~~$60.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Gutcheon~~ | ~~Adam~~ | | ~~2154~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~19 Mechanic St~~ | ~~Windsor~~ | ~~CT~~ | ~~06095~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Voyager Data Services~~ |

| Is contributor a principal of a state contractor or prospective state contractor? | Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | Amount of Contribution |
|---|---|---|
| ☐ Yes ☒ No | ☐ Yes ☐ No | |
| If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative | | |

| Is this contribution associated with an event reported in Section J1? | Method of contribution: | Date Received | Aggregate Contributions |
|---|---|---|---|
| ☐ Yes ☐ No | ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card | ~~02/20/2026~~ | ~~$300.00~~ |
| If yes, list Event # | | | |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Tepperman~~ | ~~Fran~~ | | ~~2155~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~266 Hinman Ln~~ | ~~Southbury~~ | ~~CT~~ | ~~06488~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

| Is contributor a principal of a state contractor or prospective state contractor? | Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | Amount of Contribution |
|---|---|---|
| ☐ Yes ☒ No | ☐ Yes ☐ No | |
| If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative | | |

| Is this contribution associated with an event reported in Section J1? | Method of contribution: | Date Received | Aggregate Contributions |
|---|---|---|---|
| ☐ Yes ☐ No | ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card | ~~02/20/2026~~ | ~~$100.00~~ |
| If yes, list Event # | | | |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Gordon~~ | ~~Laura~~ | | ~~2156~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~421 New Haven Ave~~ | ~~Milford~~ | ~~CT~~ | ~~06460~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~lawyer~~ | ~~Laura P. Gordon, Attorney at LLawyeraw~~ |

| Is contributor a principal of a state contractor or prospective state contractor? | Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | Amount of Contribution |
|---|---|---|
| ☐ Yes ☒ No | ☐ Yes ☒ No | |
| If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative | | |

| Is this contribution associated with an event reported in Section J1? | Method of contribution: | Date Received | Aggregate Contributions |
|---|---|---|---|
| ☒ Yes ☐ No | ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card | ~~02/20/2026~~ | ~~$10.00~~ |
| If yes, list Event # ~~02152026G~~ | | | |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Martin~~ | ~~Tom~~ | | ~~2157~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~35 Samuel Hill Rd~~ | ~~Columbia~~ | ~~CT~~ | ~~06237~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

| Is contributor a principal of a state contractor or prospective state contractor? | Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | Amount of Contribution |
|---|---|---|
| ☐ Yes ☒ No | ☐ Yes ☐ No | |
| If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative | | |

| Is this contribution associated with an event reported in Section J1? | Method of contribution: | Date Received | Aggregate Contributions |
|---|---|---|---|
| ☐ Yes ☐ No | ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card | ~~02/20/2026~~ | ~~$450.00~~ |
| If yes, list Event # | | | |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Kirby~~ | ~~Deborah~~ | | ~~2158~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~13 Albatross Dr~~ | ~~Ledyard~~ | ~~CT~~ | ~~06339~~ |

Principal Occupation:

Name of Employer: ~~Retired in~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$340.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/20/2026~~

Aggregate Contributions: ~~$930.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Aldred~~ | ~~Elizabeth~~ | | ~~2159~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~57 Country Club Rd~~ | ~~Groton~~ | ~~CT~~ | ~~06340~~ |

Principal Occupation:

Name of Employer: ~~Yale University~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/20/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Sommer~~ | ~~Howard~~ | | ~~2160~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~20 Christopher Ln~~ | ~~Guilford~~ | ~~CT~~ | ~~06437~~ |

Principal Occupation:

Name of Employer: ~~retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/20/2026~~

Aggregate Contributions: ~~$200.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Cotton~~ | ~~Dominic~~ | | ~~2161~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~60 Corona Dr~~ | ~~Milford~~ | ~~CT~~ | ~~06460~~ |

Principal Occupation:

Name of Employer: ~~Life Skills Unlimited~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/20/2026~~

Aggregate Contributions: ~~$250.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Balmer** | **Paul** | | **2146** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **42 Rippowam Rd** | **New Canaan** | **CT** | **06840** |

| Principal Occupation | Name of Employer |
|---|---|
| **Artist** | **Self employed** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/20/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Cantelmo** | **John** | | **2147** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **46 Sunset Hill Rd** | **Simsbury** | **CT** | **06070** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/20/2026**

Aggregate Contributions: **$10.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Smith** | **Diane** | | **2148** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **603 Briarwood Ct** | **Rocky Hill** | **CT** | **06067** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **ct** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/20/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **keefe** | **Diane** | | **2149** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **249 Chestnut Hill Rd** | **Norwalk** | **CT** | **06851** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$150.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/20/2026**

Aggregate Contributions: **$150.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| LaVerne | Darren | | 2150 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 77 Woodridge Cir | New Canaan | CT | 06840 |

| Principal Occupation | Name of Employer |
|---|---|
| Attorney | Gibson Dunn |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/20/2026

Aggregate Contributions: $75.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Goodrich~~ | ~~Robert~~ | | ~~2151~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~15 Derenthal Dr~~ | ~~Madison~~ | ~~CT~~ | ~~06443~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Education and nonprofit consultant~~ | ~~self-employed~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$250.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/20/2026~~

Aggregate Contributions: ~~$500.00~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Villani | Jason | | 2152 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 47 Parker Farms Rd | Wallingford | CT | 06492 |

| Principal Occupation | Name of Employer |
|---|---|
| Librarian | New Britain Public Library |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/20/2026

Aggregate Contributions: $50.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Lemar~~ | ~~Anika Singh~~ | | ~~2153~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~552 Chapel St~~ | ~~New Haven~~ | ~~CT~~ | ~~06511~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Law professor~~ | ~~Yale University~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$20.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/20/2026~~

Aggregate Contributions: ~~$40.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Gutcheon** | **Adam** | | **2154** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **19 Mechanic St** | **Windsor** | **CT** | **06095** |

| Principal Occupation | Name of Employer |
|---|---|
| **consultant** | **Voyager Data Services** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$150.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/20/2026**

Aggregate Contributions: **$150.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Tepperman** | **Fran** | | **2155** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **266 Hinman Ln** | **Southbury** | **CT** | **06488** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/20/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Martin** | **Tom** | | **2157** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **35 Samuel Hill Rd** | **Columbia** | **CT** | **06237** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$150.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/20/2026**

Aggregate Contributions: **$300.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Kirby** | **Deborah** | | **2158** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **13 Albatross Dr** | **Ledyard** | **CT** | **06339** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired in** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$340.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/20/2026**

Aggregate Contributions: **$590.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Aldred** | **Elizabeth** | | **2159** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **57 Country Club Rd** | **Groton** | **CT** | **06340** |

| Principal Occupation | Name of Employer |
|---|---|
| **Data Specialist** | **Yale University** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/20/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Sommer** | **Howard** | | **2160** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **20 Christopher Ln** | **Guilford** | **CT** | **06437** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/20/2026**

Aggregate Contributions: **$100.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Cotton** | **Dominic** | | **2161** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **60 Corona Dr** | **Milford** | **CT** | **06460** |

| Principal Occupation | Name of Employer |
|---|---|
| **Brain Injury Rehab** | **Life Skills Unlimited** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/20/2026**

Aggregate Contributions: **$200.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Donato~~ | ~~Frank~~ | | ~~2103~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~15 Beech Tree Hill Rd~~ | ~~Shelton~~ | ~~CT~~ | ~~06484~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$55.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Morgan~~ | ~~Collin~~ | | ~~2104~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~2 Foley Rd~~ | ~~Portland~~ | ~~CT~~ | ~~06480~~ |

Principal Occupation:

Name of Employer: ~~Sonalysts, inc.~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$204.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Leckman~~ | ~~Hannah~~ | | ~~2105~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~125 Spring Glen Ter~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

Principal Occupation:

Name of Employer: ~~retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$340.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$855.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Cunningham~~ | ~~Peter~~ | | ~~2106~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~81 N Lake Dr~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

Principal Occupation:

Name of Employer: ~~Yale University~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$15.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$35.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Johnson~~ | ~~Chris~~ | | ~~2107~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~37 Greenmanville Ave~~ | ~~Mystic~~ | ~~CT~~ | ~~06355~~ |

Principal Occupation:

Name of Employer: ~~A/Z Corporation~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$50.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Levesque~~ | ~~Larry~~ | | ~~2108~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~32 Park Place Cir~~ | ~~West Hartford~~ | ~~CT~~ | ~~06110~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$300.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Blanchette~~ | ~~Meghan~~ | | ~~2109~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~16 W Vine St~~ | ~~Pawcatuck~~ | ~~CT~~ | ~~06379~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Hydrolix~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Gammon~~ | ~~George~~ | | ~~2110~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~33 Edgehill Ter~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~G. Davis Gammon, MD~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$150.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Smith~~ | ~~Leo~~ | | ~~2111~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~64 Boysenberry Ct~~ | ~~Suffield~~ | ~~CT~~ | ~~06078~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$100.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Hittman~~ | ~~Richard~~ | | ~~2112~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~143 Hoyt St~~ | ~~Stamford~~ | ~~CT~~ | ~~06905~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$250.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$500.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Luxenberg~~ | ~~Geoffrey~~ | | ~~2113~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~93 Plymouth Ln~~ | ~~Manchester~~ | ~~CT~~ | ~~06040~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~State of CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$240.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$580.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Bass~~ | ~~Elissa~~ | | ~~2114~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~203 N Main St~~ | ~~Stonington~~ | ~~CT~~ | ~~06378~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Self-employed Elissa Bass~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Levitan~~ | ~~Blaize~~ | | ~~2115~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~95 Water St~~ | ~~Guilford~~ | ~~CT~~ | ~~06437~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Branford schools~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$50.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Ciaglo~~ | ~~Karla~~ | | ~~2116~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~66 Edgemere Ave~~ | ~~West Hartford~~ | ~~CT~~ | ~~06110~~ |

Principal Occupation:

Name of Employer: ~~Dirt Sugar Media~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Leary~~ | ~~Shannon~~ | | ~~2117~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~8 Kilbourn Rd~~ | ~~Simsbury~~ | ~~CT~~ | ~~06070~~ |

Principal Occupation:

Name of Employer: ~~Simsbury Community Media~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$150.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Healy~~ | ~~Patrick~~ | | ~~2118~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~20 Clapp Rd~~ | ~~Windsor~~ | ~~CT~~ | ~~06095~~ |

Principal Occupation:

Name of Employer: ~~Frontline Productions~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Sarris~~ | ~~William~~ | | ~~2119~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~120 Freeman Rd~~ | ~~Oxford~~ | ~~CT~~ | ~~06478~~ |

Principal Occupation:

Name of Employer: ~~William Sarris Productions~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$50.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Lewis~~ | ~~Diane~~ | | ~~2120~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~69 Congress St .~~ | ~~Hartford~~ | ~~CT~~ | ~~06114~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CT State Building Trades~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Humphrey~~ | ~~Damian~~ | | ~~2121~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~6 Birch Hill Dr~~ | ~~South Windsor~~ | ~~CT~~ | ~~06074~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Unemployed~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$75.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Flaherty-Ludwig~~ | ~~Mary Ellen~~ | | ~~2122~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~89 Soundview Ave~~ | ~~Norwalk~~ | ~~CT~~ | ~~06854~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$40.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Lombardo~~ | ~~Wayne~~ | | ~~2123~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~571 Town St~~ | ~~Moodus~~ | ~~CT~~ | ~~06469~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$30.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Flaherty-Ludwig~~ | ~~Mary Ellen~~ | | ~~2124~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~89 Soundview Ave~~ | ~~Norwalk~~ | ~~CT~~ | ~~06854~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$40.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Church~~ | ~~Lois Lake~~ | | ~~2125~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~14 Trumbull St~~ | ~~Meriden~~ | ~~CT~~ | ~~06451~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~UConnn~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Messore~~ | ~~Angelo~~ | | ~~2126~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~193 Haverford St .~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Connecticut State Community College~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Doerr~~ | ~~Brian~~ | | ~~2127~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~12 Penny Ln~~ | ~~Wallingford~~ | ~~CT~~ | ~~06492~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Thor Specialties~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$85.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Doerr~~ | ~~Kristi~~ | | ~~2128~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~12 Penny Ln~~ | ~~Wallingford~~ | ~~CT~~ | ~~06492~~ |

Principal Occupation:

Name of Employer: ~~Richemont North America inc~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$255.00~~

~~$25.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Levine~~ | ~~Linnea~~ | | ~~2129~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~201 Main St~~ | ~~Westport~~ | ~~CT~~ | ~~06880~~ |

Principal Occupation:

Name of Employer: ~~Retired attorney~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$15.00~~

~~$5.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Morthanos~~ | ~~Paula~~ | | ~~2130~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~4 Ocean Ave~~ | ~~Stratford~~ | ~~CT~~ | ~~06615~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$200.00~~

~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Rao~~ | ~~Prabhakar~~ | | ~~2131~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~43 Steeple View Dr~~ | ~~Ellington~~ | ~~CT~~ | ~~06029~~ |

Principal Occupation:

Name of Employer: ~~RTX Technology Research Center~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$20.00~~

~~$10.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Abrams~~ | ~~Joyce~~ | | ~~2132~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~33 Brenton Ter~~ | ~~Hamden~~ | ~~CT~~ | ~~06518~~ |

Principal Occupation:

Name of Employer: ~~No~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$50.00~~

~~$25.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Dolan~~ | ~~Nancy~~ | | ~~2133~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~99 Niles Hill Rd~~ | ~~New London~~ | ~~CT~~ | ~~06320~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$125.00~~

~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Cobb~~ | ~~Celeste~~ | | ~~2134~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~10 Tunxis Trl~~ | ~~Redding~~ | ~~CT~~ | ~~06896~~ |

Principal Occupation:

Name of Employer: ~~Insurance Marketing Solutions~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$250.00~~

~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Powell~~ | ~~Chris~~ | | ~~2135~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~5 Chestnut St~~ | ~~Trumbull~~ | ~~CT~~ | ~~06611~~ |

Principal Occupation:

Name of Employer: ~~Student~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$255.00~~

~~$75.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Chap~~ | ~~Jeni~~ | | ~~2136~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~23 Goodwives River Rd~~ | ~~Darien~~ | ~~CT~~ | ~~06820~~ |

Principal Occupation:

Name of Employer: ~~Self-employed, Insights and Impact Consulting~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$225.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$450.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Martin~~ | ~~Lori~~ | | ~~2137~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~24 Sherland Ave~~ | ~~New Haven~~ | ~~CT~~ | ~~06513~~ |

Principal Occupation:

Name of Employer: ~~Haven,Äôs Harvest~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$200.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Heimer~~ | ~~Win~~ | | ~~2138~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~799 Prospect Ave # A2~~ | ~~West Hartford~~ | ~~CT~~ | ~~06105~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$80.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Cooney~~ | ~~Suzanne~~ | | ~~2139~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~35 Filbert St~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$477.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Gallagher~~ | ~~Sarah~~ | | ~~2140~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~21 Hawthorne Ave~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

Principal Occupation:

Name of Employer: ~~National council of nonprofits~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$40.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$105.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Lettieri~~ | ~~Cinzia~~ | | ~~2141~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~11 Liberty St~~ | ~~Clinton~~ | ~~CT~~ | ~~06413~~ |

Principal Occupation:

Name of Employer: ~~Hamden Public Schools~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$20.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~DeLucia~~ | ~~Pat~~ | | ~~2142~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~7 Shepard Hill Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06514~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$550.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Sacco~~ | ~~Jennifer~~ | | ~~2143~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~54 Thompson St~~ | ~~Hamden~~ | ~~CT~~ | ~~06518~~ |

Principal Occupation:

Name of Employer: ~~Quinnipiac University~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$95.26~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Mickens~~ | ~~Karimah~~ | | ~~2144~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~32 Building Brook Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06514~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Town of Hamden~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~McGuire~~ | ~~Elizabeth~~ | | ~~2145~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~711 Canyon Ridge Dr .~~ | ~~Broad Brook~~ | ~~CT~~ | ~~06016~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/21/2026~~

Aggregate Contributions: ~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Donato** | **Frank** | | **2103** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **15 Beech Tree Hill Rd** | **Shelton** | **CT** | **06484** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/21/2026**

Aggregate Contributions: **$35.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Morgan** | **Collin** | | **2104** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **2 Foley Rd** | **Portland** | **CT** | **06480** |

| Principal Occupation | Name of Employer |
|---|---|
| **software engineer** | **Sonalysts, inc.** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/21/2026**

Aggregate Contributions: **$179.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Leckman** | **Hannah** | | **2105** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **125 Spring Glen Ter** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$340.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/21/2026**

Aggregate Contributions: **$515.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Cunningham** | **Peter** | | **2106** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **81 N Lake Dr** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Editor** | **Yale University** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$15.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/21/2026**

Aggregate Contributions: **$20.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Johnson** | **Chris** | | **2107** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **37 Greenmanville Ave** | **Mystic** | **CT** | **06355** |

| Principal Occupation | Name of Employer |
|---|---|
| **Analyst** | **A/Z Corporation** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/21/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Levesque** | **Larry** | | **2108** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **32 Park Place Cir** | **West Hartford** | **CT** | **06110** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/21/2026**

Aggregate Contributions: **$225.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Blanchette | Meghan | | 2109 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 16 W Vine St | Pawcatuck | CT | 06379 |

| Principal Occupation | Name of Employer |
|---|---|
| Product Marketing | Hydrolix |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/21/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Gammon | George | | 2110 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 33 Edgehill Ter | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Physician | G. Davis Gammon, MD |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/21/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Smith | Leo | | 2111 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 64 Boysenberry Ct | Suffield | CT | 06078 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/21/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hittman | Richard | | 2112 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 143 Hoyt St | Stamford | CT | 06905 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $250.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/21/2026

Aggregate Contributions: $250.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Luxenberg** | **Geoffrey** | | **2113** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **93 Plymouth Ln** | **Manchester** | **CT** | **06040** |

| Principal Occupation | Name of Employer |
|---|---|
| **Legislator** | **State of CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$240.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/21/2026**

Aggregate Contributions: **$340.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Bass** | **Elissa** | | **2114** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **203 N Main St** | **Stonington** | **CT** | **06378** |

| Principal Occupation | Name of Employer |
|---|---|
| **Writer** | **Self employed Elissa Bass** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/21/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Levitan** | **Blaize** | | **2115** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **95 Water St** | **Guilford** | **CT** | **06437** |

| Principal Occupation | Name of Employer |
|---|---|
| **COO** | **Branford schools** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/21/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Ciaglo** | **Karla** | | **2116** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **66 Edgemere Ave** | **West Hartford** | **CT** | **06110** |

| Principal Occupation | Name of Employer |
|---|---|
| **Communications** | **Dirt Sugar Media** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/21/2026**

Aggregate Contributions: **$50.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Leary | Shannon | | 2117 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 8 Kilbourn Rd | Simsbury | CT | 06070 |

Principal Occupation: Manager, community Outreach

Name of Employer: Simsbury Community Media

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/21/2026

Aggregate Contributions: $125.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Healy | Patrick | | 2118 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 20 Clapp Rd | Windsor | CT | 06095 |

Principal Occupation: Video Editor

Name of Employer: Frontline Productions

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/21/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Sarris | William | | 2119 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 120 Freeman Rd | Oxford | CT | 06478 |

Principal Occupation: Video producer

Name of Employer: William Sarris Productions

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/21/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Lewis | Diane | | 2120 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 69 Congress St . | Hartford | CT | 06114 |

Principal Occupation: Case Manager

Name of Employer: CT State Building Trades

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/21/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Humphrey | Damian | | 2121 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 6 Birch Hill Dr | South Windsor | CT | 06074 |

| Principal Occupation | Name of Employer |
|---|---|
| Unemployed | Unemployed |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/21/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Flaherty-Ludwig | Mary Ellen | | 2122 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 89 Soundview Ave | Norwalk | CT | 06854 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/21/2026

Aggregate Contributions: $20.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Lombardo | Wayne | | 2123 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 571 Town St | Moodus | CT | 06469 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/21/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Flaherty-Ludwig | Mary Ellen | | 2124 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 89 Soundview Ave | Norwalk | CT | 06854 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/21/2026

Aggregate Contributions: $20.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Church** | **Lois Lake** | | **2125** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **14 Trumbull St** | **Meriden** | **CT** | **06451** |

| Principal Occupation | Name of Employer |
|---|---|
| **Adjunct professor** | **UConnn** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/21/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Messore** | **Angelo** | | **2126** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **193 Haverford St .** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **teacher** | **Connecticut State Community College** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/21/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~**Doerr**~~ | ~~**Brian**~~ | | ~~**2127**~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~**12 Penny Ln**~~ | ~~**Wallingford**~~ | ~~**CT**~~ | ~~**06492**~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~**lab manager**~~ | ~~**Thor Specialties**~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~**$25.00**~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~**02/21/2026**~~

Aggregate Contributions: ~~**$60.00**~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Doerr** | **Kristi** | | **2128** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **12 Penny Ln** | **Wallingford** | **CT** | **06492** |

| Principal Occupation | Name of Employer |
|---|---|
| **AVP Tax** | **Richemont North America inc** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/21/2026**

Aggregate Contributions: **$230.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Levine** | **Linnea** | | **2129** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **201 Main St** | **Westport** | **CT** | **06880** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired attorney** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/21/2026**

Aggregate Contributions: **$10.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Morthanos** | **Paula** | | **2130** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **4 Ocean Ave** | **Stratford** | **CT** | **06615** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/21/2026**

Aggregate Contributions: **$100.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Rao** | **Prabhakar** | | **2131** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **43 Steeple View Dr** | **Ellington** | **CT** | **06029** |

| Principal Occupation | Name of Employer |
|---|---|
| **Engineer** | **RTX Technology Research Center** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/21/2026**

Aggregate Contributions: **$10.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Abrams** | **Joyce** | | **2132** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **33 Brenton Ter** | **Hamden** | **CT** | **06518** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **No** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/21/2026**

Aggregate Contributions: **$25.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Dolan | Nancy | | 2133 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 99 Niles Hill Rd | New London | CT | 06320 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/21/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cobb | Celeste | | 2134 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 10 Tunxis Trl | Redding | CT | 06896 |

| Principal Occupation | Name of Employer |
|---|---|
| Marketing consultant | Insurance Marketing Solutions |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/21/2026

Aggregate Contributions: $200.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Powell | Chris | | 2135 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 5 Chestnut St | Trumbull | CT | 06611 |

| Principal Occupation | Name of Employer |
|---|---|
| Student | Student |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/21/2026

Aggregate Contributions: $155.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Chap | Jeni | | 2136 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 23 Goodwives River Rd | Darien | CT | 06820 |

| Principal Occupation | Name of Employer |
|---|---|
| Consultant | Self employed, Insights and Impact Consulting |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $225.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/21/2026

Aggregate Contributions: $225.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Martin | Lori | | 2137 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 24 Sherland Ave | New Haven | CT | 06513 |

| Principal Occupation | Name of Employer |
|---|---|
| Executive Director | Haven,Äôs Harvest |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/21/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Heimer | Win | | 2138 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 799 Prospect Ave # A2 | West Hartford | CT | 06105 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/21/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cooney | Suzanne | | 2139 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 35 Filbert St | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/21/2026

Aggregate Contributions: $377.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Gallagher | Sarah | | 2140 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 21 Hawthorne Ave | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Senior Vice President | National council of nonprofits |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $40.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/21/2026

Aggregate Contributions: $65.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Lettieri** | **Cinzia** | | **2141** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **11 Liberty St** | **Clinton** | **CT** | **06413** |

| Principal Occupation | Name of Employer |
|---|---|
| **teacher** | **Hamden Public Schools** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/21/2026**

Aggregate Contributions: **$10.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **DeLucia** | **Pat** | | **2142** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **7 Shepard Hill Rd** | **Hamden** | **CT** | **06514** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/21/2026**

Aggregate Contributions: **$525.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Sacco** | **Jennifer** | | **2143** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **54 Thompson St** | **Hamden** | **CT** | **06518** |

| Principal Occupation | Name of Employer |
|---|---|
| **Professor** | **Quinnipiac University** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/21/2026**

Aggregate Contributions: **$70.26**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Mickens** | **Karimah** | | **2144** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **32 Building Brook Rd** | **Hamden** | **CT** | **06514** |

| Principal Occupation | Name of Employer |
|---|---|
| **Town Clerk** | **Town of Hamden** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/21/2026**

Aggregate Contributions: **$25.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **McGuire** | **Elizabeth** | | **2145** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **711 Canyon Ridge Dr .** | **Broad Brook** | **CT** | **06016** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/21/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Doerr** | **Brian** | | **2127** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **12 Penny Ln** | **Wallingford** | **CT** | **06492** |

| Principal Occupation | Name of Employer |
|---|---|
| **lab manager** | **Thor Specialties** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/21/2026**

Aggregate Contributions: **$60.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Coffey~~ | ~~David~~ | | ~~2085~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~25 Springside Ave~~ | ~~New Haven~~ | ~~CT~~ | ~~06515~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Guitar Center~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$27.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/22/2026~~

Aggregate Contributions: ~~$141.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Erenhouse~~ | ~~Amory~~ | | ~~2086~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~2020 Elm St~~ | ~~Stratford~~ | ~~CT~~ | ~~06615~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Student~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$30.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/22/2026~~

Aggregate Contributions: ~~$60.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Munson~~ | ~~Ruth~~ | | ~~2087~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~30 Verona Ct~~ | ~~Stratford~~ | ~~CT~~ | ~~06615~~ |

Principal Occupation:

Name of Employer: ~~CT~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/22/2026~~

Aggregate Contributions: ~~$300.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Sacks~~ | ~~Michael~~ | | ~~2088~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~29 Candlewood Ln~~ | ~~Avon~~ | ~~CT~~ | ~~06001~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$200.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/22/2026~~

Aggregate Contributions: ~~$400.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Abel~~ | ~~Jenny~~ | | ~~2089~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~49 Maple Ave~~ | ~~Collinsville~~ | ~~CT~~ | ~~06019~~ |

Principal Occupation:

Name of Employer: ~~Earth Tones LLC~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/22/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~LaCamera~~ | ~~Ann~~ | | ~~2090~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~27 Charlton Hill Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06518~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/22/2026~~

Aggregate Contributions: ~~$150.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Cunningham~~ | ~~Evelyn~~ | | ~~2091~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~14 Snowberry Ln~~ | ~~Wilton~~ | ~~CT~~ | ~~06897~~ |

Principal Occupation:

Name of Employer: ~~City of Norwalk~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/22/2026~~

Aggregate Contributions: ~~$50.00~~

~~$25.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Stacie~~ | ~~Mary~~ | | ~~2092~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~145 Westerly Ter~~ | ~~East Hartford~~ | ~~CT~~ | ~~06118~~ |

Principal Occupation:

Name of Employer: ~~Retiredp~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/22/2026~~

Aggregate Contributions: ~~$20.00~~

~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Story~~ | ~~Elisabeth~~ | | ~~2093~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~44 Pine Hill Ave~~ | ~~Norwalk~~ | ~~CT~~ | ~~06855~~ |

Principal Occupation:

Name of Employer: ~~Norwalk Public Library CT~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/22/2026~~

Aggregate Contributions: ~~$150.00~~

~~$75.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Oatis~~ | ~~Ben~~ | | ~~2094~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~12 Fairfield Ter~~ | ~~Norwalk~~ | ~~CT~~ | ~~06851~~ |

Principal Occupation:

Name of Employer: ~~Professional Physical Therapy~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/22/2026~~

Aggregate Contributions: ~~$20.00~~

~~$10.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Morelli~~ | ~~Meaghan~~ | | ~~2095~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~33 Kalan Cir~~ | ~~Fairfield~~ | ~~CT~~ | ~~06824~~ |

Principal Occupation:

Name of Employer: ~~Self~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/22/2026~~

Aggregate Contributions: ~~$20.00~~

~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Cattaneo~~ | ~~Stefania~~ | | ~~2096~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~76 Rock Spring Rd Unit C2~~ | ~~Stamford~~ | ~~CT~~ | ~~06906~~ |

Principal Occupation:

Name of Employer: ~~Connecticut~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/22/2026~~

Aggregate Contributions: ~~$10.00~~

~~$5.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Miller~~ | ~~Brian~~ | | ~~2097~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~11 Olson Rd~~ | ~~Canton~~ | ~~CT~~ | ~~06019~~ |

Principal Occupation:

Name of Employer: ~~No~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/22/2026~~

Aggregate Contributions: ~~$150.00~~

~~$75.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Vogel~~ | ~~Michael~~ | | ~~2098~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~580 Cherry Brook Rd~~ | ~~Canton~~ | ~~CT~~ | ~~06019~~ |

Principal Occupation:

Name of Employer: ~~Allegaert Berger & Vogel LLP~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/22/2026~~

Aggregate Contributions: ~~$400.00~~

~~$100.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Erenhouse~~ | ~~Ryan~~ | | ~~2099~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~2020 Elm St~~ | ~~Stratford~~ | ~~CT~~ | ~~06615~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Dechert LLP~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/22/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Favreau~~ | ~~Janice~~ | | ~~2100~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~446 Pleasant Valley Rd~~ | ~~South Windsor~~ | ~~CT~~ | ~~06074~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/22/2026~~

Aggregate Contributions: ~~$150.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Mielke~~ | ~~Ruth~~ | | ~~2101~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~23 Valhalla Ave~~ | ~~Ormond Beach~~ | ~~FL~~ | |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$20.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/22/2026~~

Aggregate Contributions: ~~$40.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~E Kimmich~~ | ~~Daniela~~ | | ~~2102~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~93 Dry Hill Rd~~ | ~~Norwalk~~ | ~~CT~~ | ~~06851~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/22/2026~~

Aggregate Contributions: ~~$10.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Coffey | David | | 2085 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 25 Springside Ave | New Haven | CT | 06515 |

| Principal Occupation | Name of Employer |
|---|---|
| Educator | Guitar Center |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $27.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/22/2026

Aggregate Contributions: $114.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Erenhouse | Amory | | 2086 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 2020 Elm St | Stratford | CT | 06615 |

| Principal Occupation | Name of Employer |
|---|---|
| Student | Student |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $30.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/22/2026

Aggregate Contributions: $30.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Munson | Ruth | | 2087 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 30 Verona Ct | Stratford | CT | 06615 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/22/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Sacks | Michael | | 2088 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 29 Candlewood Ln | Avon | CT | 06001 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $200.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/22/2026

Aggregate Contributions: $200.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Abel** | **Jenny** | | **2089** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **49 Maple Ave** | **Collinsville** | **CT** | **06019** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retail Sales Associate** | **Earth Tones LLC** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/22/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **LaCamera** | **Ann** | | **2090** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **27 Charlton Hill Rd** | **Hamden** | **CT** | **06518** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/22/2026**

Aggregate Contributions: **$75.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Cunningham** | **Evelyn** | | **2091** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **14 Snowberry Ln** | **Wilton** | **CT** | **06897** |

| Principal Occupation | Name of Employer |
|---|---|
| **Librarian** | **City of Norwalk** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/22/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Stacie** | **Mary** | | **2092** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **145 Westerly Ter** | **East Hartford** | **CT** | **06118** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retiredp** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/22/2026**

Aggregate Contributions: **$10.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Story | Elisabeth | | 2093 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 44 Pine Hill Ave | Norwalk | CT | 06855 |

| Principal Occupation | Name of Employer |
|---|---|
| Librarian | Norwalk Public Library CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/22/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Oatis | Ben | | 2094 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 12 Fairfield Ter | Norwalk | CT | 06851 |

| Principal Occupation | Name of Employer |
|---|---|
| physical therapist | Professional Physical Therapy |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/22/2026

Aggregate Contributions: $10.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Morelli | Meaghan | | 2095 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 33 Kalan Cir | Fairfield | CT | 06824 |

| Principal Occupation | Name of Employer |
|---|---|
| Marketing | Self |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/22/2026

Aggregate Contributions: $10.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cattaneo | Stefania | | 2096 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 76 Rock Spring Rd Unit C2 | Stamford | CT | 06906 |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/22/2026

Aggregate Contributions: $5.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Miller** | **Brian** | | **2097** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **11 Olson Rd** | **Canton** | **CT** | **06019** |

| Principal Occupation | Name of Employer |
|---|---|
| **Insurance** | **No** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/22/2026**

Aggregate Contributions: **$75.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Vogel** | **Michael** | | **2098** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **580 Cherry Brook Rd** | **Canton** | **CT** | **06019** |

| Principal Occupation | Name of Employer |
|---|---|
| **Attorney** | **Allegaert Berger & Vogel LLP** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/22/2026**

Aggregate Contributions: **$300.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Erenhouse** | **Ryan** | | **2099** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **2020 Elm St** | **Stratford** | **CT** | **06615** |

| Principal Occupation | Name of Employer |
|---|---|
| **Marketing and communications** | **Dechert LLP** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/22/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Favreau** | **Janice** | | **2100** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **446 Pleasant Valley Rd** | **South Windsor** | **CT** | **06074** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/22/2026**

Aggregate Contributions: **$100.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Mielke** | **Ruth** | | **2101** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **23 Valhalla Ave** | **Ormond Beach** | **FL** | |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$20.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/22/2026**

Aggregate Contributions: **$20.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **E Kimmich** | **Daniela** | | **2102** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **93 Dry Hill Rd** | **Norwalk** | **CT** | **06851** |

| Principal Occupation | Name of Employer |
|---|---|
| **College Counselor** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/22/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Wilkinson~~ | ~~Marcus~~ | | ~~2069~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~69 Lake Ridge Dr~~ | ~~Marlborough~~ | ~~CT~~ | ~~06447~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/23/2026~~

Aggregate Contributions: ~~$20.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Shere~~ | ~~Victoria~~ | | ~~2070~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~581A Heritage Vlg~~ | ~~Southbury~~ | ~~CT~~ | ~~06488~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/23/2026~~

Aggregate Contributions: ~~$100.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Penn-Gesek~~ | ~~Tyra~~ | | ~~2071~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~28 Blain Rd~~ | ~~North Grosvenordale~~ | ~~CT~~ | ~~06255~~ |

Principal Occupation:

Name of Employer: ~~Town of Thompson~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/23/2026~~

Aggregate Contributions: ~~$75.00~~

~~$25.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Aho~~ | ~~Heather~~ | | ~~2072~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~9 Forest Rd~~ | ~~Weston~~ | ~~CT~~ | ~~06883~~ |

Principal Occupation:

Name of Employer: ~~Direct wines inc~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/23/2026~~

Aggregate Contributions: ~~$300.00~~

~~$150.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Merrick~~ | ~~Heather~~ | | ~~2073~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~21 Woodycrest Dr~~ | ~~East Hartford~~ | ~~CT~~ | ~~06118~~ |

Principal Occupation:

Name of Employer: ~~Pratt and Whitney~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/23/2026~~

Aggregate Contributions: ~~$200.00~~

~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Shaddox~~ | ~~Colleen~~ | | ~~2074~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~22 Warner Rd~~ | ~~East Haddam~~ | ~~CT~~ | ~~06423~~ |

Principal Occupation:

Name of Employer: ~~Quicksilver Communication~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/23/2026~~

Aggregate Contributions: ~~$300.00~~

~~$50.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Krzmarzick~~ | ~~Jamie~~ | | ~~2075~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~73 Lexington Gdns~~ | ~~North Haven~~ | ~~CT~~ | ~~06473~~ |

Principal Occupation:

Name of Employer: ~~Sevi Health~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/23/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Novicki~~ | ~~Margaret~~ | | ~~2076~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~51 Center Road Cir~~ | ~~Orange~~ | ~~CT~~ | ~~06477~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/23/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Rameikas~~ | ~~Kevin~~ | | ~~2077~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~434 Colonial St~~ | ~~Oakville~~ | ~~CT~~ | ~~06779~~ |

Principal Occupation:

Name of Employer: ~~None~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/23/2026~~

Aggregate Contributions: ~~$150.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Gerami~~ | ~~Puya~~ | | ~~2078~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~750 Quinnipiac Ave~~ | ~~New Haven~~ | ~~CT~~ | ~~06513~~ |

Principal Occupation:

Name of Employer: ~~City University of New York~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/23/2026~~

Aggregate Contributions: ~~$200.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Brantley~~ | ~~John~~ | | ~~2079~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~15 Cobblestone Dr~~ | ~~Hamden~~ | ~~CT~~ | ~~06518~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Connecticut~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/23/2026~~ | ~~$300.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Barr~~ | ~~Michael~~ | | ~~2080~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~26 Abedar Ln~~ | ~~Latham~~ | ~~NY~~ | ~~12110~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Insurance~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$90.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/23/2026~~ | ~~$530.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Henebery~~ | ~~Farrellin~~ | | ~~2081~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~125 Belden St~~ | ~~Watertown~~ | ~~CT~~ | ~~06795~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Waterbury Hospital~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/23/2026~~ | ~~$50.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Grobe~~ | ~~Ruth~~ | | ~~2082~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~10 Hearthstone Ln~~ | ~~Farmington~~ | ~~CT~~ | ~~06032~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Homemaker~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/23/2026~~ | ~~$300.00~~ |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Tonda~~ | ~~Farida~~ | | ~~2083~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~12 Iroquois Rd~~ | ~~West Hartford~~ | ~~CT~~ | ~~06117~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/23/2026~~ | ~~$10.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Aalami~~ | ~~Florian~~ | | ~~2084~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~23 Spring Lake Rd~~ | ~~Sherman~~ | ~~CT~~ | ~~06784~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Visicon Inc.~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$340.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/23/2026~~ | ~~$680.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Penn-Gesek** | **Tyra** | | **2071** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **28 Blain Rd** | **North Grosvenordale** | **CT** | **06255** |

| Principal Occupation | Name of Employer |
|---|---|
| **Director of Planning & Development** | **Town of Thompson** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| **02/23/2026** | **$50.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Wilkinson** | **Marcus** | | **2069** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **69 Lake Ridge Dr** | **Marlborough** | **CT** | **06447** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| **02/23/2026** | **$10.00** |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Shere** | **Victoria** | | **2070** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **581A Heritage Vlg** | **Southbury** | **CT** | **06488** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/23/2026**

Aggregate Contributions: **$50.00**

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~**Penn-Gesek**~~ | ~~**Tyra**~~ | | ~~**2071**~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~**28 Blain Rd**~~ | ~~**North Grosvenordale**~~ | ~~**CT**~~ | ~~**06255**~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~**Director of Planning & Development**~~ | ~~**Town of Thompson**~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~**$25.00**~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~**02/23/2026**~~

Aggregate Contributions: ~~**$50.00**~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Aho** | **Heather** | | **2072** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **9 Forest Rd** | **Weston** | **CT** | **06883** |

| Principal Occupation | Name of Employer |
|---|---|
| **Marketing** | **Direct wines inc** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$150.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/23/2026**

Aggregate Contributions: **$150.00**

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Merrick** | **Heather** | | **2073** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **21 Woodycrest Dr** | **East Hartford** | **CT** | **06118** |

| Principal Occupation | Name of Employer |
|---|---|
| **Machinist** | **Pratt and Whitney** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/23/2026**

Aggregate Contributions: **$100.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Shaddox** | **Colleen** | | **2074** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **22 Warner Rd** | **East Haddam** | **CT** | **06423** |

| Principal Occupation | Name of Employer |
|---|---|
| **Writer** | **Quicksilver Communication** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/23/2026**

Aggregate Contributions: **$250.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Krzmarzick** | **Jamie** | | **2075** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **73 Lexington Gdns** | **North Haven** | **CT** | **06473** |

| Principal Occupation | Name of Employer |
|---|---|
| **Nurse practitioner** | **Sevi Health** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/23/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Novicki** | **Margaret** | | **2076** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **51 Center Road Cir** | **Orange** | **CT** | **06477** |

| Principal Occupation | Name of Employer |
|---|---|
| **Registrar of Voters** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/23/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Rameikas** | **Kevin** | | **2077** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **434 Colonial St** | **Oakville** | **CT** | **06779** |

| Principal Occupation | Name of Employer |
|---|---|
| **Repair** | **None** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/23/2026**

Aggregate Contributions: **$75.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Gerami | Puya | | 2078 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 750 Quinnipiac Ave | New Haven | CT | 06513 |

| Principal Occupation | Name of Employer |
|---|---|
| Professor | City University of New York |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/23/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Brantley | John | | 2079 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 15 Cobblestone Dr | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| Realtor/photographer | Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/23/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Barr | Michael | | 2080 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 26 Abedar Ln | Latham | NY | 12110 |

| Principal Occupation | Name of Employer |
|---|---|
| Actuary | Insurance |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $90.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/23/2026

Aggregate Contributions: $440.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Henebery | Farrellin | | 2081 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 125 Belden St | Watertown | CT | 06795 |

| Principal Occupation | Name of Employer |
|---|---|
| RN | Waterbury Hospital |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/23/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Grobe** | **Ruth** | | **2082** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **10 Hearthstone Ln** | **Farmington** | **CT** | **06032** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Homemaker** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$150.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/23/2026**

Aggregate Contributions: **$150.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Tonda** | **Farida** | | **2083** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **12 Iroquois Rd** | **West Hartford** | **CT** | **06117** |

| Principal Occupation | Name of Employer |
|---|---|
| **Lawyer** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/23/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Aalami** | **Florian** | | **2084** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **23 Spring Lake Rd** | **Sherman** | **CT** | **06784** |

| Principal Occupation | Name of Employer |
|---|---|
| **Tech entrepeneur** | **Visicon Inc.** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$340.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/23/2026**

Aggregate Contributions: **$340.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Maier** | **Sage** | | **2068** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **66 Freestone Ave** | **Portland** | **CT** | **06480** |

| Principal Occupation | Name of Employer |
|---|---|
| **Social Worker** | **Elderly Housing Management Inc** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/24/2026**

Aggregate Contributions: **$10.00**

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Eastwood** | **Valerie** | | **2063** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **10 Haven Dr** | **Granby** | **CT** | **06035** |

| Principal Occupation | Name of Employer |
|---|---|
| **General Counsel & Chief Compliance Officer** | **MED-EL Corp** |

| Is contributor a principal of a state contractor or prospective state contractor? | Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | Amount of Contribution |
|---|---|---|
| ☐ Yes ☒ No | ☐ Yes ☒ No | |
| If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative | | |

| Is this contribution associated with an event reported in Section J1? | Method of contribution: | Date Received | Aggregate Contributions | |
|---|---|---|---|---|
| ☐ Yes ☒ No | ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card | **02/24/2026** | **$100.00** | **$50.00** |
| If yes, list Event # | | | | |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Walker~~ | ~~Samuel~~ | | ~~2053~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~151 Lead Mine Brook Rd~~ | ~~Harwinton~~ | ~~CT~~ | ~~06791~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Stew Jones Restoration~~ |

| Is contributor a principal of a state contractor or prospective state contractor? | Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | Amount of Contribution |
|---|---|---|
| ☐ Yes ☒ No | ☐ Yes ☐ No | |
| If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative | | |

| Is this contribution associated with an event reported in Section J1? | Method of contribution: | Date Received | Aggregate Contributions | |
|---|---|---|---|---|
| ☐ Yes ☐ No | ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card | ~~02/24/2026~~ | ~~$10.00~~ | ~~$5.00~~ |
| If yes, list Event # | | | | |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Echlin~~ | ~~Celeste~~ | | ~~2054~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~151 Lead Mine Brook Rd~~ | ~~Harwinton~~ | ~~CT~~ | ~~06791~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

| Is contributor a principal of a state contractor or prospective state contractor? | Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | Amount of Contribution |
|---|---|---|
| ☐ Yes ☒ No | ☐ Yes ☐ No | |
| If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative | | |

| Is this contribution associated with an event reported in Section J1? | Method of contribution: | Date Received | Aggregate Contributions | |
|---|---|---|---|---|
| ☐ Yes ☐ No | ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card | ~~02/24/2026~~ | ~~$10.00~~ | ~~$5.00~~ |
| If yes, list Event # | | | | |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Trimble-Shapiro~~ | ~~Jackie~~ | | ~~2055~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~135 Putnam Ave~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CT~~ |

| Is contributor a principal of a state contractor or prospective state contractor? | Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | Amount of Contribution |
|---|---|---|
| ☐ Yes ☒ No | ☐ Yes ☐ No | |
| If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative | | |

| Is this contribution associated with an event reported in Section J1? | Method of contribution: | Date Received | Aggregate Contributions | |
|---|---|---|---|---|
| ☐ Yes ☐ No | ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card | ~~02/24/2026~~ | ~~$50.00~~ | ~~$25.00~~ |
| If yes, list Event # | | | | |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Grey~~ | ~~Alexander~~ | | ~~2056~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~414 Warrenville Rd Apt~~ | ~~Mansfield~~ | ~~CT~~ | ~~06250~~ |

Principal Occupation:

Name of Employer: ~~Serco NA~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/24/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Leavy~~ | ~~Ed~~ | | ~~2057~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~27 Jay St~~ | ~~New London~~ | ~~CT~~ | |

Principal Occupation:

Name of Employer: ~~CT~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/24/2026~~

Aggregate Contributions: ~~$200.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Klimpl~~ | ~~Timothy~~ | | ~~2058~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~109 Benedict Hill Rd~~ | ~~New Canaan~~ | ~~CT~~ | ~~06840~~ |

Principal Occupation:

Name of Employer: ~~Klimpl Benefits Law PLLC~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/24/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Shefer~~ | ~~Ashlee~~ | | ~~2059~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~23 Linda Ave~~ | ~~Uncasville~~ | ~~CT~~ | ~~06382~~ |

Principal Occupation:

Name of Employer: ~~Barks & Recreation~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/24/2026~~

Aggregate Contributions: ~~$150.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Goodwin~~ | ~~Margaret~~ | | ~~2060~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~246 Peck Ave~~ | ~~West Haven~~ | ~~CT~~ | ~~06516~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/24/2026~~

Aggregate Contributions: ~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~DeAngelo~~ | ~~Rebecca~~ | | ~~2061~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~72 Shore Dr~~ | ~~Branford~~ | ~~CT~~ | ~~06405~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Peabody Museum~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/24/2026~~

Aggregate Contributions: ~~$20.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Chapman~~ | ~~Ginger~~ | | ~~2062~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~288 Ogden St~~ | ~~New Haven~~ | ~~CT~~ | ~~06511~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/24/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Eastwood~~ | ~~Valerie~~ | | ~~2063~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~10 Haven Drive~~ | ~~Granby~~ | ~~CT~~ | ~~06035~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~MED-EL Corp~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/24/2026~~

Aggregate Contributions: ~~$150.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Conklin~~ | ~~James~~ | | ~~2064~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~9 Steven Ct~~ | ~~New Milford~~ | ~~CT~~ | ~~06776~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/24/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Conklin~~ | ~~Ellen~~ | | ~~2065~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~9 Steven Ct~~ | ~~New Milford~~ | ~~CT~~ | ~~06776~~ |

Principal Occupation:

Name of Employer: ~~Willis Towers Watson~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/24/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Waldron~~ | ~~Mary~~ | | ~~2066~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~30 Bokum Rd # 103~~ | ~~Essex~~ | ~~CT~~ | ~~06426~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/24/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Madore~~ | ~~Paul~~ | | ~~2067~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~63 Greenwoods Rd E~~ | ~~Norfolk~~ | ~~CT~~ | ~~06058~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/24/2026~~

Aggregate Contributions: ~~$100.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Maier~~ | ~~Sage~~ | | ~~2068~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~66 Freestone Ave~~ | ~~Portland~~ | ~~CT~~ | ~~06480~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Elderly Housing Management Inc~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/24/2026~~ | ~~$15.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Walker** | **Samuel** | | **2053** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **151 Lead Mine Brook Rd** | **Harwinton** | **CT** | **06791** |

| Principal Occupation | Name of Employer |
|---|---|
| **Mechanic/Fabricator** | **Stew Jones Restoration** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| **02/24/2026** | **$5.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Echlin** | **Celeste** | | **2054** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **151 Lead Mine Brook Rd** | **Harwinton** | **CT** | **06791** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| **02/24/2026** | **$5.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Trimble Shapiro** | **Jackie** | | **2055** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **135 Putnam Ave** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| **02/24/2026** | **$25.00** |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Grey** | **Alexander** | | **2056** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **414 Warrenville Rd Apt** | **Mansfield** | **CT** | **06250** |

| Principal Occupation | Name of Employer |
|---|---|
| **Program Manager** | **Serco-NA** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/24/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Leavy** | **Ed** | | **2057** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **27 Jay St** | **New London** | **CT** | |

| Principal Occupation | Name of Employer |
|---|---|
| **union representative** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/24/2026**

Aggregate Contributions: **$100.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Klimpl** | **Timothy** | | **2058** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **109 Benedict Hill Rd** | **New Canaan** | **CT** | **06840** |

| Principal Occupation | Name of Employer |
|---|---|
| **Attorney** | **Klimpl Benefits Law PLLC** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/24/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Shefer** | **Ashlee** | | **2059** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **23 Linda Ave** | **Uncasville** | **CT** | **06382** |

| Principal Occupation | Name of Employer |
|---|---|
| **Team Trainer** | **Barks & Recreation** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/24/2026**

Aggregate Contributions: **$75.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Goodwin** | **Margaret** | | **2060** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **246 Peck Ave** | **West Haven** | **CT** | **06516** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/24/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **DeAngelo** | **Rebecca** | | **2061** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **72 Shore Dr** | **Branford** | **CT** | **06405** |

| Principal Occupation | Name of Employer |
|---|---|
| **Museaum Assistant** | **Peabody Museum** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/24/2026**

Aggregate Contributions: **$10.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Chapman** | **Ginger** | | **2062** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **288 Ogden St** | **New Haven** | **CT** | **06511** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/24/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~**Eastwood**~~ | ~~**Valerie**~~ | | ~~**2063**~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~**10 Haven Drice**~~ | ~~**Granby**~~ | ~~**CT**~~ | ~~**06035**~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~**General Counsel & Chief Compliance Officer**~~ | ~~**MED-EL Corp**~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~**$50.00**~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~**02/24/2026**~~

Aggregate Contributions: ~~**$100.00**~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Conklin** | **James** | | **2064** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **9 Steven Ct** | **New Milford** | **CT** | **06776** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/24/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Conklin** | **Ellen** | | **2065** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **9 Steven Ct** | **New Milford** | **CT** | **06776** |

| Principal Occupation | Name of Employer |
|---|---|
| **Management Consultant** | **Willis Towers Watson** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/24/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Waldron** | **Mary** | | **2066** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **30 Bokum Rd # 103** | **Essex** | **CT** | **06426** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/24/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Madore** | **Paul** | | **2067** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **63 Greenwoods Rd E** | **Norfolk** | **CT** | **06058** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/24/2026**

Aggregate Contributions: **$50.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Maier~~ | ~~Sage~~ | | ~~2068~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~66 Freestone Ave~~ | ~~Portland~~ | ~~CT~~ | ~~06480~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Social Worker~~ | ~~Elderly Housing Management Inc~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/24/2026~~

Aggregate Contributions: ~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Goulart~~ | ~~Jeanne~~ | | ~~2020~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~35 Bishop Rd~~ | ~~Bozrah~~ | ~~CT~~ | ~~06334~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~university of Hartford~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/25/2026~~

Aggregate Contributions: ~~$55.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~lim~~ | ~~junhyun~~ | | ~~2021~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~500 Bedford St Apt~~ | ~~Stamford~~ | ~~CT~~ | ~~06901~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Valitana~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$20.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/25/2026~~

Aggregate Contributions: ~~$40.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Kaza~~ | ~~Akash~~ | | ~~2022~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~2 Nutmeg Ct~~ | ~~Simsbury~~ | ~~CT~~ | ~~06070~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Luke Bronin for Congress~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/25/2026~~

Aggregate Contributions: ~~$50.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Cahoon~~ | ~~Kaleb~~ | | ~~2023~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1033 Whalley Ave~~ | ~~New Haven~~ | ~~CT~~ | ~~06515~~ |

Principal Occupation:

Name of Employer: ~~Wallingford Public Library~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/25/2026~~

Aggregate Contributions: ~~$125.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Sanchione~~ | ~~Louise~~ | | ~~2024~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~315 Eastern St .~~ | ~~New Haven~~ | ~~CT~~ | ~~06513~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/25/2026~~

Aggregate Contributions: ~~$25.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Lombardi~~ | ~~Jennifer~~ | | ~~2025~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~29 Falknor Dr~~ | ~~Manchester~~ | ~~CT~~ | ~~06040~~ |

Principal Occupation:

Name of Employer: ~~State of CT Department of Mental Health and Addict~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/25/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Bashevkin~~ | ~~Rachel~~ | | ~~2026~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~135 Cleveland Rd~~ | ~~New Haven~~ | ~~CT~~ | ~~06515~~ |

Principal Occupation:

Name of Employer: ~~retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$190.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/25/2026~~

Aggregate Contributions: ~~$680.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Huang~~ | ~~Sarah~~ | | ~~2027~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~10 W Haycock Point Rd~~ | ~~Branford~~ | ~~CT~~ | ~~06405~~ |

Principal Occupation:

Name of Employer: ~~None~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/25/2026~~

Aggregate Contributions: ~~$225.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Sartori~~ | ~~John~~ | | ~~2028~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~126 Elmfield St~~ | ~~West Hartford~~ | ~~CT~~ | ~~06110~~ |

Principal Occupation:

Name of Employer: ~~Kinsley Group~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/25/2026~~

Aggregate Contributions: ~~$125.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Hayes~~ | ~~Christine~~ | | ~~2029~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~61 Carmalt Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

Principal Occupation:

Name of Employer: ~~CT~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/25/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Pfeffer~~ | ~~Allison~~ | | ~~2030~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~64 Garfield St~~ | ~~Newington~~ | ~~CT~~ | ~~06111~~ |

Principal Occupation:

Name of Employer: ~~Connecticut Children,Äôs Medical Center~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/25/2026~~

Aggregate Contributions: ~~$50.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Smith~~ | ~~Deborah~~ | | ~~2031~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~87 E Gate Ln~~ | ~~Hamden~~ | ~~CT~~ | ~~06514~~ |

Principal Occupation:

Name of Employer: ~~retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/25/2026~~

Aggregate Contributions: ~~$150.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Teitleman~~ | ~~Alan~~ | | ~~2032~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~408 Whitney Ave~~ | ~~New Haven~~ | ~~CT~~ | ~~06511~~ |

Principal Occupation:

Name of Employer: ~~State of CT~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/25/2026~~

Aggregate Contributions: ~~$150.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Trama~~ | ~~Tim~~ | | ~~2033~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~36 Spring Garden St~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

Principal Occupation:

Name of Employer: ~~Hamden Board of Education~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/25/2026~~

Aggregate Contributions: ~~$250.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Krantz~~ | ~~Danielle~~ | | ~~2034~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~143 Hoyt St~~ | ~~Stamford~~ | ~~CT~~ | ~~06905~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/25/2026~~

Aggregate Contributions: ~~$200.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Vieira~~ | ~~Natalie~~ | | ~~2035~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1524 1st Ave~~ | ~~Oakland~~ | ~~CA~~ | ~~94606~~ |

Principal Occupation:

Name of Employer: ~~Building Impact Partners~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$190.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/25/2026~~

Aggregate Contributions: ~~$530.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Brunson~~ | ~~Jeremiah~~ | | ~~2036~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~57 First St~~ | ~~Hamden~~ | ~~CT~~ | ~~06514~~ |

Principal Occupation:

Name of Employer: ~~Burt Law Office~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/25/2026~~

Aggregate Contributions: ~~$75.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Savvidou~~ | ~~Samantha~~ | | ~~2037~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~78 Laning St~~ | ~~Southington~~ | ~~CT~~ | ~~06489~~ |

Principal Occupation:

Name of Employer: ~~CT Department of Transportation~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/25/2026~~

Aggregate Contributions: ~~$20.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~White~~ | ~~Marissa~~ | | ~~2038~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~19 Susan Ln~~ | ~~Southington~~ | ~~CT~~ | ~~06489~~ |

Principal Occupation:

Name of Employer: ~~Marissa Manzi, LCSW, LLC~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/25/2026~~

Aggregate Contributions: ~~$375.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Webster~~ | ~~Tyler~~ | | ~~2039~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~6 17 Forest Glen Cir~~ | ~~Middletown~~ | ~~CT~~ | ~~06457~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Bristol Public Schools~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/25/2026~~

Aggregate Contributions: ~~$225.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Connolly~~ | ~~Sally~~ | | ~~2040~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~249 Newton Rd~~ | ~~Woodbridge~~ | ~~CT~~ | ~~06525~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/25/2026~~

Aggregate Contributions: ~~$150.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~McCallister~~ | ~~Scott~~ | | ~~2041~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~7 Darrows Ct~~ | ~~East Lyme~~ | ~~CT~~ | ~~06333~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~ViiV Healthcare~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$340.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/25/2026~~

Aggregate Contributions: ~~$680.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Koth~~ | ~~Michelle~~ | | ~~2042~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~40 Ralston Ave~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~N/A~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/25/2026~~

Aggregate Contributions: ~~$200.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Pilson~~ | ~~Arthur~~ | | ~~2043~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~163 South St~~ | ~~Danbury~~ | ~~CT~~ | ~~06810~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/25/2026~~ | ~~$200.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Louis~~ | ~~Rosalie~~ | | ~~2044~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~233 Santa Fe Ave~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~LTKE Law~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/25/2026~~ | ~~$50.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~VanStone~~ | ~~Laurel~~ | | ~~2045~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~306 S Orchard St~~ | ~~Wallingford~~ | ~~CT~~ | ~~06492~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/25/2026~~ | ~~$10.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Kozin~~ | ~~Jacqueline~~ | | ~~2046~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~235 E River Dr # 202~~ | ~~East Hartford~~ | ~~CT~~ | ~~06108~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~J.Ko Consulting Group~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/25/2026~~ | ~~$100.00~~ |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Sponzo~~ | ~~Stephanie~~ | | ~~2047~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~56 Old Horse Hill Rd~~ | ~~Westbrook~~ | ~~CT~~ | ~~06498~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| ~~02/25/2026~~ | ~~$100.00~~ | ~~$50.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~McGary~~ | ~~Nikki~~ | | ~~2048~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~36 E Maxwell Dr .~~ | ~~West Hartford~~ | ~~CT~~ | ~~06107~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CT State CC~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| ~~02/25/2026~~ | ~~$150.00~~ | ~~$75.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Filippetti~~ | ~~Joe~~ | | ~~2049~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~11 Hillcrest Dr~~ | ~~Waterford~~ | ~~CT~~ | ~~06385~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CVSHEALTH~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| ~~02/25/2026~~ | ~~$10.00~~ | ~~$5.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~E Romano~~ | ~~Gina~~ | | ~~2050~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1 Terrace Dr~~ | ~~Sherman~~ | ~~CT~~ | ~~06784~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Omano Cybersecurity~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| ~~02/25/2026~~ | ~~$175.00~~ | ~~$75.00~~ |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Bertolini~~ | ~~Peter~~ | | ~~2051~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~33 Parker Ave~~ | ~~West Haven~~ | ~~CT~~ | ~~06516~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~State of CT applied for retirement~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/25/2026~~

Aggregate Contributions: ~~$104.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Vendredi~~ | ~~Jasmine~~ | | ~~2052~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~95 Lyman St~~ | ~~New Britain~~ | ~~CT~~ | ~~06503~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Connecticut~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/25/2026~~

Aggregate Contributions: ~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Sanchione** | **Louise** | | **2024** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **315 Eastern St .** | **New Haven** | **CT** | **06513** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/25/2026**

Aggregate Contributions: **$15.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Webster** | **Tyler** | | **2039** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **6-17 Forest Glen Cir** | **Middletown** | **CT** | **06066** |

| Principal Occupation | Name of Employer |
|---|---|
| **Occupational Therapist** | **Bristol Public Schools** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/25/2026**

Aggregate Contributions: **$150.00**

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **White** | **Marissa** | | **2038** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **19 Susan Ln** | **Southington** | **CT** | **06489** |

| Principal Occupation | Name of Employer |
|---|---|
| **Mental Health Conultant** | **Marissa Manzi, LCSW, LLC** |

| Is contributor a principal of a state contractor or prospective state contractor? | Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | Amount of Contribution |
|---|---|---|
| ☐ Yes ☒ No | ☐ Yes ☒ No | |
| If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative | | |

| Is this contribution associated with an event reported in Section J1? | Method of contribution: | Date Received | Aggregate Contributions |
|---|---|---|---|
| ☐ Yes ☒ No | ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card | **02/25/2026** | **$300.00** |
| If yes, list Event # | | | |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Huang** | **Sarah** | | **2027** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **10 W Haycock Point Rd** | **Branford** | **CT** | **06405** |

| Principal Occupation | Name of Employer |
|---|---|
| **Director of Equity and Environmental Justice** | **CT DEEP** |

| Is contributor a principal of a state contractor or prospective state contractor? | Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | Amount of Contribution |
|---|---|---|
| ☐ Yes ☒ No | ☐ Yes ☒ No | |
| If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative | | |

| Is this contribution associated with an event reported in Section J1? | Method of contribution: | Date Received | Aggregate Contributions |
|---|---|---|---|
| ☐ Yes ☒ No | ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card | **02/25/2026** | **$150.00** |
| If yes, list Event # | | | |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Hayes** | **Christine** | | **2029** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **61 Carmalt Rd** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Education** | **CT** |

| Is contributor a principal of a state contractor or prospective state contractor? | Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | Amount of Contribution |
|---|---|---|
| ☐ Yes ☒ No | ☐ Yes ☒ No | |
| If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative | | |

| Is this contribution associated with an event reported in Section J1? | Method of contribution: | Date Received | Aggregate Contributions |
|---|---|---|---|
| ☐ Yes ☒ No | ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card | **02/25/2026** | **$50.00** |
| If yes, list Event # | | | |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Pfeffer** | **Allison** | | **2030** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **64 Garfield St** | **Newington** | **CT** | **06111** |

| Principal Occupation | Name of Employer |
|---|---|
| **Nurse** | **Connecticut Children,Äôs Medical Center** |

| Is contributor a principal of a state contractor or prospective state contractor? | Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | Amount of Contribution |
|---|---|---|
| ☐ Yes ☒ No | ☐ Yes ☒ No | |
| If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative | | |

| Is this contribution associated with an event reported in Section J1? | Method of contribution: | Date Received | Aggregate Contributions |
|---|---|---|---|
| ☐ Yes ☒ No | ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card | **02/25/2026** | **$25.00** |
| If yes, list Event # | | | |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Smith | Deborah | | 2031 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 87 E Gate Ln | Hamden | CT | 06514 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/25/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Teitleman | Alan | | 2032 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 408 Whitney Ave | New Haven | CT | 06511 |

| Principal Occupation | Name of Employer |
|---|---|
| Professor | State of CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/25/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Trama | Tim | | 2033 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 36 Spring Garden St | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | Hamden Board of Education |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/25/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Krantz | Danielle | | 2034 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 143 Hoyt St | Stamford | CT | 06905 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/25/2026

Aggregate Contributions: $100.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Vieira** | **Natalie** | | **2035** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **1524 1st Ave** | **Oakland** | **CA** | **94606** |

| Principal Occupation | Name of Employer |
|---|---|
| **Strategic Support Lead** | **Building Impact Partners** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$190.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/25/2026**

Aggregate Contributions: **$340.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Brunson** | **Jeremiah** | | **2036** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **57 First St** | **Hamden** | **CT** | **06514** |

| Principal Occupation | Name of Employer |
|---|---|
| **Legal Assistant** | **Burt Law Office** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/25/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Savvidou** | **Samantha** | | **2037** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **78 Laning St** | **Southington** | **CT** | **06489** |

| Principal Occupation | Name of Employer |
|---|---|
| **Transportation Planner** | **CT Department of Transportation** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/25/2026**

Aggregate Contributions: **$10.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~**White**~~ | ~~**Marissa**~~ | | ~~**2038**~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~**19 Susan Ln**~~ | ~~**Southington**~~ | ~~**CT**~~ | ~~**06489**~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~**Mental Health Conultant**~~ | ~~**Marissa Manzi, LCSW, LLC**~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~**$75.00**~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~**02/25/2026**~~

Aggregate Contributions: ~~**$300.00**~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Webster~~ | ~~Tyler~~ | | ~~2039~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~6 17 Forest Glen Cir~~ | ~~Middletown~~ | ~~CT~~ | ~~06457~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Occupational Therapist~~ | ~~Bristol Public Schools~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/25/2026~~ | ~~$150.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Connolly | Sally | | 2040 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 249 Newton Rd | Woodbridge | CT | 06525 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 02/25/2026 | $75.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McCallister | Scott | | 2041 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 7 Darrows Ct | East Lyme | CT | 06333 |

| Principal Occupation | Name of Employer |
|---|---|
| Physician | ViiV Healthcare |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $340.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 02/25/2026 | $340.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Koth | Michelle | | 2042 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 40 Ralston Ave | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | N/A |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 02/25/2026 | $125.00 |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Pilson** | **Arthur** | | **2043** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **163 South St** | **Danbury** | **CT** | **06810** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/25/2026**

Aggregate Contributions: **$150.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Louis** | **Rosalie** | | **2044** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **233 Santa Fe Ave** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Attorney** | **LTKE Law** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/25/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **VanStone** | **Laurel** | | **2045** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **306 S Orchard St** | **Wallingford** | **CT** | **06492** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/25/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Kozin** | **Jacqueline** | | **2046** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **235 E River Dr # 202** | **East Hartford** | **CT** | **06108** |

| Principal Occupation | Name of Employer |
|---|---|
| **Political Consultant** | **J.Ko Consulting Group** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/25/2026**

Aggregate Contributions: **$50.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Sponzo | Stephanie | | 2047 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 56 Old Horse Hill Rd | Westbrook | CT | 06498 |

| Principal Occupation | Name of Employer |
|---|---|
| Interior Designer | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/25/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McGary | Nikki | | 2048 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 36 E Maxwell Dr . | West Hartford | CT | 06107 |

| Principal Occupation | Name of Employer |
|---|---|
| Professor | CT State CC |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/25/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Filippetti | Joe | | 2049 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 11 Hillcrest Dr | Waterford | CT | 06385 |

| Principal Occupation | Name of Employer |
|---|---|
| Project Manager | CVSHEALTH |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/25/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| E Romano | Gina | | 2050 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1 Terrace Dr | Sherman | CT | 06784 |

| Principal Occupation | Name of Employer |
|---|---|
| Manager | Omano Cybersecurity |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/25/2026

Aggregate Contributions: $100.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Bertolini | Peter | | 2051 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 33 Parker Ave | West Haven | CT | 06516 |

| Principal Occupation | Name of Employer |
|---|---|
| LCSW | State of CT-applied for retirement |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 02/25/2026 | $79.00 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Vendredi | Jasmine | | 2052 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 95 Lyman St | New Britain | CT | 06503 |

| Principal Occupation | Name of Employer |
|---|---|
| Union organizer | Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 02/25/2026 | $5.00 | $5.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Goulart | Jeanne | | 2020 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 35 Bishop Rd | Bozrah | CT | 06334 |

| Principal Occupation | Name of Employer |
|---|---|
| Educator | university of Hartford |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 02/25/2026 | $30.00 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| lim | junhyun | | 2021 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 500 Bedford St Apt | Stamford | CT | 06901 |

| Principal Occupation | Name of Employer |
|---|---|
| software engineer | Valitana |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 02/25/2026 | $20.00 | $20.00 |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Kaza | Akash | | 2022 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 2 Nutmeg Ct | Simsbury | CT | 06070 |

| Principal Occupation | Name of Employer |
|---|---|
| camaign manager | Luke Bronin for Congress |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/25/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cahoon | Kaleb | | 2023 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1033 Whalley Ave | New Haven | CT | 06515 |

| Principal Occupation | Name of Employer |
|---|---|
| Library Tech Assistant II | Wallingford Public Library |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/25/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Sanchione~~ | ~~Louise~~ | | ~~2024~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~315 Eastern St .~~ | ~~New Haven~~ | ~~CT~~ | ~~06513~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/25/2026~~

Aggregate Contributions: ~~$20.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Lombardi | Jennifer | | 2025 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 29 Falknor Dr | Manchester | CT | 06040 |

| Principal Occupation | Name of Employer |
|---|---|
| Behavioral Health Program Manager | State of CT Department of Mental Health and Addict |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/25/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Bashevkin** | **Rachel** | | **2026** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **135 Cleveland Rd** | **New Haven** | **CT** | **06515** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$190.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/25/2026**

Aggregate Contributions: **$340.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~**Huang**~~ | ~~**Sarah**~~ | | ~~**2027**~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~**10 W Haycock Point Rd**~~ | ~~**Branford**~~ | ~~**CT**~~ | ~~**06405**~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~**Government**~~ | ~~**None**~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~**$75.00**~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~**02/25/2026**~~

Aggregate Contributions: ~~**$150.00**~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Sartori** | **John** | | **2028** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **126 Elmfield St** | **West Hartford** | **CT** | **06110** |

| Principal Occupation | Name of Employer |
|---|---|
| **Manager** | **Kinsley Group** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/25/2026**

Aggregate Contributions: **$100.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **harper** | **annie** | | **1967** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **58 Anderson St** | **New Haven** | **CT** | **06511** |

| Principal Occupation | Name of Employer |
|---|---|
| **Professor** | **Yale University** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/26/2026**

Aggregate Contributions: **$25.00**

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Rosenberg~~ | ~~Samuel~~ | | ~~1968~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~117 Harmon St~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Student~~ | ~~Yale University~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/26/2026~~ | ~~$100.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Matus | Laurel | | 1969 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1 N Main St | East Granby | CT | 06026 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 02/26/2026 | $10.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Jeter | James | | 1970 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 5 Lisbon St | Hartford | CT | 06106 |

| Principal Occupation | Name of Employer |
|---|---|
| Director | Yale |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $340.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 02/26/2026 | $340.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Bramhall | Susan | | 1971 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 207 Colony Rd | New Haven | CT | 06511 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 02/26/2026 | $75.00 |

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Fisher** | **Andrea** | | **1972** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **120 Village Ln** | **Branford** | **CT** | **06405** |

| Principal Occupation | Name of Employer |
|---|---|
| **Sales** | **Tauck** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/26/2026**

Aggregate Contributions: **$125.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Smith** | **George** | | **1973** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **8 Maplevale Rd** | **East Haven** | **CT** | **06512** |

| Principal Occupation | Name of Employer |
|---|---|
| **Managmement** | **A&G Cleaning Agents LLC** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/26/2026**

Aggregate Contributions: **$225.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Berube** | **Marc** | | **1974** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **531 Highland St** | **Wethersfield** | **CT** | **06109** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/26/2026**

Aggregate Contributions: **$40.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Ferenbach** | **Joanie** | | **1975** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **21 Trout Lake Dr** | **Westbrook** | **CT** | |

| Principal Occupation | Name of Employer |
|---|---|
| **Bookkeeper** | **Angelini Wine Ltd** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$20.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/26/2026**

Aggregate Contributions: **$45.00**

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Allen~~ | ~~Mary~~ | | ~~1976~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~14 Hewitt St~~ | ~~Willimantic~~ | ~~CT~~ | ~~06226~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Professor~~ | ~~UConn~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/26/2026~~ | ~~$20.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Dick | Leslie | | 1977 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 230 Ridgewood Ave | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 02/26/2026 | $30.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Gracey-Edwin | James | | 1978 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 16 Morgan Rd | Canton | CT | 06019 |

| Principal Occupation | Name of Employer |
|---|---|
| unemployed | unemployed |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 02/26/2026 | $75.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Dawson | Christopher | | 1979 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 81 Bangall Rd | Stamford | CT | 06903 |

| Principal Occupation | Name of Employer |
|---|---|
| HR Consultant | HR Lodestar LLC |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 02/26/2026 | $150.00 |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Bourns** | **Courtney** | | **1980** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **24 Saddle Ridge Dr .** | **West Hartford** | **CT** | **06117** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/26/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Kaptain** | **Kathleen** | | **1981** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **413 Ridge Rd** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/26/2026**

Aggregate Contributions: **$125.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~**Menta**~~ | ~~**Anne Marie**~~ | | ~~**1982**~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~**365 Mather St Unit 190**~~ | ~~**Hamden**~~ | ~~**CT**~~ | ~~**06514**~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~**Retired**~~ | ~~**Retired**~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~**$25.00**~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~**02/26/2026**~~

Aggregate Contributions: ~~**$80.00**~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Sanchez** | **Teofilo** | | **1983** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **109 Pease Rd** | **Woodbridge** | **CT** | **06525** |

| Principal Occupation | Name of Employer |
|---|---|
| **No** | **No** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/26/2026**

Aggregate Contributions: **$200.00**

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Strong** | **Julien** | | **1984** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **55 Belmont St** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Professor** | **CCSU** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/26/2026**

Aggregate Contributions: **$152.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Dahl** | **Nancy** | | **1985** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **313 Long Mountain Rd** | **New Milford** | **CT** | **06776** |

| Principal Occupation | Name of Employer |
|---|---|
| **Homemaker** | **Homemaker** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/26/2026**

Aggregate Contributions: **$10.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Jinks** | **Jim** | | **1986** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **244 Academy Rd** | **Cheshire** | **CT** | **06410** |

| Principal Occupation | Name of Employer |
|---|---|
| **Marketing** | **Mediabids** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/26/2026**

Aggregate Contributions: **$200.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Marra** | **Jennifer** | | **1987** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **75 Redwood Dr** | **East Haven** | **CT** | **06513** |

| Principal Occupation | Name of Employer |
|---|---|
| **Project Manager** | **Merck** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/26/2026**

Aggregate Contributions: **$150.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Kaye | Beverly Sue | | 1988 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 15 Lorraine Dr . | Woodbridge | CT | 06525 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $15.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/26/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Martin | Melanie | | 1989 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 10 Glen Ridge Ct | New Milford | CT | 06776 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/26/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Ellner | Abbey | | 1990 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 44 Gordon St | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Wellness Service Coordinator | Western CT Area Agency on Aging |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/26/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Soderholm | Sidney | | 1991 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 46 Pezzente Ln | East Hartford | CT | 06108 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $200.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/26/2026

Aggregate Contributions: $200.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Lendroth** | **Donna** | | **1992** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **63 Augur Road Ext** | **Northford** | **CT** | **06472** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/26/2026**

Aggregate Contributions: **$100.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Blossom** | **Jackson** | | **1993** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **5 Joes Hill Rd** | **Danbury** | **CT** | **06811** |

| Principal Occupation | Name of Employer |
|---|---|
| **Teacher** | **Stamford Public Schools** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/26/2026**

Aggregate Contributions: **$75.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~**Budai**~~ | ~~**Jen**~~ | | ~~**1994**~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~**173 Woodcrest**~~ | ~~**Stratford**~~ | ~~**CT**~~ | |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~**N/A**~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~**$5.00**~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~**02/26/2026**~~

Aggregate Contributions: ~~**$10.00**~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Gishta** | **Ali** | | **1995** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **167 Scott Rd** | **Prospect** | **CT** | **06712** |

| Principal Occupation | Name of Employer |
|---|---|
| **HVAC Technician** | **Ali Gishta** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/26/2026**

Aggregate Contributions: **$75.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Winkler** | **Phyllis** | | **1996** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **20 Gottier Dr** | **Vernon** | **CT** | **06066** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/26/2026**

Aggregate Contributions: **$125.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Molito** | **Justin** | | **1997** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **32 Mile Hill Rd S** | **Newtown** | **CT** | **06470** |

| Principal Occupation | Name of Employer |
|---|---|
| **Director of Organizing** | **WGAE** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$115.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/26/2026**

Aggregate Contributions: **$340.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **McDonough** | **Donna** | | **1998** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **154 Haverford St .** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **RN** | **Yale University** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/26/2026**

Aggregate Contributions: **$125.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Cohen** | **Harold** | | **1999** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **200 Leeder Hill Dr** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/26/2026**

Aggregate Contributions: **$175.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Martin | Tom | | 2000 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 35 Samuel Hill Rd | Columbia | CT | 06237 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $90.00

Is this contribution associated with an event reported in Section J1? ☒ Yes ☐ No

If yes, list Event # 02082026E

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/26/2026

Aggregate Contributions: $390.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Gianini | Donna | | 2001 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 5 Butternut Cir | Avon | CT | 06001 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/26/2026

Aggregate Contributions: $50.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Zimmer | Aaron | | 2002 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 50 Obtuse Hill Rd | Brookfield | CT | 06804 |

| Principal Occupation | Name of Employer |
|---|---|
| Online Retailer | Turntable Revival |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/26/2026

Aggregate Contributions: $100.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Irwin | Shelby | | 2003 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 206 W Todd St | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | Hamden schools |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/26/2026

Aggregate Contributions: $75.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Morgan** | **Collin** | | **2004** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **2 Foley Rd** | **Portland** | **CT** | **06480** |

| Principal Occupation | Name of Employer |
|---|---|
| **software engineer** | **Sonalysts, inc.** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/26/2026**

Aggregate Contributions: **$189.00**

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~**Avenia**~~ | ~~**Jennifer**~~ | | ~~**2005**~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~**34 Dyer Ave**~~ | ~~**Canton**~~ | ~~**CT**~~ | ~~**06019**~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~**Lawyer**~~ | ~~**State of CT**~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~**$18.00**~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~**02/26/2026**~~

Aggregate Contributions: ~~**$36.00**~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~**Balsley**~~ | ~~**Elaine**~~ | | ~~**2006**~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~**63 Tracy Ave**~~ | ~~**Waterbury**~~ | ~~**CT**~~ | ~~**06706**~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~**Director**~~ | ~~**Reachout, Inc.**~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~**$50.00**~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~**02/26/2026**~~

Aggregate Contributions: ~~**$250.00**~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~**Cadiz**~~ | ~~**Cris**~~ | | ~~**2007**~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~**87 North Rd**~~ | ~~**Pomfret Center**~~ | ~~**CT**~~ | ~~**06259**~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~**freelance writer**~~ | ~~**self employed**~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~**$10.00**~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~**02/26/2026**~~

Aggregate Contributions: ~~**$60.00**~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Keegan** | **Stephanie** | | **2008** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **65 Burnwood Dr** | **Bloomfield** | **CT** | **06002** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/26/2026**

Aggregate Contributions: **$100.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Forrester** | **Kerstin** | | **2009** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **104 Underwood Rd** | **Putnam** | **CT** | **06260** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/26/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Heimer** | **Win** | | **2010** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **799 Prospect Ave # A2** | **West Hartford** | **CT** | **06105** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/26/2026**

Aggregate Contributions: **$85.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Woodward** | **Travis** | | **2011** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **1095 W Woods Rd** | **Hamden** | **CT** | |

| Principal Occupation | Name of Employer |
|---|---|
| **Engineer** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/26/2026**

Aggregate Contributions: **$100.00**

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Barton** | **Frank** | | **2012** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **636 Cherry Brook Rd** | **North Canton** | **CT** | **06059** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/26/2026**

Aggregate Contributions: **$110.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Swartz** | **Kyle** | | **2013** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **64 Elika Rd** | **Wallingford** | **CT** | **06492** |

| Principal Occupation | Name of Employer |
|---|---|
| **Editor** | **EPG Media** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/26/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Veit** | **Jennifer** | | **2014** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **56 Goose Ln** | **Tolland** | **CT** | **06084** |

| Principal Occupation | Name of Employer |
|---|---|
| **chiropractor** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/26/2026**

Aggregate Contributions: **$80.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **McNamara** | **John** | | **2015** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **56 Brighton St** | **New Britain** | **CT** | **06053** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$27.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/26/2026**

Aggregate Contributions: **$27.00**

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Dubrow** | **Robert** | | **2016** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **103 Carmalt Rd** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Professor Emeritus** | **Yale University** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$150.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/26/2026**

Aggregate Contributions: **$150.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Gastic** | **Billie** | | **2017** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **12 Toilsome Ave** | **Norwalk** | **CT** | **06851** |

| Principal Occupation | Name of Employer |
|---|---|
| **Provost** | **LaGuardia Community College, CUNY** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$340.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/26/2026**

Aggregate Contributions: **$340.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~**Garrett**~~ | ~~**Daniel**~~ | | ~~**2018**~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~**106 Sherman Ave**~~ | ~~**Hamden**~~ | ~~**CT**~~ | ~~**06518**~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~**Property Manager**~~ | ~~**self**~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~**$50.00**~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~**02/26/2026**~~

Aggregate Contributions: ~~**$225.00**~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Teitleman** | **Alan** | | **2019** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **408 Whitney Ave** | **New Haven** | **CT** | **06511** |

| Principal Occupation | Name of Employer |
|---|---|
| **Professor** | **State of CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$215.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/26/2026**

Aggregate Contributions: **$315.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Budai | Jennifer | | 1994 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 173 Woodcrest Ave | Stratford | CT | 06614 |

| Principal Occupation | Name of Employer |
|---|---|
| Unemployed | Unemployed |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/26/2026

Aggregate Contributions: $10.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Avenia | Jennifer | | 2005 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 34 Dyer Ave | Canton | CT | 06019 |

| Principal Occupation | Name of Employer |
|---|---|
| Director of Immigration Practice | Department of Children and Families, State of CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $18.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/26/2026

Aggregate Contributions: $36.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Balsley | Elaine | | 2006 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 63 Tracy Ave | Waterbury | CT | 06706 |

| Principal Occupation | Name of Employer |
|---|---|
| occupational therapist | Reachout, Inc. |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/26/2026

Aggregate Contributions: $250.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Rosenberg | Samuel | | 1968 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 117 Harmon St | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Student | Student |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/26/2026

Aggregate Contributions: $100.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Garrett** | **Daniel** | | **2018** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **106 Sherman Ave** | **Hamden** | **CT** | **06518** |

| Principal Occupation | Name of Employer |
|---|---|
| **Property Manager** | **Dan Garrett** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/26/2026**

Aggregate Contributions: **$175.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Menta** | **Anne Marie** | | **1982** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **365 Mather St Unit 190** | **Hamden** | **CT** | **06514** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/26/2026**

Aggregate Contributions: **$65.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Allen** | **Mary** | **E** | **1976** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **14 Hewitt St** | **Willimantic** | **CT** | **06226** |

| Principal Occupation | Name of Employer |
|---|---|
| **Professor** | **UConn** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/26/2026**

Aggregate Contributions: **$15.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Smith~~ | ~~George~~ | | ~~1973~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~8 Maplevale Rd~~ | ~~East Haven~~ | ~~CT~~ | ~~06512~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~A&G Cleaning Agents LLC~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$250.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Berube~~ | ~~Marc~~ | | ~~1974~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~531 Highland St~~ | ~~Wethersfield~~ | ~~CT~~ | ~~06109~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$80.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Ferenbach~~ | ~~Joanie~~ | | ~~1975~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~21 Trout Lake Dr~~ | ~~Westbrook~~ | ~~CT~~ | |

Principal Occupation:

Name of Employer: ~~Angelini Wine Ltd~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$20.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$65.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Allen~~ | ~~Mary~~ | | ~~1976~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~14 Hewitt St~~ | ~~Willimantic~~ | ~~CT~~ | ~~06226~~ |

Principal Occupation:

Name of Employer: ~~UConn~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$25.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Dick~~ | ~~Leslie~~ | | ~~1977~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~230 Ridgewood Ave~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$55.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Gracey-Edwin~~ | ~~James~~ | | ~~1978~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~16 Morgan Rd~~ | ~~Canton~~ | ~~CT~~ | ~~06019~~ |

Principal Occupation:

Name of Employer: ~~unemployed~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$150.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Dawson~~ | ~~Christopher~~ | | ~~1979~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~81 Bangall Rd~~ | ~~Stamford~~ | ~~CT~~ | ~~06903~~ |

Principal Occupation:

Name of Employer: ~~HR Lodestar LLC~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$200.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Bourns~~ | ~~Courtney~~ | | ~~1980~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~24 Saddle Ridge Dr .~~ | ~~West Hartford~~ | ~~CT~~ | ~~06117~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Kaptain~~ | ~~Kathleen~~ | | ~~1981~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~413 Ridge Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$200.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Menta~~ | ~~Anne Marie~~ | | ~~1982~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~365 Mather St Unit 190~~ | ~~Hamden~~ | ~~CT~~ | ~~06514~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$105.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Sanchez~~ | ~~Teofilo~~ | | ~~1983~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~109 Pease Rd~~ | ~~Woodbridge~~ | ~~CT~~ | ~~06525~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~No~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$250.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Strong~~ | ~~Julien~~ | | ~~1984~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~55 Belmont St~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CCSU~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$177.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Dahl~~ | ~~Nancy~~ | | ~~1985~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~313 Long Mountain Rd~~ | ~~New Milford~~ | ~~CT~~ | ~~06776~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Homemaker~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$20.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Jinks~~ | ~~Jim~~ | | ~~1986~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~244 Academy Rd~~ | ~~Cheshire~~ | ~~CT~~ | ~~06410~~ |

Principal Occupation:

Name of Employer: ~~Mediabids~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$300.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Marra~~ | ~~Jennifer~~ | | ~~1987~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~75 Redwood Dr~~ | ~~East Haven~~ | ~~CT~~ | ~~06513~~ |

Principal Occupation:

Name of Employer: ~~Merck~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$175.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Kaye~~ | ~~Beverly Sue~~ | | ~~1988~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~15 Lorraine Dr .~~ | ~~Woodbridge~~ | ~~CT~~ | ~~06525~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$15.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Martin~~ | ~~Melanie~~ | | ~~1989~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~10 Glen Ridge Ct~~ | ~~New Milford~~ | ~~CT~~ | ~~06776~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$150.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Ellner~~ | ~~Abbey~~ | | ~~1990~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~44 Gordon St~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Western CT Area Agency on Aging~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$300.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Soderholm~~ | ~~Sidney~~ | | ~~1991~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~46 Pezzente Ln~~ | ~~East Hartford~~ | ~~CT~~ | ~~06108~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$200.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$400.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Lendroth~~ | ~~Donna~~ | | ~~1992~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~63 Augur Road Ext~~ | ~~Northford~~ | ~~CT~~ | ~~06472~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$200.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Blossom~~ | ~~Jackson~~ | | ~~1993~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~5 Joes Hill Rd~~ | ~~Danbury~~ | ~~CT~~ | ~~06811~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Stamford Public Schools~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$125.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Budai~~ | ~~Jen~~ | | ~~1994~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~173 Woodcrest~~ | ~~Stratford~~ | ~~CT~~ | |

Principal Occupation:

Name of Employer: ~~N/A~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$15.00~~

~~$5.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Gishta~~ | ~~Ali~~ | | ~~1995~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~167 Scott Rd~~ | ~~Prospect~~ | ~~CT~~ | ~~06712~~ |

Principal Occupation:

Name of Employer: ~~Ali Gishta~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$150.00~~

~~$75.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Winkler~~ | ~~Phyllis~~ | | ~~1996~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~20 Gottier Dr~~ | ~~Vernon~~ | ~~CT~~ | ~~06066~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$175.00~~

~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Molito~~ | ~~Justin~~ | | ~~1997~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~32 Mile Hill Rd S~~ | ~~Newtown~~ | ~~CT~~ | ~~06470~~ |

Principal Occupation:

Name of Employer: ~~WGAE~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$455.00~~

~~$115.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McDonough | Donna | | 1998 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 154 Haverford St . | Hamden | CT | 06517 |

Principal Occupation:

Name of Employer: Yale University

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/26/2026

Aggregate Contributions: $225.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cohen | Harold | | 1999 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 200 Leeder Hill Dr | Hamden | CT | 06517 |

Principal Occupation:

Name of Employer: Retired

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/26/2026

Aggregate Contributions: $250.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Martin | Tom | | 2000 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 35 Samuel Hill Rd | Columbia | CT | 06237 |

Principal Occupation: Retired

Name of Employer: Retired

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $90.00

Is this contribution associated with an event reported in Section J1? ☒ Yes ☐ No

If yes, list Event #: 02082026E

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/26/2026

Aggregate Contributions: $630.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Gianini | Donna | | 2001 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 5 Butternut Cir | Avon | CT | 06001 |

Principal Occupation:

Name of Employer: Retired

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/26/2026

Aggregate Contributions: $100.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Zimmer~~ | ~~Aaron~~ | | ~~2002~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~50 Obtuse Hill Rd~~ | ~~Brookfield~~ | ~~CT~~ | ~~06804~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Turntable Revival~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$125.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Irwin~~ | ~~Shelby~~ | | ~~2003~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~206 W Todd St~~ | ~~Hamden~~ | ~~CT~~ | ~~06518~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Hamden schools~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Morgan~~ | ~~Collin~~ | | ~~2004~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~2 Foley Rd~~ | ~~Portland~~ | ~~CT~~ | ~~06480~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Sonalysts, inc.~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$224.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Avenia~~ | ~~Jennifer~~ | | ~~2005~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~34 Dyer Ave~~ | ~~Canton~~ | ~~CT~~ | ~~06019~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~State of CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$18.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$54.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Balsley~~ | ~~Elaine~~ | | ~~2006~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~63 Tracy Ave~~ | ~~Waterbury~~ | ~~CT~~ | ~~06706~~ |

Principal Occupation:

Name of Employer: ~~Reachout, Inc.~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$375.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Cadiz~~ | ~~Cris~~ | | ~~2007~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~87 North Rd~~ | ~~Pomfret Center~~ | ~~CT~~ | ~~06259~~ |

Principal Occupation:

Name of Employer: ~~self employed~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$70.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Keegan~~ | ~~Stephanie~~ | | ~~2008~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~65 Burnwood Dr~~ | ~~Bloomfield~~ | ~~CT~~ | ~~06002~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$200.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Forrester~~ | ~~Kerstin~~ | | ~~2009~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~104 Underwood Rd~~ | ~~Putnam~~ | ~~CT~~ | ~~06260~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$50.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Heimer~~ | ~~Win~~ | | ~~2010~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~799 Prospect Ave # A2~~ | ~~West Hartford~~ | ~~CT~~ | ~~06105~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Woodward~~ | ~~Travis~~ | | ~~2011~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1095 W Woods Rd~~ | ~~Hamden~~ | ~~CT~~ | |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$200.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Barton~~ | ~~Frank~~ | | ~~2012~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~636 Cherry Brook Rd~~ | ~~North Canton~~ | ~~CT~~ | ~~06059~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$210.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Swartz~~ | ~~Kyle~~ | | ~~2013~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~64 Elika Rd~~ | ~~Wallingford~~ | ~~CT~~ | ~~06492~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~EPG Media~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$50.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Veit~~ | ~~Jennifer~~ | | ~~2014~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~56 Goose Ln~~ | ~~Tolland~~ | ~~CT~~ | ~~06084~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| ~~02/26/2026~~ | ~~$155.00~~ | ~~$75.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~McNamara~~ | ~~John~~ | | ~~2015~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~56 Brighton St~~ | ~~New Britain~~ | ~~CT~~ | ~~06053~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| ~~02/26/2026~~ | ~~$54.00~~ | ~~$27.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Dubrow~~ | ~~Robert~~ | | ~~2016~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~103 Carmalt Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Yale University~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| ~~02/26/2026~~ | ~~$300.00~~ | ~~$150.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Gastic~~ | ~~Billie~~ | | ~~2017~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~12 Toilsome Ave~~ | ~~Norwalk~~ | ~~CT~~ | ~~06851~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~LaGuardia Community College, CUNY~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| ~~02/26/2026~~ | ~~$680.00~~ | ~~$340.00~~ |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Garrett~~ | ~~Daniel~~ | | ~~2018~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~106 Sherman Ave~~ | ~~Hamden~~ | ~~CT~~ | ~~06518~~ |

Principal Occupation:

Name of Employer: ~~self~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$275.00~~

~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Teitleman~~ | ~~Alan~~ | | ~~2019~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~408 Whitney Ave~~ | ~~New Haven~~ | ~~CT~~ | ~~06511~~ |

Principal Occupation:

Name of Employer: ~~State of CT~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$580.00~~

~~$215.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~harper~~ | ~~annie~~ | | ~~1967~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~58 Anderson St~~ | ~~New Haven~~ | ~~CT~~ | ~~06511~~ |

Principal Occupation:

Name of Employer: ~~Yale University~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$50.00~~

~~$25.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Rosenberg~~ | ~~Samuel~~ | | ~~1968~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~117 Harmon St~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

Principal Occupation:

Name of Employer: ~~Yale University~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$150.00~~

~~$25.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Matus~~ | ~~Laurel~~ | | ~~1969~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1 N Main St~~ | ~~East Granby~~ | ~~CT~~ | ~~06026~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$15.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Jeter~~ | ~~James~~ | | ~~1970~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~5 Lisbon St~~ | ~~Hartford~~ | ~~CT~~ | ~~06106~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Yale~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$340.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$680.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Bramhall~~ | ~~Susan~~ | | ~~1971~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~207 Colony Rd~~ | ~~New Haven~~ | ~~CT~~ | ~~06511~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$150.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Fisher~~ | ~~Andrea~~ | | ~~1972~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~120 Village Ln~~ | ~~Branford~~ | ~~CT~~ | ~~06405~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Tauck~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/26/2026~~

Aggregate Contributions: ~~$150.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Cadiz** | **Cris** | | **2007** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **87 North Rd** | **Pomfret Center** | **CT** | **06259** |

| Principal Occupation | Name of Employer |
|---|---|
| **freelance writer** | **Cris Ellen Cadiz** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/26/2026**

Aggregate Contributions: **$60.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Webster** | **Jonathan** | | **1932** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **6 Manor Ln** | **Easton** | **NJ** | **06612** |

| Principal Occupation | Name of Employer |
|---|---|
| **Capital Markets Operations** | **Yale New Haven Health System** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$20.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/27/2026**

Aggregate Contributions: **$40.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Reynolds** | **Jo Ann** | | **1963** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **159 Crescent St** | **Willimantic** | **CT** | **06226** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/27/2026**

Aggregate Contributions: **$150.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Elliott** | **William** | | **1962** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **116 Battis Rd** | **Hamden** | **CT** | **06514** |

| Principal Occupation | Name of Employer |
|---|---|
| **Flight attendant** | **Delta Air Lines** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/27/2026**

Aggregate Contributions: **$60.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Petersen** | **Erica** | | **1959** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **137 Rood Ave** | **Windsor** | **CT** | **06095** |

| Principal Occupation | Name of Employer |
|---|---|
| **paraeducator** | **CREC** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/27/2026**

Aggregate Contributions: **$20.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Vail** | **Kurt** | | **1926** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **90 Main St** | **Stafford Springs** | **CT** | **06076** |

| Principal Occupation | Name of Employer |
|---|---|
| **State Representative** | **Connecticut General Assembly** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/27/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Mosca** | **Michael** | | **1927** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **132 N Main St** | **Beacon Falls** | **CT** | **06403** |

| Principal Occupation | Name of Employer |
|---|---|
| **Teacher** | **Region 15 Public Schools** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/27/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Veneziano** | **Amanda** | | **1928** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **52 Terry Rd** | **Gales Ferry** | **CT** | **06335** |

| Principal Occupation | Name of Employer |
|---|---|
| **Homemaker** | **Homemaker** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$40.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/27/2026**

Aggregate Contributions: **$340.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Huizenga** | **Curt** | | **1929** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **36 Surrey Dr** | **Wallingford** | **CT** | **06492** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$9.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/27/2026**

Aggregate Contributions: **$61.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Resch** | **Paula** | | **1930** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **95 Broadfield Rd** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/27/2026**

Aggregate Contributions: **$200.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Laskowitz** | **Jonathan** | | **1931** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **316 Ithaca Rd** | **Ithaca** | **NY** | **14850** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$150.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/27/2026**

Aggregate Contributions: **$300.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~**Webster**~~ | ~~**Jonathan**~~ | | ~~**1932**~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~**6 Manor Ln**~~ | ~~**Easton**~~ | ~~**NJ**~~ | ~~**06612**~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~**Capital Markets Operations**~~ | ~~**Yale New Haven Health System**~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~**$20.00**~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~**02/27/2026**~~

Aggregate Contributions: ~~**$40.00**~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Caizzi | Vincent | | 1933 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 34 Chelsea St | Stratford | CT | 06615 |

| Principal Occupation | Name of Employer |
|---|---|
| Machine Repair Technician | Sikorsky Aircraft |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/27/2026

Aggregate Contributions: $20.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Monahan | Michael | | 1934 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 24 Greenwood Ave | Darien | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Auditor | Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/27/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Marinone | Nichole | | 1935 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 63 Howard Ave | New Haven | CT | 06519 |

| Principal Occupation | Name of Employer |
|---|---|
| Unemployed | Unemployed |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/27/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Woods | Peter | | 1936 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 10 Fort Hill Rd | Groton | CT | 06340 |

| Principal Occupation | Name of Employer |
|---|---|
| APRN | VETERAN'S ADMINISTRATION |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/27/2026

Aggregate Contributions: $177.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Woods** | **Connie** | | **1937** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **10 Fort Hill Rd # 2C** | **Groton** | **CT** | **06340** |

| Principal Occupation | Name of Employer |
|---|---|
| **Homemaker** | **homemaker** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **02/27/2026** | **$204.00** | **$150.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Bloom** | **Meg** | | **1938** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **167 W Rock Ave** | **New Haven** | **CT** | **06515** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired/Artist** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **02/27/2026** | **$25.00** | **$25.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Waleska** | **Hayley** | | **1939** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **1400 20th St NW** | **Washington** | **DC** | **20036** |

| Principal Occupation | Name of Employer |
|---|---|
| **Product Manager** | **District of Columbia** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **02/27/2026** | **$200.00** | **$150.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Pistell** | **Anne** | | **1940** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **88 Whitney Ridge Ter** | **North Haven** | **CT** | **06473** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **02/27/2026** | **$75.00** | **$75.00** |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Yaccarino | David | | 1941 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 56 Robert Dr | East Haven | CT | 06512 |

| Principal Occupation | Name of Employer |
|---|---|
| Staff Scientist | Thermo Fisher Scientific |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $140.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/27/2026

Aggregate Contributions: $340.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Stevens | Theodore | | 1942 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 61 Westminster St | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| Transportation Planner | CDM Smith |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/27/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| VanDuzee | Kathleen | | 1943 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 198 Whisconier Rd | Brookfield | CT | 06804 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/27/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Schlorff | Daniel | | 1944 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 114 Miner St | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Pastor | Third Congregational Church, Middletown, CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $30.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/27/2026

Aggregate Contributions: $30.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Linares** | **Luis** | | **1945** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **408 Whitney Ave Apt 1** | **New Haven** | **CT** | **06511** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retail** | **Ikea** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **02/27/2026** | **$20.00** | **$20.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Kozak** | **David** | | **1946** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **88 Whitney Ridge Ter** | **North Haven** | **CT** | **06473** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **02/27/2026** | **$200.00** | **$100.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Waldron** | **Garrett** | | **1947** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **148 Alexander Dr** | **Meriden** | **CT** | **06450** |

| Principal Occupation | Name of Employer |
|---|---|
| **Business Development** | **The Next Street** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **02/27/2026** | **$25.00** | **$5.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Obuchowski** | **Elsa** | | **1948** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **41 East Ave** | **Norwalk** | **CT** | **06851** |

| Principal Occupation | Name of Employer |
|---|---|
| **editor-writer** | **Elsa Peterson Ltd.** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **02/27/2026** | **$10.00** | **$10.00** |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Teitleman** | **Maria** | | **1949** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **105 Harvard St** | **Monroe** | **NC** | **28112** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$20.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/27/2026**

Aggregate Contributions: **$20.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Haven** | **City** | | **1950** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **15 Linden St** | **West Haven** | **CT** | **06516** |

| Principal Occupation | Name of Employer |
|---|---|
| **Financial Analyst** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/27/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Ryden** | **Barbara** | | **1951** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **88 Notch Hill Rd** | **North Branford** | **CT** | **06471** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/27/2026**

Aggregate Contributions: **$175.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **caruso** | **mary** | | **1952** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **1 North St** | **North Branford** | **CT** | **06471** |

| Principal Occupation | Name of Employer |
|---|---|
| **Family care giver** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$40.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/27/2026**

Aggregate Contributions: **$40.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Buchardt** | **Elaine** | | **1953** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **874 East St** | **Andover** | **CT** | **06232** |

| Principal Occupation | Name of Employer |
|---|---|
| **Realtor** | **Elaine Buchardt Realtor** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/27/2026**

Aggregate Contributions: **$100.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Morvan Henderson** | **Jennifer** | | **1954** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **58 Brookside Dr** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Interior Design** | **J. Morvan & Company** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/27/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Seitz** | **Vicki** | | **1955** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **194 Haverford St** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/27/2026**

Aggregate Contributions: **$350.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Melley** | **Connor** | | **1956** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **63 Briarwood Dr** | **Windsor** | **CT** | **06095** |

| Principal Occupation | Name of Employer |
|---|---|
| **Researcher** | **VA** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/27/2026**

Aggregate Contributions: **$5.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Friday** | **Sandra** | | **1957** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **44 Gordon St** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/27/2026**

Aggregate Contributions: **$172.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Ridley** | **Marianna** | | **1958** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **1220 Whitney Ave** | **Hamden** | **CT** | |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$40.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/27/2026**

Aggregate Contributions: **$40.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~**Last07b9b0ab**~~ | ~~**First1cff0a96**~~ | | ~~**1959**~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~**137 Rood Ave**~~ | ~~**Windsor**~~ | ~~**CT**~~ | ~~**06095**~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~**paraeducator**~~ | ~~**CREC**~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~**$10.00**~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~**02/27/2026**~~

Aggregate Contributions: ~~**$20.00**~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Sands** | **Chris** | | **1960** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **80 Judy Ln** | **South Windsor** | **CT** | **06074** |

| Principal Occupation | Name of Employer |
|---|---|
| **computer programmer** | **Schneider Electric** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/27/2026**

Aggregate Contributions: **$50.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **McManus** | **Michael** | | **1961** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **5 Broadview Rd** | **Brookfield** | **CT** | **06804** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/27/2026**

Aggregate Contributions: **$175.00**

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~**Elliott**~~ | ~~**William**~~ | | ~~**1962**~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~**116 Battis Rd**~~ | ~~**Hamden**~~ | ~~**CT**~~ | ~~**06514**~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~**Flight attendant**~~ | ~~**Delta Air Lines**~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~**$10.00**~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~**02/27/2026**~~

Aggregate Contributions: ~~**$80.00**~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~**Reynolds**~~ | ~~**Jo Ann**~~ | | ~~**1963**~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~**159 Crescent St**~~ | ~~**Willimantic**~~ | ~~**CT**~~ | ~~**06226**~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~**Retired**~~ | ~~**Retired**~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~**$25.00**~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~**02/27/2026**~~

Aggregate Contributions: ~~**$150.00**~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Hazen** | **Carol** | | **1964** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **62 Mountain View Ter** | **North Haven** | **CT** | **06473** |

| Principal Occupation | Name of Employer |
|---|---|
| **Grant Writer** | **Town of Hamden** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$20.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/27/2026**

Aggregate Contributions: **$340.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Harkins** | **Miranda** | | **1965** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **130 Gungy Rd** | **Salem** | **CT** | **06420** |

| Principal Occupation | Name of Employer |
|---|---|
| **Scenic artist** | **Goodspeed Musicals** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/27/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **spinner** | **gary** | | **1966** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **56 Elmwood Rd** | **New Haven** | **CT** | **06515** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/27/2026**

Aggregate Contributions: **$100.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Vail~~ | ~~Kurt~~ | | ~~1926~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~90 Main St~~ | ~~Stafford Springs~~ | ~~CT~~ | ~~06076~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Connecticut General Assembly~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/27/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Mosca~~ | ~~Michael~~ | | ~~1927~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~132 N Main St~~ | ~~Beacon Falls~~ | ~~CT~~ | ~~06403~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Region 15 Public Schools~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/27/2026~~

Aggregate Contributions: ~~$10.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Veneziano~~ | ~~Amanda~~ | | ~~1928~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~52 Terry Rd~~ | ~~Gales Ferry~~ | ~~CT~~ | ~~06335~~ |

Principal Occupation:

Name of Employer: ~~Homemaker~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/27/2026~~

Aggregate Contributions: ~~$380.00~~

~~$40.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Huizenga~~ | ~~Curt~~ | | ~~1929~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~36 Surrey Dr~~ | ~~Wallingford~~ | ~~CT~~ | ~~06492~~ |

Principal Occupation:

Name of Employer: ~~retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/27/2026~~

Aggregate Contributions: ~~$70.00~~

~~$9.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Resch~~ | ~~Paula~~ | | ~~1930~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~95 Broadfield Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

Principal Occupation:

Name of Employer: ~~retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/27/2026~~

Aggregate Contributions: ~~$300.00~~

~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Laskowitz~~ | ~~Jonathan~~ | | ~~1931~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~316 Ithaca Rd~~ | ~~Ithaca~~ | ~~NY~~ | ~~14850~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/27/2026~~

Aggregate Contributions: ~~$450.00~~

~~$150.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Webster~~ | ~~Jonathan~~ | | ~~1932~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~6 Manor Ln~~ | ~~Easton~~ | ~~NJ~~ | ~~06612~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Yale New Haven Health System~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| ~~02/27/2026~~ | ~~$60.00~~ | ~~$20.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Caizzi~~ | ~~Vincent~~ | | ~~1933~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~34 Chelsea St~~ | ~~Stratford~~ | ~~CT~~ | ~~06615~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Sikorsky Aircraft~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| ~~02/27/2026~~ | ~~$25.00~~ | ~~$5.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Monahan~~ | ~~Michael~~ | | ~~1934~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~24 Greenwood Ave~~ | ~~Darien~~ | ~~CT~~ | |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Connecticut~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| ~~02/27/2026~~ | ~~$200.00~~ | ~~$100.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Marinone~~ | ~~Nichole~~ | | ~~1935~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~63 Howard Ave~~ | ~~New Haven~~ | ~~CT~~ | ~~06519~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Unemployed~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| ~~02/27/2026~~ | ~~$50.00~~ | ~~$25.00~~ |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Woods~~ | ~~Peter~~ | | ~~1936~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~10 Fort Hill Rd~~ | ~~Groton~~ | ~~CT~~ | ~~06340~~ |

Principal Occupation:

Name of Employer: ~~VETERAN'S ADMINISTRATION~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/27/2026~~

Aggregate Contributions: ~~$327.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Woods~~ | ~~Connie~~ | | ~~1937~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~10 Fort Hill Rd # 2C~~ | ~~Groton~~ | ~~CT~~ | ~~06340~~ |

Principal Occupation:

Name of Employer: ~~homemaker~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/27/2026~~

Aggregate Contributions: ~~$354.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Bloom~~ | ~~Meg~~ | | ~~1938~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~167 W Rock Ave~~ | ~~New Haven~~ | ~~CT~~ | ~~06515~~ |

Principal Occupation:

Name of Employer: ~~Retired/Artist~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/27/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Waleska~~ | ~~Hayley~~ | | ~~1939~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1400 20th St NW~~ | ~~Washington~~ | ~~DC~~ | ~~20036~~ |

Principal Occupation:

Name of Employer: ~~District of Columbia~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/27/2026~~

Aggregate Contributions: ~~$350.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Pistell~~ | ~~Anne~~ | | ~~1940~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~88 Whitney Ridge Ter~~ | ~~North Haven~~ | ~~CT~~ | ~~06473~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/27/2026~~

Aggregate Contributions: ~~$150.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Yaccarino~~ | ~~David~~ | | ~~1941~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~56 Robert Dr~~ | ~~East Haven~~ | ~~CT~~ | ~~06512~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Thermo Fisher Scientific~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$140.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/27/2026~~

Aggregate Contributions: ~~$480.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Stevens~~ | ~~Theodore~~ | | ~~1942~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~61 Westminster St~~ | ~~Hamden~~ | ~~CT~~ | ~~06518~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CDM Smith~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/27/2026~~

Aggregate Contributions: ~~$150.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~VanDuzee~~ | ~~Kathleen~~ | | ~~1943~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~198 Whisconier Rd~~ | ~~Brookfield~~ | ~~CT~~ | ~~06804~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/27/2026~~

Aggregate Contributions: ~~$225.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Schlorff~~ | ~~Daniel~~ | | ~~1944~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~114 Miner St~~ | ~~Middletown~~ | ~~CT~~ | ~~06457~~ |

Principal Occupation:

Name of Employer: ~~Third Congregational Church, Middletown, CT~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$30.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/27/2026~~

Aggregate Contributions: ~~$60.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Linares~~ | ~~Luis~~ | | ~~1945~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~408 Whitney Ave Apt 1~~ | ~~New Haven~~ | ~~CT~~ | ~~06511~~ |

Principal Occupation:

Name of Employer: ~~Ikea~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$20.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/27/2026~~

Aggregate Contributions: ~~$40.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Kozak~~ | ~~David~~ | | ~~1946~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~88 Whitney Ridge Ter~~ | ~~North Haven~~ | ~~CT~~ | ~~06473~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/27/2026~~

Aggregate Contributions: ~~$300.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Waldron~~ | ~~Garrett~~ | | ~~1947~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~148 Alexander Dr~~ | ~~Meriden~~ | ~~CT~~ | ~~06450~~ |

Principal Occupation:

Name of Employer: ~~The Next Street~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/27/2026~~

Aggregate Contributions: ~~$30.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Obuchowski~~ | ~~Elsa~~ | | ~~1948~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~41 East Ave~~ | ~~Norwalk~~ | ~~CT~~ | ~~06851~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Elsa Peterson Ltd.~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/27/2026~~

Aggregate Contributions: ~~$20.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Teitleman~~ | ~~Maria~~ | | ~~1949~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~105 Harvard St~~ | ~~Monroe~~ | ~~NC~~ | ~~28112~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$20.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/27/2026~~

Aggregate Contributions: ~~$40.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Haven~~ | ~~City~~ | | ~~1950~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~15 Linden St~~ | ~~West Haven~~ | ~~CT~~ | ~~06516~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/27/2026~~

Aggregate Contributions: ~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Ryden~~ | ~~Barbara~~ | | ~~1951~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~88 Notch Hill Rd~~ | ~~North Branford~~ | ~~CT~~ | ~~06471~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/27/2026~~

Aggregate Contributions: ~~$250.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| caruso | mary | | 1952 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1 North St | North Branford | CT | 06471 |

Principal Occupation:

Name of Employer: CT

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/27/2026

Aggregate Contributions: $80.00

Amount of Contribution: $40.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Buchardt | Elaine | | 1953 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 874 East St | Andover | CT | 06232 |

Principal Occupation:

Name of Employer: Elaine Buchardt Realtor

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/27/2026

Aggregate Contributions: $200.00

Amount of Contribution: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Morvan Henderson | Jennifer | | 1954 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 58 Brookside Dr | Hamden | CT | 06517 |

Principal Occupation:

Name of Employer: J. Morvan & Company

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/27/2026

Aggregate Contributions: $10.00

Amount of Contribution: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Seitz | Vicki | | 1955 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 194 Haverford St | Hamden | CT | 06517 |

Principal Occupation:

Name of Employer: Retired

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 02/27/2026

Aggregate Contributions: $375.00

Amount of Contribution: $25.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Melley~~ | ~~Connor~~ | | ~~1956~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~63 Briarwood Dr~~ | ~~Windsor~~ | ~~CT~~ | ~~06095~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~VA~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/27/2026~~ | ~~$10.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Friday~~ | ~~Sandra~~ | | ~~1957~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~44 Gordon St~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/27/2026~~ | ~~$222.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Ridley~~ | ~~Marianna~~ | | ~~1958~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1220 Whitney Ave~~ | ~~Hamden~~ | ~~CT~~ | |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$40.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/27/2026~~ | ~~$80.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Last07b9b0ab~~ | ~~First1cff0a96~~ | | ~~1959~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~137 Rood Ave~~ | ~~Windsor~~ | ~~CT~~ | ~~06095~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CREC~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/27/2026~~ | ~~$30.00~~ |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Sands~~ | ~~Chris~~ | | ~~1960~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~80 Judy Ln~~ | ~~South Windsor~~ | ~~CT~~ | ~~06074~~ |

Principal Occupation:

Name of Employer: ~~Schneider Electric~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/27/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~McManus~~ | ~~Michael~~ | | ~~1961~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~5 Broadview Rd~~ | ~~Brookfield~~ | ~~CT~~ | ~~06804~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/27/2026~~

Aggregate Contributions: ~~$275.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Elliott~~ | ~~William~~ | | ~~1962~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~116 Battis Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06514~~ |

Principal Occupation:

Name of Employer: ~~Delta Air Lines~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/27/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Reynolds~~ | ~~Jo Ann~~ | | ~~1963~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~159 Crescent St~~ | ~~Willimantic~~ | ~~CT~~ | ~~06226~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/27/2026~~

Aggregate Contributions: ~~$175.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Hazen~~ | ~~Carol~~ | | ~~1964~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~62 Mountain View Ter~~ | ~~North Haven~~ | ~~CT~~ | ~~06473~~ |

Principal Occupation:

Name of Employer: ~~Town of Hamden~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$20.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/27/2026~~

Aggregate Contributions: ~~$360.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Harkins~~ | ~~Miranda~~ | | ~~1965~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~130 Gungy Rd~~ | ~~Salem~~ | ~~CT~~ | ~~06420~~ |

Principal Occupation:

Name of Employer: ~~Goodspeed Musicals~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/27/2026~~

Aggregate Contributions: ~~$75.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~spinner~~ | ~~gary~~ | | ~~1966~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~56 Elmwood Rd~~ | ~~New Haven~~ | ~~CT~~ | ~~06515~~ |

Principal Occupation:

Name of Employer: ~~CT~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/27/2026~~

Aggregate Contributions: ~~$200.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~**tuhus**~~ | ~~**melinda**~~ | | ~~**1911**~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~**103 Carmat Rd**~~ | ~~**Hamden**~~ | ~~**CT**~~ | ~~**06517**~~ |

Principal Occupation: ~~**Retired**~~

Name of Employer: ~~**retired**~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~**$150.00**~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~**02/28/2026**~~

Aggregate Contributions: ~~**$680.00**~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Shaw** | **Miriam** | | **1912** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **143 Hoyt St .** | **Stamford** | **CT** | **06905** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$340.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/28/2026**

Aggregate Contributions: **$340.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Stevens** | **Kathryn** | | **1913** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **10 Carafa Ter** | **North Haven** | **CT** | **06473** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired 70** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/28/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Lambert** | **Ross** | | **1914** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **25 Trumbull Pl** | **North Haven** | **CT** | **06473** |

| Principal Occupation | Name of Employer |
|---|---|
| **Instructional Technologist** | **Quinnipiac University** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/28/2026**

Aggregate Contributions: **$200.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Morgenstein** | **Gina** | | **1915** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **177 S Main** | **Wallingford** | **CT** | **06492** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **None** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/28/2026**

Aggregate Contributions: **$50.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Horne** | **William** | | **1916** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **246 Pleasant Point Rd** | **Branford** | **CT** | **06405** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/28/2026**

Aggregate Contributions: **$100.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Fleuette** | **Joe** | | **1917** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **88 Beers Rd** | **Easton** | **CT** | **06612** |

| Principal Occupation | Name of Employer |
|---|---|
| **Engineering** | **ASML** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$340.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/28/2026**

Aggregate Contributions: **$340.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Palm** | **Christine** | | **1918** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **29 E Liberty St** | **Chester** | **CT** | **06412** |

| Principal Occupation | Name of Employer |
|---|---|
| **Educator** | **The Active Voice LLC** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/28/2026**

Aggregate Contributions: **$175.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Sauerhoff** | **Robb** | | **1919** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **78 Bartram Ave** | **Bridgeport** | **CT** | **06605** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$300.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/28/2026**

Aggregate Contributions: **$300.00**

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Rutledge** | **Peyton** | | **1920** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **9 Alexis Dr** | **Bolton** | **CT** | **06043** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/28/2026**

Aggregate Contributions: **$75.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Trusiewicz** | **Michael** | | **1921** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **470 Wooster Rd** | **Middlebury** | **CT** | **06762** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/28/2026**

Aggregate Contributions: **$100.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Maghery** | **Erin** | | **1922** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **48 Apple St** | **Wallingford** | **CT** | **06492** |

| Principal Occupation | Name of Employer |
|---|---|
| **PTA** | **HHC** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/28/2026**

Aggregate Contributions: **$10.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Michel** | **David** | | **1923** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **4 Rockledge Dr** | **Stamford** | **CT** | **06902** |

| Principal Occupation | Name of Employer |
|---|---|
| **wholesale consultant** | **Eyes Of Steel** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$115.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **02/28/2026**

Aggregate Contributions: **$340.00**

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Gammon~~ | ~~George~~ | | ~~1924~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~33 Edgehill Ter~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~physician~~ | ~~Self~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~02/28/2026~~ | ~~$200.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Shadford | Jacqueline | | 1925 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 149 Nepaug Rd | Burlington | CT | 06013 |

| Principal Occupation | Name of Employer |
|---|---|
| Driver | Town of Burlington |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 02/28/2026 | $35.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| tuhus | melinda | | 1911 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 103 Carmat Rd | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 02/28/2026 | $680.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Gammon | George | | 1924 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 33 Edgehill Ter | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| physician | George Davis Gammon, Jr, MD |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 02/28/2026 | $250.00 |

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~tuhus~~ | ~~melinda~~ | | ~~1911~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~103 Carmat Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/28/2026~~

Aggregate Contributions: ~~$830.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Shaw~~ | ~~Miriam~~ | | ~~1912~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~143 Hoyt St .~~ | ~~Stamford~~ | ~~CT~~ | ~~06905~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$340.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/28/2026~~

Aggregate Contributions: ~~$680.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Stevens~~ | ~~Kathryn~~ | | ~~1913~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~10 Carafa Ter~~ | ~~North Haven~~ | ~~CT~~ | ~~06473~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired 70~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/28/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Lambert~~ | ~~Ross~~ | | ~~1914~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~25 Trumbull Pl~~ | ~~North Haven~~ | ~~CT~~ | ~~06473~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Quinnipiac University~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/28/2026~~

Aggregate Contributions: ~~$300.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Morgenstein~~ | ~~Gina~~ | | ~~1915~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~177 S Main~~ | ~~Wallingford~~ | ~~CT~~ | ~~06492~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~None~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/28/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Horne~~ | ~~William~~ | | ~~1916~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~246 Pleasant Point Rd~~ | ~~Branford~~ | ~~CT~~ | ~~06405~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/28/2026~~

Aggregate Contributions: ~~$200.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Fleuette~~ | ~~Joe~~ | | ~~1917~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~88 Beers Rd~~ | ~~Easton~~ | ~~CT~~ | ~~06612~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~ASML~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$340.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/28/2026~~

Aggregate Contributions: ~~$680.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Palm~~ | ~~Christine~~ | | ~~1918~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~29 E Liberty St~~ | ~~Chester~~ | ~~CT~~ | ~~06412~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~The Active Voice LLC~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/28/2026~~

Aggregate Contributions: ~~$250.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Sauerhoff~~ | ~~Robb~~ | | ~~1919~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~78 Bartram Ave~~ | ~~Bridgeport~~ | ~~CT~~ | ~~06605~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$300.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/28/2026~~

Aggregate Contributions: ~~$600.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Rutledge~~ | ~~Peyton~~ | | ~~1920~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~9 Alexis Dr~~ | ~~Bolton~~ | ~~CT~~ | ~~06043~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/28/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Trusiewicz~~ | ~~Michael~~ | | ~~1921~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~470 Wooster Rd~~ | ~~Middlebury~~ | ~~CT~~ | ~~06762~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/28/2026~~

Aggregate Contributions: ~~$150.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Maghery~~ | ~~Erin~~ | | ~~1922~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~48 Apple St~~ | ~~Wallingford~~ | ~~CT~~ | ~~06492~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~HHC~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/28/2026~~

Aggregate Contributions: ~~$20.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Michel~~ | ~~David~~ | | ~~1923~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~4 Rockledge Dr~~ | ~~Stamford~~ | ~~CT~~ | ~~06902~~ |

Principal Occupation:

Name of Employer: ~~Eyes Of Steel~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$115.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/28/2026~~

Aggregate Contributions: ~~$455.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Gammon~~ | ~~George~~ | | ~~1924~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~33 Edgehill Ter~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

Principal Occupation:

Name of Employer: ~~Self~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/28/2026~~

Aggregate Contributions: ~~$300.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Shadford~~ | ~~Jacqueline~~ | | ~~1925~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~149 Nepaug Rd~~ | ~~Burlington~~ | ~~CT~~ | ~~06013~~ |

Principal Occupation:

Name of Employer: ~~Town of Burlington~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~02/28/2026~~

Aggregate Contributions: ~~$45.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Turpin~~ | ~~Payton~~ | | ~~1892~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~54 South Rd~~ | ~~Harwinton~~ | ~~CT~~ | ~~06791~~ |

Principal Occupation:

Name of Employer: ~~State of Connecticut~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/01/2026~~

Aggregate Contributions: ~~$150.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Hellekson~~ | ~~Nancy~~ | | ~~1893~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~14K Lakeside Dr~~ | ~~Ledyard~~ | ~~CT~~ | ~~06339~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/01/2026~~

Aggregate Contributions: ~~$10.00~~

~~$5.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Cruz~~ | ~~Eliezer~~ | | ~~1894~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~29 Clinton Ave~~ | ~~New Haven~~ | ~~CT~~ | ~~06513~~ |

Principal Occupation:

Name of Employer: ~~Community Foundation for Greater New Haven~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/01/2026~~

Aggregate Contributions: ~~$108.00~~

~~$54.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Rosenthal~~ | ~~Ellen~~ | | ~~1895~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~185 Thornton St~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

Principal Occupation:

Name of Employer: ~~Connecticut~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/01/2026~~

Aggregate Contributions: ~~$225.00~~

~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~McMenemy~~ | ~~Donald~~ | | ~~1896~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~20 Orchard Brook Dr~~ | ~~Wethersfield~~ | ~~CT~~ | ~~06109~~ |

Principal Occupation:

Name of Employer: ~~State of Connecticut~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/01/2026~~

Aggregate Contributions: ~~$50.00~~

~~$25.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Chartier~~ | ~~Gerard~~ | | ~~1897~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1445 North Rd~~ | ~~Dayville~~ | ~~CT~~ | ~~06241~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$340.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/01/2026~~ | ~~$680.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Mellen~~ | ~~Amy~~ | | ~~1898~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~59 Mantup Rd~~ | ~~Putnam~~ | ~~CT~~ | ~~06260~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Tufts Cummings school of Veterinary Medicine~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/01/2026~~ | ~~$50.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Ferro~~ | ~~Javier~~ | | ~~1899~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~30 Oak Ridge Cir~~ | ~~Hamden~~ | ~~CT~~ | ~~06518~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~JFDesign and Associates~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/01/2026~~ | ~~$300.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Mandour~~ | ~~Laila~~ | | ~~1900~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1022 Leesburg Dr~~ | ~~Leland~~ | ~~NC~~ | ~~28451~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/01/2026~~ | ~~$100.00~~ |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Glassman~~ | ~~Stanley~~ | | ~~1901~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~60 Oak Ridge Dr~~ | ~~Avon~~ | ~~CT~~ | ~~06001~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/01/2026~~

Aggregate Contributions: ~~$150.00~~

~~$75.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Liverant~~ | ~~Andrew~~ | | ~~1902~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~185 Old Stratfield Rd~~ | ~~Fairfield~~ | ~~CT~~ | ~~06825~~ |

Principal Occupation:

Name of Employer: ~~unemployed~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/01/2026~~

Aggregate Contributions: ~~$30.00~~

~~$15.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~braica~~ | ~~amy~~ | | ~~1903~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~7 Walnut Ave , Norwalk, Connecticut 06851, United States~~ | ~~Norwalk~~ | ~~CT~~ | ~~06851~~ |

Principal Occupation:

Name of Employer: ~~CT~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/01/2026~~

Aggregate Contributions: ~~$50.00~~

~~$25.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Beatty~~ | ~~Ellen~~ | | ~~1904~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~32 Elm St~~ | ~~Milford~~ | ~~CT~~ | ~~06460~~ |

Principal Occupation:

Name of Employer: ~~Retired professor~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/01/2026~~

Aggregate Contributions: ~~$50.00~~

~~$25.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Lawson~~ | ~~David~~ | | ~~1905~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~16 White Swan Dr~~ | ~~New Milford~~ | ~~CT~~ | ~~06776~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$51.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/01/2026~~

Aggregate Contributions: ~~$102.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Doyle~~ | ~~Meg~~ | | ~~1906~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~29 Haddon St~~ | ~~Bridgeport~~ | ~~CT~~ | ~~06605~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Law Office~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/01/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Magaldi-Lewis~~ | ~~Catherine~~ | | ~~1907~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~32 Oak Farms Rd~~ | ~~Andover~~ | ~~CT~~ | ~~06232~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Na~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/01/2026~~

Aggregate Contributions: ~~$300.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Rupp~~ | ~~Kristie~~ | | ~~1908~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~25 Glenbrook Rd~~ | ~~Stamford~~ | ~~CT~~ | ~~06902~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Southern Connecticut State University~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/01/2026~~

Aggregate Contributions: ~~$150.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Clinton~~ | ~~Angela~~ | | ~~1909~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~306 Alden Ave~~ | ~~New Haven~~ | ~~CT~~ | ~~06515~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Self Employed, Angela Clinton Consulting LLC~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/01/2026~~

Aggregate Contributions: ~~$150.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Deeble~~ | ~~Danielle~~ | | ~~1910~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~5 Mackinnon Pl~~ | ~~East Lyme~~ | ~~CT~~ | ~~06333~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/01/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Magaldi-Lewis** | **Catherine** | | **1907** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **32 Oak Farms Rd** | **Andover** | **CT** | **06232** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/01/2026**

Aggregate Contributions: **$200.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Turpin** | **Payton** | | **1892** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **54 South Rd** | **Harwinton** | **CT** | **06791** |

| Principal Occupation | Name of Employer |
|---|---|
| **physician** | **State of Connecticut** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/01/2026**

Aggregate Contributions: **$75.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Hellekson** | **Nancy** | | **1893** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **14K Lakeside Dr** | **Ledyard** | **CT** | **06339** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/01/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Cruz** | **Eliezer** | | **1894** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **29 Clinton Ave** | **New Haven** | **CT** | **06513** |

| Principal Occupation | Name of Employer |
|---|---|
| **Director** | **Community Foundation for Greater New Haven** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$54.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/01/2026**

Aggregate Contributions: **$54.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Rosenthal** | **Ellen** | | **1895** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **185 Thornton St** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Connecticut** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/01/2026**

Aggregate Contributions: **$125.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **McMenemy** | **Donald** | | **1896** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **20 Orchard Brook Dr** | **Wethersfield** | **CT** | **06109** |

| Principal Occupation | Name of Employer |
|---|---|
| **Engineer** | **State of Connecticut** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/01/2026**

Aggregate Contributions: **$25.00**

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Chartier** | **Gerard** | | **1897** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **1445 North Rd** | **Dayville** | **CT** | **06241** |

| Principal Occupation | Name of Employer |
|---|---|
| **Social worker** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$340.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/01/2026**

Aggregate Contributions: **$340.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Mellen** | **Amy** | | **1898** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **59 Mantup Rd** | **Putnam** | **CT** | **06260** |

| Principal Occupation | Name of Employer |
|---|---|
| **Veterinary Technician** | **Tufts Cummings school of Veterinary Medicine** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/01/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Ferro** | **Javier** | | **1899** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **30 Oak Ridge Cir** | **Hamden** | **CT** | **06518** |

| Principal Occupation | Name of Employer |
|---|---|
| **Designer** | **JFDesign and Associates** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$150.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/01/2026**

Aggregate Contributions: **$150.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Mandour** | **Laila** | | **1900** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **1022 Leesburg Dr** | **Leland** | **NC** | **28451** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/01/2026**

Aggregate Contributions: **$50.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Glassman** | **Stanley** | | **1901** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **60 Oak Ridge Dr** | **Avon** | **CT** | **06001** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/01/2026**

Aggregate Contributions: **$75.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Liverant** | **Andrew** | | **1902** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **185 Old Stratfield Rd** | **Fairfield** | **CT** | **06825** |

| Principal Occupation | Name of Employer |
|---|---|
| **unemployed** | **unemployed** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$15.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/01/2026**

Aggregate Contributions: **$15.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **braica** | **amy** | | **1903** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **7 Walnut Ave , Norwalk, Connecticut 06851, United States** | **Norwalk** | **CT** | **06851** |

| Principal Occupation | Name of Employer |
|---|---|
| **Teacher** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/01/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Beatty** | **Ellen** | | **1904** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **32 Elm St** | **Milford** | **CT** | **06460** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired professor** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/01/2026**

Aggregate Contributions: **$25.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Lawson** | **David** | | **1905** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **16 White Swan Dr** | **New Milford** | **CT** | **06776** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$51.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/01/2026**

Aggregate Contributions: **$51.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Doyle** | **Meg** | | **1906** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **29 Haddon St** | **Bridgeport** | **CT** | **06605** |

| Principal Occupation | Name of Employer |
|---|---|
| **Legal Professional** | **Law Office** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/01/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~**Magaldi-Lewis**~~ | ~~**Catherine**~~ | | ~~**1907**~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~**32 Oak Farms Rd**~~ | ~~**Andover**~~ | ~~**CT**~~ | ~~**06232**~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~**Retired**~~ | ~~**Na**~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~**$100.00**~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~**03/01/2026**~~

Aggregate Contributions: ~~**$200.00**~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Rupp** | **Kristie** | | **1908** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **25 Glenbrook Rd** | **Stamford** | **CT** | **06902** |

| Principal Occupation | Name of Employer |
|---|---|
| **Professor** | **Southern Connecticut State University** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/01/2026**

Aggregate Contributions: **$75.00**

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Clinton** | **Angela** | | **1909** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **306 Alden Ave** | **New Haven** | **CT** | **06515** |

| Principal Occupation | Name of Employer |
|---|---|
| **Consultant** | **Self Employed, Angela Clinton Consulting LLC** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/01/2026**

Aggregate Contributions: **$75.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Deeble** | **Danielle** | | **1910** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **5 Mackinnon Pl** | **East Lyme** | **CT** | **06333** |

| Principal Occupation | Name of Employer |
|---|---|
| **Teacher** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/01/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Seclen** | **Margaret** | | **1875** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **65 Crown Rdg** | **Newington** | **CT** | **06111** |

| Principal Occupation | Name of Employer |
|---|---|
| **Educational Consultant** | **HMH** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/02/2026**

Aggregate Contributions: **$10.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Perkins** | **Annie** | | **1876** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **920 Storrs Rd** | **Storrs** | **CT** | **06268** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/02/2026**

Aggregate Contributions: **$25.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Wilke~~ | ~~V~~ | | ~~1877~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~130 Curtis~~ | ~~Fairfield~~ | ~~CT~~ | ~~06825~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/02/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Lignar | Cynthia | | 1878 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 18 Pleasant St | Chester | CT | 06412 |

| Principal Occupation | Name of Employer |
|---|---|
| First Selectman | Town of Chester |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/02/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Shea | Lorel | | 1879 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 633 Liberty Hwy | Putnam | CT | 06260 |

| Principal Occupation | Name of Employer |
|---|---|
| Manager | Alpha NetSolutions |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/02/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hall | Courtney | | 1880 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 95 Naser Rd | Litchfield | CT | 06759 |

| Principal Occupation | Name of Employer |
|---|---|
| Social worker | Harvest Healthcare |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/02/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Puerini** | **Kathryn** | | **1881** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **96 Clear View Dr** | **Brooklyn** | **CT** | **06234** |

| Principal Occupation | Name of Employer |
|---|---|
| **Knowledge Manager** | **ICF** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/02/2026**

Aggregate Contributions: **$100.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Lieu** | **Chan** | | **1882** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **253 Ridgewood Rd** | **West Hartford** | **CT** | **06107** |

| Principal Occupation | Name of Employer |
|---|---|
| **Senior Manager** | **Aurora** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$150.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/02/2026**

Aggregate Contributions: **$150.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Rasmussen-Tuller** | **Ken** | | **1883** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **7 Douglas Cir** | **West Hartford** | **CT** | **06110** |

| Principal Occupation | Name of Employer |
|---|---|
| **Senior Project Manager** | **UConn Health Waterbury Hospital** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/02/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Kosowsky** | **Alice** | | **1884** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **21 Spring Garden St** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$66.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/02/2026**

Aggregate Contributions: **$66.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Natali** | **Blanche** | | **1885** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **53 Westwood Rd** | **Fairfield** | **CT** | **06825** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$20.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/02/2026**

Aggregate Contributions: **$20.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Fortier** | **Peter** | | **1886** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **139 Indian Hill Rd** | **Canton** | **CT** | **06019** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Connecticut** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/02/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Gallant** | **Eric** | | **1887** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **237 Alps Rd** | **Branford** | **CT** | **06405** |

| Principal Occupation | Name of Employer |
|---|---|
| **Business Owner** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/02/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Kendall** | **Jonathan** | | **1888** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **19 Lincoln Ave** | **Norwalk** | **CT** | **06854** |

| Principal Occupation | Name of Employer |
|---|---|
| **Product Manager** | **IQVIA** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/02/2026**

Aggregate Contributions: **$50.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Poplawski** | **Tiffany** | | **1889** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **595 Hampton Rd** | **Pomfret Center** | **CT** | **06259** |

| Principal Occupation | Name of Employer |
|---|---|
| **Design** | **PNB interior design Inc** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/02/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Lett** | **Jonathan** | | **1890** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **515 West Ave** | **Bridgeport** | **CT** | **06604** |

| Principal Occupation | Name of Employer |
|---|---|
| **Support Specialist** | **No** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/02/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Parad** | **Adrienne** | | **1891** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **5 Birch St** | **Ledyard** | **CT** | **06339** |

| Principal Occupation | Name of Employer |
|---|---|
| **Medical Director** | **Optum** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/02/2026**

Aggregate Contributions: **$150.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Perry** | **Allie** | | **2389** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **247 Saint Ronan St** | **New Haven** | **CT** | **06511** |

| Principal Occupation | Name of Employer |
|---|---|
| **retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☒ Personal Check ☐ Money Order ☐ Credit/Debit Card

Date Received: **03/02/2026**

Aggregate Contributions: **$75.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Seclen~~ | ~~Margaret~~ | | ~~1875~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~65 Crown Rdg~~ | ~~Newington~~ | ~~CT~~ | ~~06111~~ |

Principal Occupation:

Name of Employer: ~~HMH~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/02/2026~~

Aggregate Contributions: ~~$20.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Perkins~~ | ~~Annie~~ | | ~~1876~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~920 Storrs Rd~~ | ~~Storrs~~ | ~~CT~~ | ~~06268~~ |

Principal Occupation:

Name of Employer: ~~CT~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/02/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Wilke~~ | ~~V~~ | | ~~1877~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~130 Curtis~~ | ~~Fairfield~~ | ~~CT~~ | ~~06825~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/02/2026~~

Aggregate Contributions: ~~$75.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Lignar~~ | ~~Cynthia~~ | | ~~1878~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~18 Pleasant St~~ | ~~Chester~~ | ~~CT~~ | ~~06412~~ |

Principal Occupation:

Name of Employer: ~~Town of Chester~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/02/2026~~

Aggregate Contributions: ~~$150.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Shea~~ | ~~Lorel~~ | | ~~1879~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~633 Liberty Hwy~~ | ~~Putnam~~ | ~~CT~~ | ~~06260~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Alpha NetSolutions~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/02/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Hall~~ | ~~Courtney~~ | | ~~1880~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~95 Naser Rd~~ | ~~Litchfield~~ | ~~CT~~ | ~~06759~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Harvest Healthcare~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/02/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Puerini~~ | ~~Kathryn~~ | | ~~1881~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~96 Clear View Dr~~ | ~~Brooklyn~~ | ~~CT~~ | ~~06234~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~ICF~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/02/2026~~

Aggregate Contributions: ~~$200.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Lieu~~ | ~~Chan~~ | | ~~1882~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~253 Ridgewood Rd~~ | ~~West Hartford~~ | ~~CT~~ | ~~06107~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Aurora~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/02/2026~~

Aggregate Contributions: ~~$300.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Rasmussen-Tuller~~ | ~~Ken~~ | | ~~1883~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~7 Douglas Cir~~ | ~~West Hartford~~ | ~~CT~~ | ~~06110~~ |

Principal Occupation:

Name of Employer: ~~UConn Health-Waterbury Hospital~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/02/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Kosowsky~~ | ~~Alice~~ | | ~~1884~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~21 Spring Garden St~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

Principal Occupation:

Name of Employer: ~~retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$66.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/02/2026~~

Aggregate Contributions: ~~$132.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Natali~~ | ~~Blanche~~ | | ~~1885~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~53 Westwood Rd~~ | ~~Fairfield~~ | ~~CT~~ | ~~06825~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$20.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/02/2026~~

Aggregate Contributions: ~~$40.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Fortier~~ | ~~Peter~~ | | ~~1886~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~139 Indian Hill Rd~~ | ~~Canton~~ | ~~CT~~ | ~~06019~~ |

Principal Occupation:

Name of Employer: ~~Connecticut~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/02/2026~~

Aggregate Contributions: ~~$10.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Gallant~~ | ~~Eric~~ | | ~~1887~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~237 Alps Rd~~ | ~~Branford~~ | ~~CT~~ | ~~06405~~ |

Principal Occupation:

Name of Employer: ~~CT~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/02/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Kendall~~ | ~~Jonathan~~ | | ~~1888~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~19 Lincoln Ave~~ | ~~Norwalk~~ | ~~CT~~ | ~~06854~~ |

Principal Occupation:

Name of Employer: ~~IQVIA~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/02/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Poplawski~~ | ~~Tiffany~~ | | ~~1889~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~595 Hampton Rd~~ | ~~Pomfret Center~~ | ~~CT~~ | ~~06259~~ |

Principal Occupation:

Name of Employer: ~~PNB interior design Inc~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/02/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Lett~~ | ~~Jonathan~~ | | ~~1890~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~515 West Ave~~ | ~~Bridgeport~~ | ~~CT~~ | ~~06604~~ |

Principal Occupation:

Name of Employer: ~~No~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/02/2026~~

Aggregate Contributions: ~~$50.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Parad~~ | ~~Adrienne~~ | | ~~1891~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~5 Birch St~~ | ~~Ledyard~~ | ~~CT~~ | ~~06339~~ |

Principal Occupation:

Name of Employer: ~~Optum~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/02/2026~~

Aggregate Contributions: ~~$225.00~~

Amount of Contribution: ~~$75.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Wilke** | **Valerie** | | **1877** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **130 Curtis Ter** | **Fairfield** | **CT** | **06825** |

Principal Occupation: **Retired**

Name of Employer: **Retired**

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/02/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Johnson | Kaye | | 2387 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 175 Main St | Hampton | CT | 06247 |

Principal Occupation: Town Clerk

Name of Employer: Town of Hampton

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☒ Yes ☐ No

If yes, list Event #: 02082026D

Method of contribution: ☐ Cash ☒ Personal Check ☐ Money Order ☐ Credit/Debit Card

Date Received: 03/02/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Garrett | Merry | C | 2388 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 151 Kozley Rd | Tolland | CT | 06084 |

Principal Occupation: Reitred

Name of Employer: Retired

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☒ Yes ☐ No

If yes, list Event #: 02082026D

Method of contribution: ☐ Cash ☒ Personal Check ☐ Money Order ☐ Credit/Debit Card

Date Received: 03/02/2026

Aggregate Contributions: $100.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Perry~~ | ~~Allie~~ | | ~~2389~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~247 Saint Ronan St~~ | ~~New Haven~~ | ~~CT~~ | ~~06511~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☒ Personal Check ☐ Money Order ☐ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/02/2026~~ | ~~$150.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Adelman | Edward | | 2390 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 216 Station Rd | Hampton | CT | 06247 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☒ Yes ☐ No

If yes, list Event # 02082026D

Method of contribution: ☐ Cash ☒ Personal Check ☐ Money Order ☐ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/02/2026 | $20.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Tillinghast | John | | 2391 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 149 Main St | Hampton | CT | 06247 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☒ Yes ☐ No

If yes, list Event # 02082026D

Method of contribution: ☐ Cash ☒ Personal Check ☐ Money Order ☐ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/02/2026 | $75.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Beman** | **Mary** | | **1861** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **593 Main St** | **Wilbraham** | **MA** | **01095** |

| Principal Occupation | Name of Employer |
|---|---|
| **Educational consultant** | **Beman Literacy Consulting** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☒ Credit/Debit Card ☐ Money Order

| Date Received | Aggregate Contributions |
|---|---|
| **03/03/2026** | **$50.00** |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Micca** | **Olivia** | | **1874** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **4 Glen Rd** | **Fairfield** | **CT** | **06812** |

| Principal Occupation | Name of Employer |
|---|---|
| **Health Policy Program Manager** | **Yale** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/03/2026**

Aggregate Contributions: **$20.00**

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Mocarsky~~ | ~~Amy~~ | | ~~1860~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1476 S County Trl~~ | ~~East Greenwich~~ | ~~RI~~ | ~~02818~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~NA~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/03/2026~~

Aggregate Contributions: ~~$10.00~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Beman~~ | ~~Mary~~ | | ~~1861~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~593 Main St~~ | ~~Wilbraham~~ | ~~MA~~ | ~~01095~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Self-employed~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/03/2026~~

Aggregate Contributions: ~~$75.00~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Hardin~~ | ~~Rose~~ | | ~~1862~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1142 Racebrook Rd~~ | ~~Woodbridge~~ | ~~CT~~ | ~~06525~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Yale Medicine~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$27.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/03/2026~~

Aggregate Contributions: ~~$54.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Sellenberg~~ | ~~Elaine~~ | | ~~1863~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~5 Brookwood Dr Apt~~ | ~~Rocky Hill~~ | ~~CT~~ | ~~06067~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Greater Hartford Transit District~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/03/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Beman~~ | ~~Elizabeth~~ | | ~~1864~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~21 Wicker St~~ | ~~Putnam~~ | ~~CT~~ | ~~06260~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Town of Douglas MA~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$40.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/03/2026~~

Aggregate Contributions: ~~$215.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Allen~~ | ~~Anne~~ | | ~~1865~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~5070 Lake Rd~~ | ~~Ponca City~~ | ~~OK~~ | ~~74604~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Unemployed~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/03/2026~~

Aggregate Contributions: ~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Mooney~~ | ~~Whitney~~ | | ~~1866~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1015 N Main Street Ext~~ | ~~Wallingford~~ | ~~CT~~ | ~~06492~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Middlesex United Way~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/03/2026~~

Aggregate Contributions: ~~$20.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Moon~~ | ~~Susan~~ | | ~~1867~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~41 Indian Spring Rd~~ | ~~Woodstock~~ | ~~CT~~ | ~~06281~~ |

Principal Occupation:

Name of Employer: ~~CT~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/03/2026~~

Aggregate Contributions: ~~$175.00~~

~~$75.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Robersmith~~ | ~~Adam~~ | | ~~1868~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~184 Great Pond Rd~~ | ~~Simsbury~~ | ~~CT~~ | ~~06070~~ |

Principal Occupation:

Name of Employer: ~~Universalist Church of West Hartford~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/03/2026~~

Aggregate Contributions: ~~$100.00~~

~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Kohli~~ | ~~Wendy~~ | | ~~1869~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~279 Thornton St~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

Principal Occupation:

Name of Employer: ~~Retired Professor~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/03/2026~~

Aggregate Contributions: ~~$40.00~~

~~$20.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Barrett~~ | ~~Sarah~~ | | ~~1870~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~5 Greenwich Way~~ | ~~Milford~~ | ~~CT~~ | ~~06460~~ |

Principal Occupation:

Name of Employer: ~~Fleet Feet Westport~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/03/2026~~

Aggregate Contributions: ~~$680.00~~

~~$340.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Bennett~~ | ~~Philip~~ | | ~~1871~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~279 Thornton St~~ | ~~Hamden~~ | ~~CT~~ | |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$20.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/03/2026~~

Aggregate Contributions: ~~$40.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Boose~~ | ~~David~~ | | ~~1872~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~78 Prospect St .~~ | ~~Woodstock~~ | ~~CT~~ | |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Bose~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/03/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Nolan~~ | ~~Terence~~ | | ~~1873~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1 Jericho Rd S~~ | ~~Sherman~~ | ~~CT~~ | ~~06784~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/03/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Micca~~ | ~~Olivia~~ | | ~~1874~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~4 Glen Rd~~ | ~~Fairfield~~ | ~~CT~~ | ~~06812~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Yale~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/03/2026~~

Aggregate Contributions: ~~$30.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Mocarsky | Amy | | 1860 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1476 S County Trl | East Greenwich | RI | 02818 |

| Principal Occupation | Name of Employer |
|---|---|
| n/a | NA |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/03/2026

Aggregate Contributions: $5.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Beman~~ | ~~Mary~~ | | ~~1861~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~593 Main St~~ | ~~Wilbraham~~ | ~~MA~~ | ~~01095~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~educational consultant~~ | ~~Self employed~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/03/2026~~

Aggregate Contributions: ~~$50.00~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hardin | Rose | | 1862 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1142 Racebrook Rd | Woodbridge | CT | 06525 |

| Principal Occupation | Name of Employer |
|---|---|
| RN | Yale Medicine |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $27.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/03/2026

Aggregate Contributions: $27.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Sellenberg | Elaine | | 1863 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 5 Brookwood Dr Apt | Rocky Hill | CT | 06067 |

| Principal Occupation | Name of Employer |
|---|---|
| ADA Paratransit Coordinator | Greater Hartford Transit District |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/03/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Beman** | **Elizabeth** | | **1864** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **21 Wicker St** | **Putnam** | **CT** | **06260** |

| Principal Occupation | Name of Employer |
|---|---|
| **Teacher** | **Town of Douglas MA** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$40.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/03/2026**

Aggregate Contributions: **$150.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Allen** | **Anne** | | **1865** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **5070 Lake Rd** | **Ponca City** | **OK** | **74604** |

| Principal Occupation | Name of Employer |
|---|---|
| **Homemaker** | **Unemployed** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/03/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Mooney** | **Whitney** | | **1866** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **1015 N Main Street Ext** | **Wallingford** | **CT** | **06492** |

| Principal Occupation | Name of Employer |
|---|---|
| **Director of Development** | **Middlesex United Way** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/03/2026**

Aggregate Contributions: **$10.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Moon** | **Susan** | | **1867** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **41 Indian Spring Rd** | **Woodstock** | **CT** | **06281** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/03/2026**

Aggregate Contributions: **$100.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Robersmith** | **Adam** | | **1868** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **184 Great Pond Rd** | **Simsbury** | **CT** | **06070** |

| Principal Occupation | Name of Employer |
|---|---|
| **Clergy** | **Universalist Church of West Hartford** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/03/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Kohli** | **Wendy** | | **1869** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **279 Thornton St** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired Professor** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$20.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/03/2026**

Aggregate Contributions: **$20.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Barrett** | **Sarah** | | **1870** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **5 Greenwich Way** | **Milford** | **CT** | **06460** |

| Principal Occupation | Name of Employer |
|---|---|
| **Sales Associate** | **Fleet Feet Westport** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$340.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/03/2026**

Aggregate Contributions: **$340.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Bennett** | **Philip** | | **1871** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **279 Thornton St** | **Hamden** | **CT** | |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$20.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/03/2026**

Aggregate Contributions: **$20.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Boose** | **David** | | **1872** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **78 Prospect St .** | **Woodstock** | **CT** | |

| Principal Occupation | Name of Employer |
|---|---|
| **Engineer** | **Bose** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/03/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Nolan** | **Terence** | | **1873** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **1 Jericho Rd S** | **Sherman** | **CT** | **06784** |

| Principal Occupation | Name of Employer |
|---|---|
| **Finance** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/03/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~**Micca**~~ | ~~**Olivia**~~ | | ~~**1874**~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~**4 Glen Rd**~~ | ~~**Fairfield**~~ | ~~**CT**~~ | ~~**06812**~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~**Health Policy Program Manager**~~ | ~~**Yale**~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~**$10.00**~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~**03/03/2026**~~

Aggregate Contributions: ~~**$20.00**~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Harris** | **Loughlin** | | **1842** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **123 Old Belden Hill Rd** | **Norwalk** | **CT** | **06850** |

| Principal Occupation | Name of Employer |
|---|---|
| **unemployed** | **Unemployed** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/04/2026**

Aggregate Contributions: **$10.00**

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Cartier~~ | ~~Angela~~ | | ~~1843~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~15 Pilgrim Dr~~ | ~~Groton~~ | ~~CT~~ | ~~06340~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Budtender~~ | ~~Curaleaf~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/04/2026~~ | ~~$15.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Guzhnay | Alex | | 1844 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 635 Ferry St | New Haven | CT | 06513 |

| Principal Occupation | Name of Employer |
|---|---|
| Legislative Aide | City of New Haven |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/04/2026 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Frisman | Linda | | 1845 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 282 Neipsic Rd | Glastonbury | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $250.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/04/2026 | $250.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| cassidy | Edith | | 1846 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 245 Ellsworth St . | Bridgeport | CT | 06605 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/04/2026 | $150.00 |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| E Facchini | Frank | | 1847 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 32 Lloyd Rd | Waterford | CT | 06385 |

| Principal Occupation | Name of Employer |
|---|---|
| Executive Director | Southeastern Connecticut Television, Inc. |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/04/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Lomartire | Jon | | 1848 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 293 Green Hill Rd | Madison | CT | 06443 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/04/2026

Aggregate Contributions: $300.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| DUNN | GREGORY | | 1849 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 25 Bonnie View Dr | Trumbull | CT | 06611 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/04/2026

Aggregate Contributions: $55.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Congdon | Bob | | 1850 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 20 Meadowbrook Rd | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $90.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/04/2026

Aggregate Contributions: $340.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Cordner** | **Beverne** | | **1851** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **16 Phelps Rd** | **Manchester** | **CT** | **06042** |

| Principal Occupation | Name of Employer |
|---|---|
| **Director** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/04/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Mossberg** | **Lori** | | **1852** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **310 Blue Trl** | **Hamden** | **CT** | **06518** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/04/2026**

Aggregate Contributions: **$150.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Donnelly** | **Kate** | | **1853** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **202 Station Rd** | **Hampton** | **CT** | **06247** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/04/2026**

Aggregate Contributions: **$200.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~**Tajildeen**~~ | ~~**Bilal**~~ | | ~~**1854**~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~**12 Donald Ter**~~ | ~~**Waterbury**~~ | ~~**CT**~~ | ~~**06705**~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~**Dean**~~ | ~~**CT State Community College**~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~**$140.00**~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~**03/04/2026**~~

Aggregate Contributions: ~~**$680.00**~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Belcher** | **Samuel** | | **1855** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **208 Saddle Hill Rd** | **Manchester** | **CT** | **06040** |

| Principal Occupation | Name of Employer |
|---|---|
| **Store employee** | **At Home** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/04/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Gillett** | **Marissa** | | **1856** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **108 Cooper Ave** | **Weatogue** | **CT** | **06089** |

| Principal Occupation | Name of Employer |
|---|---|
| **Senior Fellow** | **AELP** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$340.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/04/2026**

Aggregate Contributions: **$340.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Cracco** | **Celine** | | **1857** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **50 Sarah Ln** | **Simsbury** | **CT** | **06070** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/04/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Litke** | **Jeffrey** | | **1858** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **73 Bird Rd** | **Naugatuck** | **CT** | **06770** |

| Principal Occupation | Name of Employer |
|---|---|
| **Human Resources** | **Town of Stratford** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$150.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/04/2026**

Aggregate Contributions: **$150.00**

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Osadchey** | **Sherry** | | **1859** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **12 Clover Ct** | **Avon** | **CT** | **06001** |

| Principal Occupation | Name of Employer |
|---|---|
| **psychotherapist** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/04/2026**

Aggregate Contributions: **$5.00**

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Harris~~ | ~~Loughlin~~ | | ~~1842~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~123 Old Belden Hill Rd~~ | ~~Norwalk~~ | ~~CT~~ | ~~06850~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Unemployed~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/04/2026~~

Aggregate Contributions: ~~$20.00~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Cartier~~ | ~~Angela~~ | | ~~1843~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~15 Pilgrim Dr~~ | ~~Groton~~ | ~~CT~~ | ~~06340~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Curaleaf~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/04/2026~~

Aggregate Contributions: ~~$25.00~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Guzhnay~~ | ~~Alex~~ | | ~~1844~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~635 Ferry St~~ | ~~New Haven~~ | ~~CT~~ | ~~06513~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~City of New Haven~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/04/2026~~

Aggregate Contributions: ~~$50.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Frisman~~ | ~~Linda~~ | | ~~1845~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~282 Neipsic Rd~~ | ~~Glastonbury~~ | ~~CT~~ | |

Principal Occupation:

Name of Employer: ~~Connecticut~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$250.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/04/2026~~

Aggregate Contributions: ~~$500.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~cassidy~~ | ~~Edith~~ | | ~~1846~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~245 Ellsworth St .~~ | ~~Bridgeport~~ | ~~CT~~ | ~~06605~~ |

Principal Occupation:

Name of Employer: ~~CT~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/04/2026~~

Aggregate Contributions: ~~$300.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~E Facchini~~ | ~~Frank~~ | | ~~1847~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~32 Lloyd Rd~~ | ~~Waterford~~ | ~~CT~~ | ~~06385~~ |

Principal Occupation:

Name of Employer: ~~Southeastern Connecticut Television, Inc.~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/04/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Lomartire~~ | ~~Jon~~ | | ~~1848~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~293 Green Hill Rd~~ | ~~Madison~~ | ~~CT~~ | ~~06443~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/04/2026~~

Aggregate Contributions: ~~$500.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~DUNN~~ | ~~GREGORY~~ | | ~~1849~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~25 Bonnie View Dr~~ | ~~Trumbull~~ | ~~CT~~ | ~~06611~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/04/2026~~ | ~~$60.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Congdon~~ | ~~Bob~~ | | ~~1850~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~20 Meadowbrook Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$90.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/04/2026~~ | ~~$430.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Cordner~~ | ~~Beverne~~ | | ~~1851~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~16 Phelps Rd~~ | ~~Manchester~~ | ~~CT~~ | ~~06042~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/04/2026~~ | ~~$100.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Mossberg~~ | ~~Lori~~ | | ~~1852~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~310 Blue Trl~~ | ~~Hamden~~ | ~~CT~~ | ~~06518~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/04/2026~~ | ~~$200.00~~ |

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Donnelly~~ | ~~Kate~~ | | ~~1853~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~202 Station Rd~~ | ~~Hampton~~ | ~~CT~~ | ~~06247~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| ~~03/04/2026~~ | ~~$350.00~~ | ~~$50.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Tajildeen~~ | ~~Bilal~~ | | ~~1854~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~12 Donald Ter~~ | ~~Waterbury~~ | ~~CT~~ | ~~06705~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CT State Community College~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| ~~03/04/2026~~ | ~~$820.00~~ | ~~$140.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Belcher~~ | ~~Samuel~~ | | ~~1855~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~208 Saddle Hill Rd~~ | ~~Manchester~~ | ~~CT~~ | ~~06040~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~At Home~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| ~~03/04/2026~~ | ~~$10.00~~ | ~~$5.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Gillett~~ | ~~Marissa~~ | | ~~1856~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~108 Cooper Ave~~ | ~~Weatogue~~ | ~~CT~~ | ~~06089~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~AELP~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| ~~03/04/2026~~ | ~~$680.00~~ | ~~$340.00~~ |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Cracco~~ | ~~Celine~~ | | ~~1857~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~50 Sarah Ln~~ | ~~Simsbury~~ | ~~CT~~ | ~~06070~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/04/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Litke~~ | ~~Jeffrey~~ | | ~~1858~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~73 Bird Rd~~ | ~~Naugatuck~~ | ~~CT~~ | ~~06770~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Town of Stratford~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/04/2026~~

Aggregate Contributions: ~~$300.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Osadchey~~ | ~~Sherry~~ | | ~~1859~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~12 Clover Ct~~ | ~~Avon~~ | ~~CT~~ | ~~06001~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/04/2026~~

Aggregate Contributions: ~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Tajildeen** | **Bilal** | | **1854** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **12 Donald Ter** | **Waterbury** | **CT** | **06705** |

| Principal Occupation | Name of Employer |
|---|---|
| **Associate Dean of Institutional Advancement** | **CT State Community College** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$140.00**

Is this contribution associated with an event reported in Section J1? ☒ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/04/2026**

Aggregate Contributions: **$680.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cartier | Angela | | 1843 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 15 Pilgrim Dr | Groton | CT | 06340 |

| Principal Occupation | Name of Employer |
|---|---|
| Budtender | Curaleaf |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/04/2026

Aggregate Contributions: $20.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Larkin | Judith | E | 1820 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 9 Jay Ct | Avon | CT | 06001 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/05/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hart | Jefferey | P | 1809 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 39 Georgiana St | New London | CT | 06320 |

| Principal Occupation | Name of Employer |
|---|---|
| Estimator | Jaypro Sports |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/05/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hard | Robert | | 1841 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 102 S Interlachen Ave | Winter Park | FL | 32789 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/05/2026

Aggregate Contributions: $200.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Allen** | **Mary** | **E** | **1834** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **14 Hewitt St** | **Willimantic** | **CT** | **06226** |

| Principal Occupation | Name of Employer |
|---|---|
| **Professor** | **UConn** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/05/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Gordon** | **Laura** | | **1825** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **421 New Haven Ave** | **Milford** | **CT** | **06460** |

| Principal Occupation | Name of Employer |
|---|---|
| **attorney** | **Laura P. Gordon** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/05/2026**

Aggregate Contributions: **$15.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Friday~~ | ~~Sandra~~ | | ~~1806~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~44 Gordon St~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/05/2026~~

Aggregate Contributions: ~~$322.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Ellner~~ | ~~Abbey~~ | | ~~1807~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~44 Gordon St~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Western CT Area Agency on Aging~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/05/2026~~

Aggregate Contributions: ~~$350.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Greenberg~~ | ~~Samuel~~ | | ~~1808~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~461 Central Ave~~ | ~~New Haven~~ | ~~CT~~ | ~~06515~~ |

Principal Occupation:

Name of Employer: ~~State of Connecticut~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/05/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Hart~~ | ~~Jefferey~~ | | ~~1809~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~39 Georgiana St~~ | ~~New London~~ | ~~CT~~ | ~~06320~~ |

Principal Occupation:

Name of Employer: ~~Jaypro Sports~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/05/2026~~

Aggregate Contributions: ~~$75.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Cygan~~ | ~~Mary~~ | | ~~1810~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~37 Barrett Ave~~ | ~~Stamford~~ | ~~CT~~ | |

Principal Occupation:

Name of Employer: ~~N/A~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/05/2026~~

Aggregate Contributions: ~~$200.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Kaptain~~ | ~~Kathleen~~ | | ~~1811~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~413 Ridge Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/05/2026~~

Aggregate Contributions: ~~$350.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~keefe~~ | ~~Diane~~ | | ~~1812~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~249 Chestnut Hill Rd~~ | ~~Norwalk~~ | ~~CT~~ | ~~06851~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$190.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/05/2026~~

Aggregate Contributions: ~~$680.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~STRADLING~~ | ~~DIANE~~ | | ~~1813~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~624 Heritage Vlg~~ | ~~Southbury~~ | ~~CT~~ | ~~06488~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Connecticut~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/05/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Sacco~~ | ~~Jennifer~~ | | ~~1814~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~54 Thompson St~~ | ~~Hamden~~ | ~~CT~~ | ~~06518~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Quinnipiac University~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/05/2026~~

Aggregate Contributions: ~~$145.26~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Jarvis~~ | ~~Pamela~~ | | ~~1815~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~296 W Cornwall Rd~~ | ~~West Cornwall~~ | ~~CT~~ | ~~06796~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/05/2026~~

Aggregate Contributions: ~~$475.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~MOY~~ | ~~HELEN~~ | | ~~1816~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~63 Ferndale Dr~~ | ~~Easton~~ | ~~CT~~ | ~~06612~~ |

Principal Occupation:

Name of Employer: ~~CT~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/05/2026~~

Aggregate Contributions: ~~$40.00~~

~~$20.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Hennessey~~ | ~~Kathleen~~ | | ~~1817~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~48 Woodland Hts~~ | ~~Rockfall~~ | ~~CT~~ | ~~06481~~ |

Principal Occupation:

Name of Employer: ~~retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/05/2026~~

Aggregate Contributions: ~~$100.00~~

~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Connolly~~ | ~~Paul~~ | | ~~1818~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~60 N Cove Rd~~ | ~~Old Saybrook~~ | ~~CT~~ | ~~06475~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/05/2026~~

Aggregate Contributions: ~~$200.00~~

~~$25.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Sutcliffe~~ | ~~Joyce~~ | | ~~1819~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1 Autumn Rdg~~ | ~~Westbrook~~ | ~~CT~~ | |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/05/2026~~

Aggregate Contributions: ~~$20.00~~

~~$10.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Larkin~~ | ~~Judith E~~ | | ~~1820~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~9 Jay Ct~~ | ~~Avon~~ | ~~CT~~ | ~~06001~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/05/2026~~

Aggregate Contributions: ~~$75.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Suchy~~ | ~~Rebecca~~ | | ~~1821~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~334 S Main St~~ | ~~Wallingford~~ | ~~CT~~ | ~~06492~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Regional School District~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/05/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~maas~~ | ~~kendra~~ | | ~~1822~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~35 Phelps Rd~~ | ~~Manchester~~ | ~~CT~~ | ~~06042~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~UConn~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/05/2026~~

Aggregate Contributions: ~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Cordano~~ | ~~Amanda~~ | | ~~1823~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~160 Florida Hill Rd~~ | ~~Ridgefield~~ | ~~CT~~ | |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Ms President US~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/05/2026~~

Aggregate Contributions: ~~$200.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Asbery~~ | ~~David~~ | | ~~1824~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~168 Broadway~~ | ~~Hamden~~ | ~~CT~~ | ~~06518~~ |

Principal Occupation:

Name of Employer: ~~NA~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/05/2026~~

Aggregate Contributions: ~~$50.00~~

~~$25.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Gordon~~ | ~~Laura~~ | | ~~1825~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~421 New Haven Ave~~ | ~~Milford~~ | ~~CT~~ | ~~06460~~ |

Principal Occupation:

Name of Employer: ~~Self~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/05/2026~~

Aggregate Contributions: ~~$25.00~~

~~$5.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Martucci~~ | ~~Mick~~ | | ~~1826~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~720 Mt Carmel Ave~~ | ~~Hamden~~ | ~~CT~~ | ~~06518~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/05/2026~~

Aggregate Contributions: ~~$125.00~~

~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Smith~~ | ~~Debra~~ | | ~~1827~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1139 New Haven Ave~~ | ~~Milford~~ | ~~CT~~ | |

Principal Occupation:

Name of Employer: ~~YMCA~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/05/2026~~

Aggregate Contributions: ~~$50.00~~

~~$25.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Welander~~ | ~~Matt~~ | | ~~1828~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~377 Dogwood Rd~~ | ~~Orange~~ | ~~CT~~ | ~~06477~~ |

Principal Occupation:

Name of Employer: ~~Yale University~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/05/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Gerics~~ | ~~Joseph~~ | | ~~1829~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~466 Riverdale Dr~~ | ~~Stratford~~ | ~~CT~~ | ~~06615~~ |

Principal Occupation:

Name of Employer: ~~Connecticut~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/05/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Fabrizi~~ | ~~NANCY~~ | | ~~1830~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~923 Clintonville Rd~~ | ~~Wallingford~~ | ~~CT~~ | |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/05/2026~~

Aggregate Contributions: ~~$55.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Bomke~~ | ~~David~~ | | ~~1831~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~112 Laura Rd~~ | ~~Hamden~~ | ~~CT~~ | |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/05/2026~~

Aggregate Contributions: ~~$10.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| matley | justin | | 1832 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 4 Cindy Ln | Norwalk | CT | 06851 |

| Principal Occupation | Name of Employer |
|---|---|
| | Matley productions |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/05/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Barlow | Elizabeth | | 1833 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 40 Whitman Dr | Granby | CT | 06035 |

| Principal Occupation | Name of Employer |
|---|---|
| | Windsor Public Schools |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/05/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Allen | Mary | | 1834 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 14 Hewitt St | Willimantic | CT | 06226 |

| Principal Occupation | Name of Employer |
|---|---|
| | UConn |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/05/2026

Aggregate Contributions: $40.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Ducey Avendano LMSW CSW | Polly | | 1835 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 99 Colonial Rd | Watertown | CT | 06795 |

| Principal Occupation | Name of Employer |
|---|---|
| | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/05/2026

Aggregate Contributions: $10.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Blau~~ | ~~Greta~~ | | ~~1836~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~63 Kaye Vue Dr~~ | ~~Hamden~~ | ~~CT~~ | |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Kevin Smith Attorney at Law LLC~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/05/2026~~

Aggregate Contributions: ~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Lynch~~ | ~~Robin~~ | | ~~1837~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~32 Main St~~ | ~~Newtown~~ | ~~CT~~ | ~~06470~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Med IQ~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/05/2026~~

Aggregate Contributions: ~~$300.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Ferguson~~ | ~~Roderick~~ | | ~~1838~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~980 Prospect St~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/05/2026~~

Aggregate Contributions: ~~$150.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Goff~~ | ~~David~~ | | ~~1839~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~287 Lighthouse Rd~~ | ~~New Haven~~ | ~~CT~~ | ~~06512~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/05/2026~~

Aggregate Contributions: ~~$50.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Zolvik~~ | ~~Kim~~ | | ~~1840~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~21 Forest St~~ | ~~Branford~~ | ~~CT~~ | ~~06405~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Yale University~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/05/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Hard~~ | ~~Robert~~ | | ~~1841~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~102 S Interlachen Ave~~ | ~~Winter Park~~ | ~~FL~~ | |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/05/2026~~

Aggregate Contributions: ~~$300.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Friday** | **Sandra** | | **1806** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **44 Gordon St** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/05/2026**

Aggregate Contributions: **$222.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Ellner** | **Abbey** | | **1807** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **44 Gordon St** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Wellnes Services Coordinator** | **Western CT Area Agency on Aging** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/05/2026**

Aggregate Contributions: **$175.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Greenberg** | **Samuel** | | **1808** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **461 Central Ave** | **New Haven** | **CT** | **06515** |

| Principal Occupation | Name of Employer |
|---|---|
| **attorney** | **State of Connecticut** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/05/2026**

Aggregate Contributions: **$50.00**

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~**Hart**~~ | ~~**Jefferey**~~ | | ~~**1809**~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~**39 Georgiana St**~~ | ~~**New London**~~ | ~~**CT**~~ | ~~**06320**~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~**Estimator**~~ | ~~**Jaypro Sports**~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~**$25.00**~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~**03/05/2026**~~

Aggregate Contributions: ~~**$50.00**~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Cygan** | **Mary** | | **1810** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **37 Barrett Ave** | **Stamford** | **CT** | |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **N/A** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/05/2026**

Aggregate Contributions: **$100.00**

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Kaptain** | **Kathleen** | | **1811** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **413 Ridge Rd** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/05/2026**

Aggregate Contributions: **$200.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| keefe | Diane | | 1812 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 249 Chestnut Hill Rd | Norwalk | CT | 06851 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $190.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/05/2026

Aggregate Contributions: $340.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| STRADLING | DIANE | | 1813 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 624 Heritage Vlg | Southbury | CT | 06488 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/05/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Sacco | Jennifer | | 1814 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 54 Thompson St | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| Professor | Quinnipiac University |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/05/2026

Aggregate Contributions: $95.26

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Jarvis | Pamela | | 1815 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 296 W Cornwall Rd | West Cornwall | CT | 06796 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/05/2026

Aggregate Contributions: $325.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| MOY | HELEN | | 1816 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 63 Ferndale Dr | Easton | CT | 06612 |

| Principal Occupation | Name of Employer |
|---|---|
| Digital Marketer | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/05/2026

Aggregate Contributions: $20.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hennessey | Kathleen | | 1817 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 48 Woodland Hts | Rockfall | CT | 06481 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/05/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Connolly | Paul | | 1818 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 60 N Cove Rd | Old Saybrook | CT | 06475 |

| Principal Occupation | Name of Employer |
|---|---|
| Publisher | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/05/2026

Aggregate Contributions: $175.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Sutcliffe | Joyce | | 1819 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1 Autumn Rdg | Westbrook | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/05/2026

Aggregate Contributions: $10.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Larkin~~ | ~~Judith E~~ | | ~~1820~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~9 Jay Ct~~ | ~~Avon~~ | ~~CT~~ | ~~06001~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~retired~~ | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/05/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Suchy | Rebecca | | 1821 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 334 S Main St | Wallingford | CT | 06492 |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | Regional School District |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/05/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| maas | kendra | | 1822 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 35 Phelps Rd | Manchester | CT | 06042 |

| Principal Occupation | Name of Employer |
|---|---|
| Scientist | UConn |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/05/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cordano | Amanda | | 1823 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 160 Florida Hill Rd | Ridgefield | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Executive Director | Ms President US |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/05/2026

Aggregate Contributions: $100.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Asbery** | **David** | | **1824** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **168 Broadway** | **Hamden** | **CT** | **06518** |

| Principal Occupation | Name of Employer |
|---|---|
| **Director of Office Services** | **NA** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/05/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~**Gordon**~~ | ~~**Laura**~~ | | ~~**1825**~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~**421 New Haven Ave**~~ | ~~**Milford**~~ | ~~**CT**~~ | ~~**06460**~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~**attorney**~~ | ~~**Self**~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~**$5.00**~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~**03/05/2026**~~

Aggregate Contributions: ~~**$20.00**~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Martucci** | **Mick** | | **1826** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **720 Mt Carmel Ave** | **Hamden** | **CT** | **06518** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/05/2026**

Aggregate Contributions: **$75.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Smith** | **Debra** | | **1827** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **1139 New Haven Ave** | **Milford** | **CT** | |

| Principal Occupation | Name of Employer |
|---|---|
| **Head Teacher** | **YMCA** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/05/2026**

Aggregate Contributions: **$25.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Welander** | **Matt** | | **1828** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **377 Dogwood Rd** | **Orange** | **CT** | **06477** |

| Principal Occupation | Name of Employer |
|---|---|
| **Professor** | **Yale University** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **03/05/2026** | **$50.00** | **$50.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Gerics** | **Joseph** | | **1829** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **466 Riverdale Dr** | **Stratford** | **CT** | **06615** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Connecticut** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **03/05/2026** | **$25.00** | **$25.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Fabrizi** | **NANCY** | | **1830** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **923 Clintonville Rd** | **Wallingford** | **CT** | |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **03/05/2026** | **$30.00** | **$25.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Bomke** | **David** | | **1831** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **112 Laura Rd** | **Hamden** | **CT** | |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **03/05/2026** | **$5.00** | **$5.00** |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| matley | justin | | 1832 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 4 Cindy Ln | Norwalk | CT | 06851 |

| Principal Occupation | Name of Employer |
|---|---|
| Owner | Matley productions |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/05/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Barlow | Elizabeth | | 1833 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 40 Whitman Dr | Granby | CT | 06035 |

| Principal Occupation | Name of Employer |
|---|---|
| Social worker | Windsor Public Schools |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/05/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Allen~~ | ~~Mary~~ | | ~~1834~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~14 Hewitt St~~ | ~~Willimantic~~ | ~~CT~~ | ~~06226~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Professor~~ | ~~UConn~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/05/2026~~

Aggregate Contributions: ~~$30.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Ducey Avendano LMSW CSW | Polly | | 1835 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 99 Colonial Rd | Watertown | CT | 06795 |

| Principal Occupation | Name of Employer |
|---|---|
| Bilingual social worker | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/05/2026

Aggregate Contributions: $5.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Blau** | **Greta** | | **1836** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **63 Kaye Vue Dr** | **Hamden** | **CT** | |

| Principal Occupation | Name of Employer |
|---|---|
| **Paralegal** | **Kevin Smith Attorney at Law LLC** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/05/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Lynch** | **Robin** | | **1837** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **32 Main St** | **Newtown** | **CT** | **06470** |

| Principal Occupation | Name of Employer |
|---|---|
| **Healthcare Consultant** | **Med-IQ** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$150.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/05/2026**

Aggregate Contributions: **$150.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Ferguson** | **Roderick** | | **1838** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **980 Prospect St** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Professor** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/05/2026**

Aggregate Contributions: **$100.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Goff** | **David** | | **1839** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **287 Lighthouse Rd** | **New Haven** | **CT** | **06512** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/05/2026**

Aggregate Contributions: **$25.00**

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Zolvik** | **Kim** | | **1840** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **21 Forest St** | **Branford** | **CT** | **06405** |

| Principal Occupation | Name of Employer |
|---|---|
| **Graphic Designer** | **Yale University** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/05/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~**Hard**~~ | ~~**Robert**~~ | | ~~**1841**~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~**102 S Interlachen Ave**~~ | ~~**Winter Park**~~ | ~~**FL**~~ | |

| Principal Occupation | Name of Employer |
|---|---|
| ~~**Retired**~~ | ~~**Retired**~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~**$100.00**~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~**03/05/2026**~~

Aggregate Contributions: ~~**$200.00**~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Oberholtzer~~ | ~~Zachary~~ | | ~~1790~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~119 Towne St~~ | ~~Stamford~~ | ~~CT~~ | ~~06902~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Regeneron Pharmaceuticals~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$20.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/06/2026~~

Aggregate Contributions: ~~$40.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Kimball~~ | ~~Mary Eliza~~ | | ~~1791~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~74 Seth Kimball Rd~~ | ~~Pomfret Center~~ | ~~CT~~ | ~~06259~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Consultant~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/06/2026~~

Aggregate Contributions: ~~$50.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Tomczak~~ | ~~Stephen Monroe~~ | | ~~1792~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~60 Morningside Ter~~ | ~~Wallingford~~ | ~~CT~~ | ~~06492~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Southern Connecticut State University~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/06/2026~~

Aggregate Contributions: ~~$250.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Thompson~~ | ~~Tanner~~ | | ~~1793~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~16 Hillside St~~ | ~~Norwalk~~ | ~~CT~~ | ~~06854~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Google~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/06/2026~~

Aggregate Contributions: ~~$300.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Greco~~ | ~~Stephen~~ | | ~~1794~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~56 South Ave~~ | ~~North Haven~~ | ~~CT~~ | ~~06473~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Adobe~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/06/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Zuniga~~ | ~~Iliana~~ | | ~~1795~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~8 Running Brook Ln~~ | ~~Norwalk~~ | ~~CT~~ | ~~06850~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~PricewaterhouseCoopers~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/06/2026~~

Aggregate Contributions: ~~$50.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~zerzan~~ | ~~Barbara~~ | | ~~1796~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~36 Splitrock Rd~~ | ~~Norwalk~~ | ~~CT~~ | ~~06854~~ |

Principal Occupation:

Name of Employer: ~~CUNY~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/06/2026~~

Aggregate Contributions: ~~$125.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Johnston~~ | ~~Melissa~~ | | ~~1797~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~451 Herbert St~~ | ~~Orange~~ | ~~CT~~ | ~~06477~~ |

Principal Occupation:

Name of Employer: ~~Defibtech~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/06/2026~~

Aggregate Contributions: ~~$150.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Grotheer~~ | ~~Laurence~~ | | ~~1798~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1097 Johnson Rd~~ | ~~Woodbridge~~ | ~~CT~~ | ~~06525~~ |

Principal Occupation:

Name of Employer: ~~None~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/06/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~gianini~~ | ~~gary~~ | | ~~1799~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~5 Butternut Cir~~ | ~~Avon~~ | ~~CT~~ | ~~06001~~ |

Principal Occupation:

Name of Employer: ~~retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/06/2026~~

Aggregate Contributions: ~~$50.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Collier~~ | ~~Charles~~ | | ~~1800~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~154 Kohary Dr~~ | ~~New Haven~~ | ~~CT~~ | ~~06515~~ |

Principal Occupation:

Name of Employer: ~~Quinnipiac University~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/06/2026~~

Aggregate Contributions: ~~$400.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Villani~~ | ~~Jason~~ | | ~~1801~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~47 Parker Farms Rd~~ | ~~Wallingford~~ | ~~CT~~ | ~~06492~~ |

Principal Occupation:

Name of Employer: ~~New Britain Public Library~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/06/2026~~

Aggregate Contributions: ~~$125.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Gianini~~ | ~~Donna~~ | | ~~1802~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~5 Butternut Cir~~ | ~~Avon~~ | ~~CT~~ | ~~06001~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/06/2026~~

Aggregate Contributions: ~~$200.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Bruzzone~~ | ~~Lauren~~ | | ~~1803~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~143 Hoyt St~~ | ~~Stamford~~ | ~~CT~~ | ~~06905~~ |

Principal Occupation:

Name of Employer: ~~n/a~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/06/2026~~

Aggregate Contributions: ~~$100.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Hackett~~ | ~~Susan~~ | | ~~1804~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~42 Lakeside Dr~~ | ~~Granby~~ | ~~CT~~ | ~~06035~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/06/2026~~

Aggregate Contributions: ~~$50.00~~

~~$25.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Grzadko~~ | ~~Krzysztof~~ | | ~~1805~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~11 Sunnyside Ave~~ | ~~Hamden~~ | ~~CT~~ | ~~06518~~ |

Principal Occupation:

Name of Employer: ~~amazon~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/06/2026~~

Aggregate Contributions: ~~$77.00~~

~~$25.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **zerzan** | **Barbara** | | **1796** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **36 Splitrock Rd** | **Norwalk** | **CT** | **06854** |

Principal Occupation: **Professor**

Name of Employer: **CUNY**

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/06/2026**

Aggregate Contributions: **$100.00**

**$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Oberholtzer** | **Zachary** | | **1790** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **119 Towne St** | **Stamford** | **CT** | **06902** |

Principal Occupation: **Biochemist**

Name of Employer: **Regeneron Pharmaceuticals**

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/06/2026**

Aggregate Contributions: **$20.00**

**$20.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Kimball** | **Mary Eliza** | | **1791** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **74 Seth Kimball Rd** | **Pomfret Center** | **CT** | **06259** |

| Principal Occupation | Name of Employer |
|---|---|
| **Consultant** | **Consultant** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/06/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Tomczak** | **Stephen Monroe** | | **1792** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **60 Morningside Ter** | **Wallingford** | **CT** | **06492** |

| Principal Occupation | Name of Employer |
|---|---|
| **Professor** | **Southern Connecticut State University** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/06/2026**

Aggregate Contributions: **$150.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Thompson** | **Tanner** | | **1793** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **16 Hillside St** | **Norwalk** | **CT** | **06854** |

| Principal Occupation | Name of Employer |
|---|---|
| **Software Engineer** | **Google** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$150.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/06/2026**

Aggregate Contributions: **$150.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Greco** | **Stephen** | | **1794** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **56 South Ave** | **North Haven** | **CT** | **06473** |

| Principal Occupation | Name of Employer |
|---|---|
| **Manager** | **Adobe** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/06/2026**

Aggregate Contributions: **$25.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Zuniga** | **Iliana** | | **1795** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **8 Running Brook Ln** | **Norwalk** | **CT** | **06850** |

Principal Occupation: **Director Global Human Capital**

Name of Employer: **PricewaterhouseCoopers**

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/06/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~**zerzan**~~ | ~~**Barbara**~~ | | ~~**1796**~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~**36 Splitrock Rd**~~ | ~~**Norwalk**~~ | ~~**CT**~~ | ~~**06854**~~ |

Principal Occupation: ~~**Professor**~~

Name of Employer: ~~**CUNY**~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~**$25.00**~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~**03/06/2026**~~

Aggregate Contributions: ~~**$100.00**~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Johnston** | **Melissa** | | **1797** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **451 Herbert St** | **Orange** | **CT** | **06477** |

Principal Occupation: **Marketing**

Name of Employer: **Defibtech**

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/06/2026**

Aggregate Contributions: **$100.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Grotheer** | **Laurence** | | **1798** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **1097 Johnson Rd** | **Woodbridge** | **CT** | **06525** |

Principal Occupation: **Retired**

Name of Employer: **None**

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/06/2026**

Aggregate Contributions: **$50.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| gianini | gary | | 1799 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 5 Butternut Cir | Avon | CT | 06001 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/06/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Collier~~ | ~~Charles~~ | | ~~1800~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~154 Kohary Dr~~ | ~~New Haven~~ | ~~CT~~ | ~~06515~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Assistant Dean~~ | ~~Quinnipiac University~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/06/2026~~

Aggregate Contributions: ~~$300.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Villani | Jason | | 1801 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 47 Parker Farms Rd | Wallingford | CT | 06492 |

| Principal Occupation | Name of Employer |
|---|---|
| Librarian | New Britain Public Library |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/06/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Gianini | Donna | | 1802 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 5 Butternut Cir | Avon | CT | 06001 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/06/2026

Aggregate Contributions: $100.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Bruzzone** | **Lauren** | | **1803** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **143 Hoyt St** | **Stamford** | **CT** | **06905** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **n/a** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/06/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Hackett** | **Susan** | | **1804** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **42 Lakeside Dr** | **Granby** | **CT** | **06035** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/06/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Grzadko** | **Krzysztof** | | **1805** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **11 Sunnyside Ave** | **Hamden** | **CT** | **06518** |

| Principal Occupation | Name of Employer |
|---|---|
| **IT** | **amazon** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/06/2026**

Aggregate Contributions: **$52.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Collier** | **Charles** | | **1800** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **154 Kohary Dr** | **New Haven** | **CT** | **06515** |

| Principal Occupation | Name of Employer |
|---|---|
| **Assistant Dean** | **Quinnipiac University** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/06/2026**

Aggregate Contributions: **$300.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Bacon** | **Pam** | | **1743** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **514 Myers Park Dr** | **Lexington** | **NC** | **27292** |

| Principal Occupation | Name of Employer |
|---|---|
| **Customer Host** | **Walmart** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$10.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Lichau** | **Patricia** | | **1750** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **4994 N Highway 101 Unit 675** | **Neotsu** | **OR** | **97364** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$10.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Pschaida** | **Jenny** | | **1772** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **1705 Madrone Ave** | **Eureka** | **CA** | **95503** |

| Principal Occupation | Name of Employer |
|---|---|
| **LVN/Paraprofessional** | **Humboldt County Office of Education** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$10.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Alexander~~ | ~~Zachary~~ | | ~~1754~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~101 Stewart St~~ | ~~New Britain~~ | ~~CT~~ | ~~06053~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~State of Connecticut~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$340.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$680.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Gray~~ | ~~Karen A~~ | | ~~1755~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~88 Clinton Pl~~ | ~~Hackensack~~ | ~~NJ~~ | ~~07601~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/07/2026~~ | ~~$50.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Perry~~ | ~~John~~ | | ~~1756~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~51 Kihalani St~~ | ~~Kihei~~ | ~~HI~~ | |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/07/2026~~ | ~~$10.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Contario~~ | ~~John~~ | | ~~1757~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1034 W Fosters Maineville Rd~~ | ~~Maineville~~ | ~~OH~~ | |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$20.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/07/2026~~ | ~~$40.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Hibbs~~ | ~~Carol~~ | | ~~1758~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~6205 SW Sheridan St~~ | ~~Portland~~ | ~~OR~~ | ~~97225~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/07/2026~~ | ~~$50.00~~ |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Dandashi~~ | ~~Omar~~ | | ~~1759~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~8218 Brookshire Ct~~ | ~~Eastvale~~ | ~~CA~~ | ~~92880~~ |

Principal Occupation:

Name of Employer: ~~Pacific Oak Partnership~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Hardy~~ | ~~Travis~~ | | ~~1760~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~7 Homer St~~ | ~~Norwalk~~ | ~~CT~~ | ~~06851~~ |

Principal Occupation:

Name of Employer: ~~Classroom Champions~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$115.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$455.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Golden~~ | ~~Kathleen~~ | | ~~1761~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~PO Box 647~~ | ~~Volcano~~ | ~~HI~~ | ~~96785~~ |

Principal Occupation:

Name of Employer: ~~None~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Harrison~~ | ~~Deborah~~ | | ~~1762~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~3718 Woods Blvd .~~ | ~~Tyler~~ | ~~TX~~ | ~~75707~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$20.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$40.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Lopez~~ | ~~John~~ | | ~~1763~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~256 S Aldine Ave~~ | ~~Elgin~~ | ~~IL~~ | ~~60123~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~IL~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/07/2026~~ | ~~$10.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Gauthier~~ | ~~Bonnie~~ | | ~~1764~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~83 R King Philip Dr~~ | ~~West Hartford~~ | ~~CT~~ | ~~06117~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/07/2026~~ | ~~$20.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Fallon~~ | ~~Frank~~ | | ~~1765~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~224 Ridgewood Ave~~ | ~~Minneapolis~~ | ~~MN~~ | ~~55403~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/07/2026~~ | ~~$100.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~King~~ | ~~Elizabeth~~ | | ~~1766~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~214 4th St~~ | ~~Sausalito~~ | ~~CA~~ | ~~94965~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/07/2026~~ | ~~$150.00~~ |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Mattern~~ | ~~Hugh~~ | | ~~1767~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1211 S 47th St~~ | ~~Lincoln~~ | ~~NE~~ | ~~68510~~ |

Principal Occupation:

Name of Employer: ~~No~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Haber~~ | ~~Lois~~ | | ~~1768~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~560 S Bryn Mawr Ave~~ | ~~Bryn Mawr~~ | ~~PA~~ | ~~19010~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$20.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$40.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Parkin~~ | ~~Chris~~ | | ~~1769~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~19 Indian Hill Rd~~ | ~~Redding~~ | ~~CT~~ | |

Principal Occupation:

Name of Employer: ~~Attorney~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Collins~~ | ~~Rita~~ | | ~~1770~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1490 7th St NW~~ | ~~Washington~~ | ~~DC~~ | ~~20001~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$50.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Leming~~ | ~~James~~ | | ~~1771~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~21515 W Rainbow Dr~~ | ~~New Berlin~~ | ~~WI~~ | ~~53146~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$20.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Pschaida~~ | ~~Jenny~~ | | ~~1772~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1705 Madrone Ave~~ | ~~Eureka~~ | ~~CA~~ | ~~95503~~ |

Principal Occupation:

Name of Employer: ~~None~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$15.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Haffner~~ | ~~Marlene~~ | | ~~1773~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~7051 Rockledge Dr~~ | ~~Bethesda~~ | ~~MD~~ | ~~20817~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$15.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$30.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Metz~~ | ~~Robert~~ | | ~~1774~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~3103 Plantation Rd~~ | ~~Raleigh Nc~~ | ~~NC~~ | ~~27609~~ |

Principal Occupation:

Name of Employer: ~~NC~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$15.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$30.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Peck~~ | ~~Susan~~ | | ~~1775~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~100 Eldridge Ave~~ | ~~Mill Valley~~ | ~~CA~~ | ~~94941~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$150.00~~

~~$75.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Marshall`~~ | ~~Senseney~~ | | ~~1776~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~6436 Quincy Pl~~ | ~~Falls Church~~ | ~~VA~~ | ~~22042~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$20.00~~

~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Converse~~ | ~~William~~ | | ~~1777~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~295 Westdale Dr~~ | ~~Santa Cruz~~ | ~~CA~~ | ~~95060~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$20.00~~

~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Wilson~~ | ~~Jane~~ | | ~~1778~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~2455 Overlook Dr .~~ | ~~Broomfield~~ | ~~CO~~ | ~~80020~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$10.00~~

~~$5.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Davis~~ | ~~Chet~~ | | ~~1779~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~57 Bethpage Dr~~ | ~~Laguna Vista~~ | ~~TX~~ | ~~78578~~ |

Principal Occupation:

Name of Employer: ~~N/A~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Russell Shalev~~ | ~~Lorenna~~ | | ~~1780~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~2300 W Alameda ,~~ | ~~Santa Fe~~ | ~~NM~~ | ~~87507~~ |

Principal Occupation:

Name of Employer: ~~Unemployed~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Bartholomew~~ | ~~Harland~~ | | ~~1781~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~5002~~ | ~~Spring Hill~~ | ~~TN~~ | ~~37174~~ |

Principal Occupation:

Name of Employer: ~~Retired ret~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Thomas~~ | ~~Walter~~ | | ~~1782~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~405 W Broad St~~ | ~~Bethlehem~~ | ~~PA~~ | ~~18018~~ |

Principal Occupation:

Name of Employer: ~~Mack Trucks~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$20.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$40.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Colson~~ | ~~Ed~~ | | ~~1783~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~4032 S 159th Ln .~~ | ~~Tukwila~~ | ~~WA~~ | ~~98188~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/07/2026~~ | ~~$10.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Gallues~~ | ~~Felis~~ | | ~~1784~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~775 Manor Dr~~ | ~~Reno~~ | ~~NV~~ | ~~89509~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~N/a~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/07/2026~~ | ~~$10.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Campbell~~ | ~~Marilyn~~ | | ~~1785~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~11818 97th Ln NE~~ | ~~Kirkland~~ | ~~WA~~ | ~~98034~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/07/2026~~ | ~~$50.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Connor~~ | ~~Claudia~~ | | ~~1786~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~11 Green Hill Rd~~ | ~~Norwalk~~ | ~~CT~~ | ~~06850~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/07/2026~~ | ~~$50.00~~ |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Gulyas~~ | ~~Ashley~~ | | ~~1787~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~5 Cliffview Dr~~ | ~~Norwalk~~ | ~~CT~~ | ~~06850~~ |

Principal Occupation:

Name of Employer: ~~Homemaker~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$150.00~~

~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Morelli~~ | ~~Meaghan~~ | | ~~1788~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~33 Kalan Cir~~ | ~~Fairfield~~ | ~~CT~~ | ~~06824~~ |

Principal Occupation:

Name of Employer: ~~Unemployed~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$30.00~~

~~$5.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Hill~~ | ~~Katie~~ | | ~~1789~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~43 Firetower Rd~~ | ~~Pomfret Center~~ | ~~CT~~ | ~~06259~~ |

Principal Occupation:

Name of Employer: ~~Old SturbridgeVillage~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$10.00~~

~~$5.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Cauley~~ | ~~Patricia~~ | | ~~1735~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~313 E Village Ct~~ | ~~Dousman~~ | ~~WI~~ | ~~53118~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$10.00~~

~~$5.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Yingling~~ | ~~Daniel~~ | | ~~1736~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~222 Williams St E~~ | ~~Glastonbury~~ | ~~CT~~ | ~~06033~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Daida~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$450.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Nagle~~ | ~~Carol~~ | | ~~1737~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~3116 Vichy Ave .~~ | ~~Napa~~ | ~~CA~~ | ~~94558~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CA~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Sideriadis~~ | ~~Jon~~ | | ~~1738~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1886 Chalker Hl~~ | ~~Glastonbury~~ | ~~CT~~ | ~~06033~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Astromythos Studios LLC~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~King~~ | ~~John~~ | | ~~1739~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~429 Lost Tree Ln~~ | ~~Farragut~~ | ~~TN~~ | ~~37934~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$200.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Murphy~~ | ~~Linda~~ | | ~~1740~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~7576 Hinton Park Ave S~~ | ~~Cottage Grove~~ | ~~MN~~ | ~~55016~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$11.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$22.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Connery~~ | ~~Bruce~~ | | ~~1741~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~7812 S 4500 W~~ | ~~Victor~~ | ~~ID~~ | ~~83455~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Thomson~~ | ~~Mary~~ | | ~~1742~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~2916 Raleigh Ct~~ | ~~Naperville~~ | ~~IL~~ | ~~60564~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Bacon~~ | ~~Pam~~ | | ~~1743~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~514 Myers Park Dr~~ | ~~Lexington~~ | ~~NC~~ | ~~27292~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~NC~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$15.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Boyd~~ | ~~Jeffrey~~ | | ~~1744~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~57 Woods Rd~~ | ~~Bethany~~ | ~~CT~~ | ~~06524~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$340.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$680.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Leviton~~ | ~~Ann~~ | | ~~1745~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~701 Snowy Plain Rd~~ | ~~Fort Collins~~ | ~~CO~~ | ~~80525~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CO~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Post~~ | ~~Allan~~ | | ~~1746~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1595 W Thornhill Dr Apt 1217~~ | ~~Taylorsville~~ | ~~UT~~ | ~~84123~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~UT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Wery~~ | ~~Susan~~ | | ~~1747~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~4042 N 88th St~~ | ~~Milwaukee~~ | ~~WI~~ | ~~53222~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~WI~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$15.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Gauthier~~ | ~~Nicholas~~ | | ~~1748~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~38 Norman St~~ | ~~Waterford~~ | ~~CT~~ | ~~06385~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Connecticut General Assembly~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$27.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$160.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Rowley~~ | ~~Jacob~~ | | ~~1749~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~59 Mill Pond Rd~~ | ~~Broad Brook~~ | ~~CT~~ | ~~06016~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Mitchell Auto Group~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Lichau~~ | ~~Patricia~~ | | ~~1750~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~4994 N Highway 101 Unit 675~~ | ~~Neotsu~~ | ~~OR~~ | ~~97364~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~OR~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$15.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Gasser~~ | ~~Joseph~~ | | ~~1751~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~573 Moss Farms Rd~~ | ~~Cheshire~~ | ~~CT~~ | ~~06410~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~State of CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/07/2026~~

Aggregate Contributions: ~~$200.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Fortin~~ | ~~Sarah~~ | | ~~1752~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~101 Stewart St~~ | ~~New Britain~~ | ~~CT~~ | ~~06053~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$340.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/07/2026~~ | ~~$680.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Bruckner~~ | ~~Steven~~ | | ~~1753~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~2448 NW Westover Rd~~ | ~~Portland~~ | ~~OR~~ | ~~97210~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/07/2026~~ | ~~$50.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Yingling** | **Daniel** | | **1736** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **222 Williams St E** | **Glastonbury** | **CT** | **06033** |

| Principal Occupation | Name of Employer |
|---|---|
| **Software Developer** | **Daida** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$150.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☒ Personal Check ☐ Money Order ☐ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| **03/07/2026** | **$300.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Wery** | **Susan** | | **1747** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **4042 N 88th St** | **Milwaukee** | **WI** | **53222** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| **03/07/2026** | **$10.00** |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Cauley** | **Patricia** | | **1735** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **313 E Village Ct** | **Dousman** | **WI** | **53118** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~**Yingling**~~ | ~~**Daniel**~~ | | ~~**1736**~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~**222 Williams St E**~~ | ~~**Glastonbury**~~ | ~~**CT**~~ | ~~**06033**~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~**Software Developer**~~ | ~~**Daida**~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~**$150.00**~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~**03/07/2026**~~

Aggregate Contributions: ~~**$300.00**~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Nagle** | **Carol** | | **1737** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **3116 Vichy Ave .** | **Napa** | **CA** | **94558** |

| Principal Occupation | Name of Employer |
|---|---|
| **Psychotherapist** | **CA** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Sideriadis** | **Jon** | | **1738** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **1886 Chalker Hl** | **Glastonbury** | **CT** | **06033** |

| Principal Occupation | Name of Employer |
|---|---|
| **Illustrator** | **Astromythos Studios LLC** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$5.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **King** | **John** | | **1739** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **429 Lost Tree Ln** | **Farragut** | **TN** | **37934** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$100.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Murphy** | **Linda** | | **1740** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **7576 Hinton Park Ave S** | **Cottage Grove** | **MN** | **55016** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$11.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$11.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Connery** | **Bruce** | | **1741** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **7812 S 4500 W** | **Victor** | **ID** | **83455** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Thomson** | **Mary** | | **1742** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **2916 Raleigh Ct** | **Naperville** | **IL** | **60564** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$50.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Bacon~~ | ~~Pam~~ | | ~~1743~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~514 Myers Park Dr~~ | ~~Lexington~~ | ~~NC~~ | ~~27292~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Asset Protection~~ | ~~NC~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/07/2026~~ | ~~$10.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Boyd | Jeffrey | | 1744 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 57 Woods Rd | Bethany | CT | 06524 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $340.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/07/2026 | $340.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Leviton | Ann | | 1745 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 701 Snowy Plain Rd | Fort Collins | CO | 80525 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | CO |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/07/2026 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Post | Allan | | 1746 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1595 W Thornhill Dr Apt 1217 | Taylorsville | UT | 84123 |

| Principal Occupation | Name of Employer |
|---|---|
| Call Center Agent | UT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/07/2026 | $5.00 |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Wery~~ | ~~Susan~~ | | ~~1747~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~4042 N 88th St~~ | ~~Milwaukee~~ | ~~WI~~ | ~~53222~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~WI~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/07/2026~~ | ~~$10.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Gauthier | Nicholas | | 1748 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 38 Norman St | Waterford | CT | 06385 |

| Principal Occupation | Name of Employer |
|---|---|
| State Representative | Connecticut General Assembly |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $27.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/07/2026 | $133.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Rowley | Jacob | | 1749 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 59 Mill Pond Rd | Broad Brook | CT | 06016 |

| Principal Occupation | Name of Employer |
|---|---|
| Technician | Mitchell Auto Group |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/07/2026 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Lichau~~ | ~~Patricia~~ | | ~~1750~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~4994 N Highway 101 Unit 675~~ | ~~Neotsu~~ | ~~OR~~ | ~~97364~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~OR~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/07/2026~~ | ~~$10.00~~ |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Gasser | Joseph | | 1751 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 573 Moss Farms Rd | Cheshire | CT | 06410 |

| Principal Occupation | Name of Employer |
|---|---|
| attorney | State of CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/07/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Fortin | Sarah | | 1752 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 101 Stewart St | New Britain | CT | 06053 |

| Principal Occupation | Name of Employer |
|---|---|
| Physician | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $340.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/07/2026

Aggregate Contributions: $340.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Bruckner | Steven | | 1753 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 2448 NW Westover Rd | Portland | OR | 97210 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/07/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Alexander | Zachary | | 1754 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 101 Stewart St | New Britain | CT | 06053 |

| Principal Occupation | Name of Employer |
|---|---|
| attorney | State of Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $340.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/07/2026

Aggregate Contributions: $340.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Gray** | **Karen A** | | **1755** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **88 Clinton Pl** | **Hackensack** | **NJ** | **07601** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Perry** | **John** | | **1756** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **51 Kihalani St** | **Kihei** | **HI** | |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Contario** | **John** | | **1757** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **1034 W Fosters Maineville Rd** | **Maineville** | **OH** | |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$20.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$20.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Hibbs** | **Carol** | | **1758** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **6205 SW Sheridan St** | **Portland** | **OR** | **97225** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$25.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Dandashi** | **Omar** | | **1759** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **8218 Brookshire Ct** | **Eastvale** | **CA** | **92880** |

| Principal Occupation | Name of Employer |
|---|---|
| **Engineer** | **Pacific Oak Partnership** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Hardy** | **Travis** | | **1760** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **7 Homer St** | **Norwalk** | **CT** | **06851** |

| Principal Occupation | Name of Employer |
|---|---|
| **Consultant** | **Classroom Champions** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$115.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$340.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Golden** | **Kathleen** | | **1761** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **PO Box 647** | **Volcano** | **HI** | **96785** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **None** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Harrison** | **Deborah** | | **1762** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **3718 Woods Blvd .** | **Tyler** | **TX** | **75707** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$20.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$20.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Lopez** | **John** | | **1763** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **256 S Aldine Ave** | **Elgin** | **IL** | **60123** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **IL** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Gauthier** | **Bonnie** | | **1764** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **83 R King Philip Dr** | **West Hartford** | **CT** | **06117** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$10.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Fallon** | **Frank** | | **1765** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **224 Ridgewood Ave** | **Minneapolis** | **MN** | **55403** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **King** | **Elizabeth** | | **1766** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **214 4th St** | **Sausalito** | **CA** | **94965** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$75.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Mattern** | **Hugh** | | **1767** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **1211 S 47th St** | **Lincoln** | **NE** | **68510** |

| Principal Occupation | Name of Employer |
|---|---|
| **None** | **No** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Haber** | **Lois** | | **1768** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **560 S Bryn Mawr Ave** | **Bryn Mawr** | **PA** | **19010** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$20.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$20.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Parkin** | **Chris** | | **1769** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **19 Indian Hill Rd** | **Redding** | **CT** | |

| Principal Occupation | Name of Employer |
|---|---|
| **Attorney** | **Attorney** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Collins** | **Rita** | | **1770** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **1490 7th St NW** | **Washington** | **DC** | **20001** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$25.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Leming** | **James** | | **1771** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **21515 W Rainbow Dr** | **New Berlin** | **WI** | **53146** |

| Principal Occupation | Name of Employer |
|---|---|
| **Unemployed** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$10.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~**Pschaida**~~ | ~~**Jenny**~~ | | ~~**1772**~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~**1705 Madrone Ave**~~ | ~~**Eureka**~~ | ~~**CA**~~ | ~~**95503**~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~**Nurse**~~ | ~~**None**~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~**$5.00**~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~**03/07/2026**~~

Aggregate Contributions: ~~**$10.00**~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Haffner** | **Marlene** | | **1773** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **7051 Rockledge Dr** | **Bethesda** | **MD** | **20817** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$15.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$15.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Metz** | **Robert** | | **1774** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **3103 Plantation Rd** | **Raleigh Nc** | **NC** | **27609** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **NC** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$15.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$15.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Peck | Susan | | 1775 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 100 Eldridge Ave | Mill Valley | CA | 94941 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/07/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Marshall` | Senseney | | 1776 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 6436 Quincy Pl | Falls Church | VA | 22042 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/07/2026

Aggregate Contributions: $10.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Converse | William | | 1777 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 295 Westdale Dr | Santa Cruz | CA | 95060 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/07/2026

Aggregate Contributions: $10.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Wilson | Jane | | 1778 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 2455 Overlook Dr . | Broomfield | CO | 80020 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/07/2026

Aggregate Contributions: $5.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Davis** | **Chet** | | **1779** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **57 Bethpage Dr** | **Laguna Vista** | **TX** | **78578** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **N/A** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Russell Shalev** | **Lorenna** | | **1780** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **2300 W Alameda ,** | **Santa Fe** | **NM** | **87507** |

| Principal Occupation | Name of Employer |
|---|---|
| **Unemployed** | **Unemployed** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Bartholomew** | **Harland** | | **1781** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **5002** | **Spring Hill** | **TN** | **37174** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired ret** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Thomas** | **Walter** | | **1782** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **405 W Broad St** | **Bethlehem** | **PA** | **18018** |

| Principal Occupation | Name of Employer |
|---|---|
| **Materials** | **Mack Trucks** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$20.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$20.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Colson** | **Ed** | | **1783** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **4032 S 159th Ln .** | **Tukwila** | **WA** | **98188** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Gallues** | **Felis** | | **1784** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **775 Manor Dr** | **Reno** | **NV** | **89509** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **N/a** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Campbell** | **Marilyn** | | **1785** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **11818 97th Ln NE** | **Kirkland** | **WA** | **98034** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Connor** | **Claudia** | | **1786** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **11 Green Hill Rd** | **Norwalk** | **CT** | **06850** |

| Principal Occupation | Name of Employer |
|---|---|
| **Nonprofit leadership** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$25.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Gulyas** | **Ashley** | | **1787** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **5 Cliffview Dr** | **Norwalk** | **CT** | **06850** |

| Principal Occupation | Name of Employer |
|---|---|
| **Homemaker** | **Homemaker** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$100.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Morelli** | **Meaghan** | | **1788** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **33 Kalan Cir** | **Fairfield** | **CT** | **06824** |

| Principal Occupation | Name of Employer |
|---|---|
| **Unemployed** | **Unemployed** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$15.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Hill** | **Katie** | | **1789** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **43 Firetower Rd** | **Pomfret Center** | **CT** | **06259** |

| Principal Occupation | Name of Employer |
|---|---|
| **Museum Educator** | **Old SturbridgeVillage** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/07/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Lofquist~~ | ~~Robin~~ | | ~~1710~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~25 Lafantasie Rd~~ | ~~Danielson~~ | ~~CT~~ | ~~06239~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/08/2026~~

Aggregate Contributions: ~~$100.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Lynch~~ | ~~Joyce~~ | | ~~1711~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~7 Clearview Dr~~ | ~~Wallingford~~ | ~~CT~~ | ~~06492~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/08/2026~~

Aggregate Contributions: ~~$20.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Martin~~ | ~~Richard~~ | | ~~1712~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~195 Northfield Rd~~ | ~~Coventry~~ | ~~CT~~ | ~~06238~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/08/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Kowerko~~ | ~~Irene~~ | | ~~1713~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~75 Brentwood Dr~~ | ~~Wallingford~~ | ~~CT~~ | ~~06492~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/08/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~York~~ | ~~Jason~~ | | ~~1714~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~150 Dowd St~~ | ~~Newington~~ | ~~CT~~ | ~~06111~~ |

Principal Occupation:

Name of Employer: ~~State of Connecticut~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/08/2026~~

Aggregate Contributions: ~~$175.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Poulos~~ | ~~Leslie~~ | | ~~1715~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~5 Sleepy Hollow Rd~~ | ~~Columbia~~ | ~~CT~~ | ~~06237~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Richmond Memorial Library~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/08/2026~~ | ~~$300.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Williams~~ | ~~Leslie~~ | | ~~1716~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~595 Woodhouse Ave~~ | ~~Wallingford~~ | ~~CT~~ | ~~06492~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/08/2026~~ | ~~$50.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Nasper~~ | ~~Ellen~~ | | ~~1717~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~7 Burns St~~ | ~~New Haven~~ | ~~CT~~ | |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/08/2026~~ | ~~$50.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Buhler~~ | ~~William~~ | | ~~1718~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~8 Winchester Way~~ | ~~Cromwell~~ | ~~CT~~ | ~~06416~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/08/2026~~ | ~~$500.00~~ |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Kassen~~ | ~~Margaret~~ | | ~~1719~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~269 Moody Mountain Rd~~ | ~~Lincolnville~~ | ~~ME~~ | ~~04849~~ |

Principal Occupation:

Name of Employer:

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/08/2026~~

Aggregate Contributions: ~~$680.00~~

~~$340.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Nastri~~ | ~~Pasquale~~ | | ~~1720~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~3 Crystal Ln~~ | ~~Wallingford~~ | ~~CT~~ | |

Principal Occupation:

Name of Employer: ~~Unemployed~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/08/2026~~

Aggregate Contributions: ~~$10.00~~

~~$5.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Keller-McFarlane~~ | ~~Sarah~~ | | ~~1721~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~8 Essex St~~ | ~~Fairfield~~ | ~~CT~~ | ~~06825~~ |

Principal Occupation:

Name of Employer: ~~USAA~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/08/2026~~

Aggregate Contributions: ~~$780.00~~

~~$340.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Johnson~~ | ~~Tracy~~ | | ~~1722~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~62 Grant Rd~~ | ~~Bethany~~ | ~~CT~~ | ~~06524~~ |

Principal Occupation:

Name of Employer: ~~Stone Veterinary Hospital~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/08/2026~~

Aggregate Contributions: ~~$150.00~~

~~$50.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Helfers~~ | ~~Robin~~ | | ~~1723~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~14274 Action St~~ | ~~Brooksville~~ | ~~FL~~ | ~~34613~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/08/2026~~ | ~~$10.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Fucci~~ | ~~Laura~~ | | ~~1724~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~418 Anderson Ave~~ | ~~Milford~~ | ~~CT~~ | |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~City of Milford~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/08/2026~~ | ~~$100.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Villone~~ | ~~Craig~~ | | ~~1725~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~60 Elika Rd~~ | ~~Wallingford~~ | ~~CT~~ | ~~06492~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$30.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/08/2026~~ | ~~$175.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Hilpert~~ | ~~Julie~~ | | ~~1726~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~2310 Prince St~~ | ~~Durham~~ | ~~NC~~ | ~~27707~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/08/2026~~ | ~~$50.00~~ |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Staehle~~ | ~~Bruce~~ | | ~~1727~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~398 Brickyard Rd~~ | ~~Woodstock~~ | ~~CT~~ | ~~06281~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/08/2026~~

Aggregate Contributions: ~~$350.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Richardson~~ | ~~Jewu~~ | | ~~1728~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~466 Middletown Ave~~ | ~~New Haven~~ | ~~CT~~ | ~~06513~~ |

Principal Occupation:

Name of Employer: ~~N/A~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$340.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/08/2026~~

Aggregate Contributions: ~~$680.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Askey~~ | ~~David~~ | | ~~1729~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~350 Ponca Pl Apt 335~~ | ~~Boulder~~ | ~~CO~~ | |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/08/2026~~

Aggregate Contributions: ~~$20.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Seaman~~ | ~~Diane~~ | | ~~1730~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~4103 Baker Ln~~ | ~~Pendleton~~ | ~~KY~~ | ~~40055~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/08/2026~~

Aggregate Contributions: ~~$50.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Stone~~ | ~~Rich~~ | | ~~1731~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~8 Northfield Rd~~ | ~~Simsbury~~ | ~~CT~~ | ~~06070~~ |

Principal Occupation:

Name of Employer: ~~Pratt and Whitney~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/08/2026~~

Aggregate Contributions: ~~$200.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Zeftel~~ | ~~Peter~~ | | ~~1732~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~3840 Elliot Ave~~ | ~~Minneapolis~~ | ~~MN~~ | ~~55407~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/08/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Wennerstrand~~ | ~~Anne~~ | | ~~1733~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~17 Rome St~~ | ~~Norwalk~~ | ~~CT~~ | ~~06851~~ |

Principal Occupation:

Name of Employer: ~~Anne Wennerstrand Integrated Psych, LCSW, PC~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/08/2026~~

Aggregate Contributions: ~~$150.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Yow~~ | ~~Linda~~ | | ~~1734~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~22890 State Highway Dd~~ | ~~Glenallen~~ | ~~MO~~ | ~~63751~~ |

Principal Occupation:

Name of Employer: ~~Retired educator~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$6.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/08/2026~~

Aggregate Contributions: ~~$12.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Lofquist** | **Robin** | | **1710** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **25 Lafantasie Rd** | **Danielson** | **CT** | **06239** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/08/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Lynch** | **Joyce** | | **1711** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **7 Clearview Dr** | **Wallingford** | **CT** | **06492** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/08/2026**

Aggregate Contributions: **$10.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Martin** | **Richard** | | **1712** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **195 Northfield Rd** | **Coventry** | **CT** | **06238** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/08/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Kowerko** | **Irene** | | **1713** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **75 Brentwood Dr** | **Wallingford** | **CT** | **06492** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/08/2026**

Aggregate Contributions: **$25.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **York** | **Jason** | | **1714** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **150 Dowd St** | **Newington** | **CT** | **06111** |

| Principal Occupation | Name of Employer |
|---|---|
| **Communications Manager** | **State of Connecticut** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/08/2026**

Aggregate Contributions: **$125.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Poulos** | **Leslie** | | **1715** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **5 Sleepy Hollow Rd** | **Columbia** | **CT** | **06237** |

| Principal Occupation | Name of Employer |
|---|---|
| **Librarian** | **Richmond Memorial Library** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$150.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/08/2026**

Aggregate Contributions: **$150.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Williams** | **Leslie** | | **1716** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **595 Woodhouse Ave** | **Wallingford** | **CT** | **06492** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/08/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Nasper** | **Ellen** | | **1717** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **7 Burns St** | **New Haven** | **CT** | |

| Principal Occupation | Name of Employer |
|---|---|
| **Clinical Psychologist** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/08/2026**

Aggregate Contributions: **$25.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Buhler** | **William** | | **1718** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **8 Winchester Way** | **Cromwell** | **CT** | **06416** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/08/2026**

Aggregate Contributions: **$400.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Kassen** | **Margaret** | | **1719** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **269 Moody Mountain Rd** | **Lincolnville** | **ME** | **04849** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$340.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/08/2026**

Aggregate Contributions: **$340.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Nastri** | **Pasquale** | | **1720** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **3 Crystal Ln** | **Wallingford** | **CT** | |

| Principal Occupation | Name of Employer |
|---|---|
| **unemployed** | **Unemployed** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/08/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Keller-McFarlane** | **Sarah** | | **1721** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **8 Essex St** | **Fairfield** | **CT** | **06825** |

| Principal Occupation | Name of Employer |
|---|---|
| **Attorney** | **USAA** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$340.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/08/2026**

Aggregate Contributions: **$440.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Johnson** | **Tracy** | | **1722** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **62 Grant Rd** | **Bethany** | **CT** | **06524** |

| Principal Occupation | Name of Employer |
|---|---|
| **Veterinarian** | **Stone Veterinary Hospital** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **03/08/2026** | **$100.00** | **$50.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Helfers** | **Robin** | | **1723** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **14274 Action St** | **Brooksville** | **FL** | **34613** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **03/08/2026** | **$5.00** | **$5.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Fucci** | **Laura** | | **1724** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **418 Anderson Ave** | **Milford** | **CT** | |

| Principal Occupation | Name of Employer |
|---|---|
| **Deputy Resgitrar of Voters** | **City of Milford** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **03/08/2026** | **$75.00** | **$25.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Villone** | **Craig** | | **1725** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **60 Elika Rd** | **Wallingford** | **CT** | **06492** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **03/08/2026** | **$115.00** | **$30.00** |

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Hilpert** | **Julie** | | **1726** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **2310 Prince St** | **Durham** | **NC** | **27707** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/08/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Staehle** | **Bruce** | | **1727** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **398 Brickyard Rd** | **Woodstock** | **CT** | **06281** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$150.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/08/2026**

Aggregate Contributions: **$200.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Richardson** | **Jewu** | | **1728** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **466 Middletown Ave** | **New Haven** | **CT** | **06513** |

| Principal Occupation | Name of Employer |
|---|---|
| **n/a** | **N/A** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$340.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/08/2026**

Aggregate Contributions: **$340.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Askey** | **David** | | **1729** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **350 Ponca Pl Apt 335** | **Boulder** | **CO** | |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/08/2026**

Aggregate Contributions: **$10.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Seaman** | **Diane** | | **1730** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **4103 Baker Ln** | **Pendleton** | **KY** | **40055** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/08/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Stone** | **Rich** | | **1731** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **8 Northfield Rd** | **Simsbury** | **CT** | **06070** |

| Principal Occupation | Name of Employer |
|---|---|
| **Operations** | **Pratt and Whitney** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/08/2026**

Aggregate Contributions: **$100.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Zeftel** | **Peter** | | **1732** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **3840 Elliot Ave** | **Minneapolis** | **MN** | **55407** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/08/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Wennerstrand** | **Anne** | | **1733** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **17 Rome St** | **Norwalk** | **CT** | **06851** |

| Principal Occupation | Name of Employer |
|---|---|
| **Clinical Social Worker** | **Anne Wennerstrand Integrated Psych, LCSW, PC** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/08/2026**

Aggregate Contributions: **$75.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Yow** | **Linda** | | **1734** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **22890 State Highway Dd** | **Glenallen** | **MO** | **63751** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired educator** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$6.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/08/2026**

Aggregate Contributions: **$6.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Ryan~~ | ~~Patricia~~ | | ~~1692~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~26 Melbourne Rd~~ | ~~Norwalk~~ | ~~CT~~ | ~~06851~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Tricia Ryan Counseling PLLC~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/09/2026~~

Aggregate Contributions: ~~$500.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Catarineau~~ | ~~Luz~~ | | ~~1693~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~203 Rosette St~~ | ~~New Haven~~ | ~~CT~~ | ~~06519~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/09/2026~~

Aggregate Contributions: ~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Josephsen~~ | ~~Jeremiah~~ | | ~~1694~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~184 Scribner Ave~~ | ~~Norwalk~~ | ~~CT~~ | ~~06854~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~BSN Sports~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/09/2026~~

Aggregate Contributions: ~~$375.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Madore~~ | ~~Paul~~ | | ~~1695~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~63 Greenwoods Rd E~~ | ~~Norfolk~~ | ~~CT~~ | ~~06058~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/09/2026~~

Aggregate Contributions: ~~$120.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Buck~~ | ~~Robert~~ | | ~~1696~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~116 N Georges Hill Rd~~ | ~~Southbury~~ | ~~CT~~ | ~~06488~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Waterbury Eye Associates~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$200.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/09/2026~~

Aggregate Contributions: ~~$400.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Stewart~~ | ~~Tricia~~ | | ~~1697~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~894 Peter Rd~~ | ~~Southbury~~ | ~~CT~~ | ~~06488~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~WCSU~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/09/2026~~

Aggregate Contributions: ~~$225.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Desmarais~~ | ~~Jeffrey~~ | | ~~1698~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~294 Neill Dr~~ | ~~Watertown~~ | ~~CT~~ | ~~06795~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Legion Financial~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/09/2026~~

Aggregate Contributions: ~~$100.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| de Castro | Bernardo | | 1699 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 58 Quail Run Rd | Woodbury | CT | |

Principal Occupation:

Name of Employer: Danbury public schools

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/09/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| DeMallie | Robert | | 1700 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 275B Heritage Vlg | Southbury | CT | 06488 |

Principal Occupation:

Name of Employer: CT

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/09/2026

Aggregate Contributions: $300.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Simpson | Nathan | | 1701 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 407 Monroe St | New Britain | CT | |

Principal Occupation:

Name of Employer: Grass Routes, LLC

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/09/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Dyess | Reona | | 1702 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 4 Harbor Ln | New London | CT | 06320 |

Principal Occupation:

Name of Employer: The Center: A Drop-In Community Learning and Resou

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/09/2026

Aggregate Contributions: $100.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Lasta19323dd~~ | ~~First1b45b070~~ | | ~~1703~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~76 Ranch Rd~~ | ~~Milford~~ | ~~CT~~ | ~~06460~~ |

Principal Occupation:

Name of Employer: ~~Clinical social worker~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/09/2026~~

Aggregate Contributions: ~~$20.00~~

~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Bourgoin~~ | ~~Jean~~ | | ~~1704~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~11 Grove St~~ | ~~West Hartford~~ | ~~CT~~ | ~~06110~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/09/2026~~

Aggregate Contributions: ~~$150.00~~

~~$75.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Cahill~~ | ~~Meghan~~ | | ~~1705~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~167 Russett Ln~~ | ~~Middletown~~ | ~~CT~~ | ~~06457~~ |

Principal Occupation:

Name of Employer: ~~Connecticut Agricultural Experiment Station~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/09/2026~~

Aggregate Contributions: ~~$15.00~~

~~$5.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Murphy-Dunning~~ | ~~Colleen~~ | | ~~1706~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~64 Mountain View Ter~~ | ~~North Haven~~ | ~~CT~~ | ~~06473~~ |

Principal Occupation:

Name of Employer: ~~Yale University~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/09/2026~~

Aggregate Contributions: ~~$200.00~~

~~$100.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Godzeno~~ | ~~Robert~~ | | ~~1707~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~29 Douglas Ave Unit B~~ | ~~Stamford~~ | ~~CT~~ | ~~06906~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Karp & Langerman P.C.~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/09/2026~~

Aggregate Contributions: ~~$250.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Wilson~~ | ~~Heather~~ | | ~~1708~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~8 Cross Creek Ln~~ | ~~Unionville~~ | ~~CT~~ | ~~06085~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~State of Connecticut~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/09/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Exley~~ | ~~Elwood~~ | | ~~1709~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~326 Westmont St~~ | ~~West Hartford~~ | ~~CT~~ | ~~06117~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/09/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Ryan** | **Patricia** | | **1692** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **26 Melbourne Rd** | **Norwalk** | **CT** | **06851** |

| Principal Occupation | Name of Employer |
|---|---|
| **Counselor** | **Tricia Ryan Counseling PLLC** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$150.00**

Is this contribution associated with an event reported in Section J1? ☒ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/09/2026**

Aggregate Contributions: **$350.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Stewart** | **Tricia** | | **1697** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **894 Peter Rd** | **Southbury** | **CT** | **06488** |

| Principal Occupation | Name of Employer |
|---|---|
| **Professor** | **WCSU** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/09/2026**

Aggregate Contributions: **$150.00**

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~**Ryan**~~ | ~~**Patricia**~~ | | ~~**1692**~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~**26 Melbourne Rd**~~ | ~~**Norwalk**~~ | ~~**CT**~~ | ~~**06851**~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~**Counselor**~~ | ~~**Tricia Ryan Counseling PLLC**~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~**$150.00**~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~**03/09/2026**~~

Aggregate Contributions: ~~**$350.00**~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Catarineau** | **Luz** | | **1693** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **203 Rosette St** | **New Haven** | **CT** | **06519** |

| Principal Occupation | Name of Employer |
|---|---|
| **Research Assistant** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/09/2026**

Aggregate Contributions: **$5.00**

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Josephsen** | **Jeremiah** | | **1694** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **184 Scribner Ave** | **Norwalk** | **CT** | **06854** |

| Principal Occupation | Name of Employer |
|---|---|
| **Warehouse Manager** | **BSN Sports** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$150.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/09/2026**

Aggregate Contributions: **$225.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Madore** | **Paul** | | **1695** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **63 Greenwoods Rd E** | **Norfolk** | **CT** | **06058** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/09/2026**

Aggregate Contributions: **$60.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Buck** | **Robert** | | **1696** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **116 N Georges Hill Rd** | **Southbury** | **CT** | **06488** |

| Principal Occupation | Name of Employer |
|---|---|
| **Optometrist** | **Waterbury Eye Associates** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$200.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/09/2026**

Aggregate Contributions: **$200.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~**Stewart**~~ | ~~**Tricia**~~ | | ~~**1697**~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~**894 Peter Rd**~~ | ~~**Southbury**~~ | ~~**CT**~~ | ~~**06488**~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~**Professor**~~ | ~~**WCSU**~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~**$75.00**~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~**03/09/2026**~~

Aggregate Contributions: ~~**$150.00**~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Desmarais** | **Jeffrey** | | **1698** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **294 Neill Dr** | **Watertown** | **CT** | **06795** |

| Principal Occupation | Name of Employer |
|---|---|
| **Financial Advisor** | **Legion Financial** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/09/2026**

Aggregate Contributions: **$50.00**

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| de Castro | Bernardo | | 1699 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 58 Quail Run Rd | Woodbury | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | Danbury public schools |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/09/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| DeMallie | Robert | | 1700 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 275B Heritage Vlg | Southbury | CT | 06488 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/09/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Simpson | Nathan | | 1701 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 407 Monroe St | New Britain | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Owner-Operator | Grass Routes, LLC |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/09/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Dyess | Reona | | 1702 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 4 Harbor Ln | New London | CT | 06320 |

| Principal Occupation | Name of Employer |
|---|---|
| Executive Director | The Center: A Drop-In Community Learning and Resou |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/09/2026

Aggregate Contributions: $50.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Lasta19323dd | First1b45b070 | | 1703 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 76 Ranch Rd | Milford | CT | 06460 |

| Principal Occupation | Name of Employer |
|---|---|
| Therapist | Clinical social worker |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/09/2026

Aggregate Contributions: $10.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Bourgoin | Jean | | 1704 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 11 Grove St | West Hartford | CT | 06110 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/09/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Cahill~~ | ~~Meghan~~ | | ~~1705~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~167 Russett Ln~~ | ~~Middletown~~ | ~~CT~~ | ~~06457~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Chemist~~ | ~~Connecticut Agricultural Experiment Station~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/09/2026~~

Aggregate Contributions: ~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Murphy-Dunning | Colleen | | 1706 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 64 Mountain View Ter | North Haven | CT | 06473 |

| Principal Occupation | Name of Employer |
|---|---|
| Urban Forester | Yale University |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/09/2026

Aggregate Contributions: $100.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Godzeno** | **Robert** | | **1707** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **29 Douglas Ave Unit B** | **Stamford** | **CT** | **06906** |

| Principal Occupation | Name of Employer |
|---|---|
| **Attorney** | **Karp & Langerman P.C.** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **03/09/2026** | **$175.00** | **$75.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Wilson** | **Heather** | | **1708** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **8 Cross Creek Ln** | **Unionville** | **CT** | **06085** |

| Principal Occupation | Name of Employer |
|---|---|
| **Attorney** | **State of Connecticut** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **03/09/2026** | **$25.00** | **$25.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Exley** | **Elwood** | | **1709** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **326 Westmont St** | **West Hartford** | **CT** | **06117** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **03/09/2026** | **$25.00** | **$25.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Cahill** | **Meghan** | | **1705** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **167 Russett Ln** | **Middletown** | **CT** | **06457** |

| Principal Occupation | Name of Employer |
|---|---|
| **Chemist** | **Connecticut Agricultural Experiment Station** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **03/09/2026** | **$10.00** | **$5.00** |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Roeder** | **Suzanne** | | **1671** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **8 Sheffield W** | **Winchester** | **MA** | **01890** |

| Principal Occupation | Name of Employer |
|---|---|
| **CFO** | **Bond Brothers** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **03/10/2026** | **$680.00** | **$340.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~O'Neill~~ | ~~Irene~~ | | ~~1669~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~303 E National St~~ | ~~West Chicago~~ | ~~IL~~ | ~~60185~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~IL~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| ~~03/10/2026~~ | ~~$10.00~~ | ~~$5.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Lhamon~~ | ~~Judy~~ | | ~~1670~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~24 King St~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| ~~03/10/2026~~ | ~~$150.00~~ | ~~$50.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Roeder~~ | ~~Suzanne~~ | | ~~1671~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~8 Sheffield W~~ | ~~Winchester~~ | ~~MA~~ | ~~01890~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~MA~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| ~~03/10/2026~~ | ~~$1,020.00~~ | ~~$340.00~~ |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Edmondson~~ | ~~Bonnie~~ | | ~~1672~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~42 Vernon Branch Rd~~ | ~~Coventry~~ | ~~CT~~ | ~~06238~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~No~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/10/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Perry~~ | ~~Allie~~ | | ~~1673~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~247 Saint Ronan St~~ | ~~New Haven~~ | ~~CT~~ | ~~06511~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/10/2026~~

Aggregate Contributions: ~~$300.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~tanguay~~ | ~~veronica~~ | | ~~1674~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~183 Haddam Quarter~~ | ~~Durham~~ | ~~CT~~ | ~~06422~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CT DEEP~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/10/2026~~

Aggregate Contributions: ~~$150.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Magistrali~~ | ~~Amelia~~ | | ~~1675~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~154 Whitney St~~ | ~~Hartford~~ | ~~CT~~ | ~~06105~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~UConn~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/10/2026~~

Aggregate Contributions: ~~$50.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Morrison~~ | ~~fred~~ | | ~~1676~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~200 Leeder Hill Dr~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/10/2026~~ | ~~$200.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Miller~~ | ~~Claudia~~ | | ~~1677~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~146 West St~~ | ~~Simsbury~~ | ~~CT~~ | ~~06070~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Unemployed~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/10/2026~~ | ~~$50.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Skoggard~~ | ~~Ian~~ | | ~~1678~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~42 Cleveland Rd~~ | ~~New Haven~~ | ~~CT~~ | ~~06515~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/10/2026~~ | ~~$150.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Hamilton~~ | ~~Pennell~~ | | ~~1679~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~28 Park Ln~~ | ~~Woodbridge~~ | ~~CT~~ | ~~06525~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Town of Woodbridge~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/10/2026~~ | ~~$75.00~~ |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Paolini~~ | ~~Marianna~~ | | ~~1680~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~3 Anderson Rd~~ | ~~Norwalk~~ | ~~CT~~ | ~~06851~~ |

Principal Occupation:

Name of Employer: ~~Stamford public schools~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/10/2026~~

Aggregate Contributions: ~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Ridley~~ | ~~Marianna~~ | | ~~1681~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1220 Whitney Ave~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/10/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Roy~~ | ~~Sarah~~ | | ~~1682~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~3 Buena Vista Rd~~ | ~~Fairfield~~ | ~~CT~~ | ~~06825~~ |

Principal Occupation:

Name of Employer: ~~AECOM~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/10/2026~~

Aggregate Contributions: ~~$85.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Rivers~~ | ~~Christopher~~ | | ~~1683~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~27 Cambridge Ct~~ | ~~Colchester~~ | ~~CT~~ | ~~06415~~ |

Principal Occupation:

Name of Employer: ~~Social Impact Partners~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$250.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/10/2026~~

Aggregate Contributions: ~~$500.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Davenport~~ | ~~Laura~~ | | ~~1684~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~82 Whispering Pines Rd~~ | ~~Avon~~ | ~~CT~~ | ~~06001~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/10/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Pereira~~ | ~~Caitlin~~ | | ~~1685~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1375 S Pine Creek Rd~~ | ~~Fairfield~~ | ~~CT~~ | ~~06824~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Town of Fairfield~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/10/2026~~

Aggregate Contributions: ~~$150.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~McLellan~~ | ~~Ann~~ | | ~~1686~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~23 Clayton Rd~~ | ~~Danbury~~ | ~~CT~~ | ~~06811~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/10/2026~~

Aggregate Contributions: ~~$60.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Myers~~ | ~~Daniel~~ | | ~~1687~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~16 Powder Horn Hl~~ | ~~Brookfield~~ | ~~CT~~ | ~~06804~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/10/2026~~

Aggregate Contributions: ~~$100.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Mattei~~ | ~~Cory~~ | | ~~1688~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~847 Durham Rd~~ | ~~Wallingford~~ | ~~CT~~ | ~~06492~~ |

Principal Occupation:

Name of Employer: ~~Unemployed~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/10/2026~~

Aggregate Contributions: ~~$200.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Buebendorf~~ | ~~Candy~~ | | ~~1689~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1393 Old Colchester Rd~~ | ~~Oakdale~~ | ~~CT~~ | |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/10/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Martinez~~ | ~~Javier~~ | | ~~1690~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~8 Irving St~~ | ~~Plainville~~ | ~~CT~~ | ~~06062~~ |

Principal Occupation:

Name of Employer: ~~Wesleyan~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/10/2026~~

Aggregate Contributions: ~~$200.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Last364a2c9c~~ | ~~First2cb065b0~~ | | ~~1691~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~34 New Britain Ave~~ | ~~Newington~~ | ~~CT~~ | ~~06111~~ |

Principal Occupation:

Name of Employer: ~~Riverhouse at Goodspeed Station~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/10/2026~~

Aggregate Contributions: ~~$20.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| O'Neill | Irene | | 1669 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 303 E National St | West Chicago | IL | 60185 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | IL |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/10/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Lhamon | Judy | | 1670 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 24 King St | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/10/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Roeder~~ | ~~Suzanne~~ | | ~~1671~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~8 Sheffield W~~ | ~~Winchester~~ | ~~MA~~ | ~~01890~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~CFO~~ | ~~MA~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$340.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/10/2026~~

Aggregate Contributions: ~~$680.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Edmondson | Bonnie | | 1672 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 42 Vernon Branch Rd | Coventry | CT | 06238 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | No |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/10/2026

Aggregate Contributions: $50.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Perry | Allie | | 1673 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 247 Saint Ronan St | New Haven | CT | 06511 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/10/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| tanguay | veronica | | 1674 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 183 Haddam Quarter | Durham | CT | 06422 |

| Principal Occupation | Name of Employer |
|---|---|
| Environmental Analyst | CT DEEP |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/10/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Magistrali | Amelia | | 1675 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 154 Whitney St | Hartford | CT | 06105 |

| Principal Occupation | Name of Employer |
|---|---|
| Extension Educator | UConn |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/10/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Morrison | fred | | 1676 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 200 Leeder Hill Dr | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/10/2026

Aggregate Contributions: $100.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Miller** | **Claudia** | | **1677** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **146 West St** | **Simsbury** | **CT** | **06070** |

| Principal Occupation | Name of Employer |
|---|---|
| **Unemployed** | **Unemployed** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/10/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Skoggard** | **Ian** | | **1678** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **42 Cleveland Rd** | **New Haven** | **CT** | **06515** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/10/2026**

Aggregate Contributions: **$100.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Hamilton** | **Pennell** | | **1679** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **28 Park Ln** | **Woodbridge** | **CT** | **06525** |

| Principal Occupation | Name of Employer |
|---|---|
| **Resgistrar of Voters** | **Town of Woodbridge** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/10/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Paolini** | **Marianna** | | **1680** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **3 Anderson Rd** | **Norwalk** | **CT** | **06851** |

| Principal Occupation | Name of Employer |
|---|---|
| **Teacher** | **Stamford public schools** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/10/2026**

Aggregate Contributions: **$5.00**

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Ridley** | **Marianna** | | **1681** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **1220 Whitney Ave** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/10/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Roy** | **Sarah** | | **1682** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **3 Buena Vista Rd** | **Fairfield** | **CT** | **06825** |

| Principal Occupation | Name of Employer |
|---|---|
| **Outreah & Engagement specialist** | **AECOM** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/10/2026**

Aggregate Contributions: **$60.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Rivers** | **Christopher** | | **1683** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **27 Cambridge Ct** | **Colchester** | **CT** | **06415** |

| Principal Occupation | Name of Employer |
|---|---|
| **Consultant** | **Social Impact Partners** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$250.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/10/2026**

Aggregate Contributions: **$250.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Davenport** | **Laura** | | **1684** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **82 Whispering Pines Rd** | **Avon** | **CT** | **06001** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/10/2026**

Aggregate Contributions: **$25.00**

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Pereira** | **Caitlin** | | **1685** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **1375 S Pine Creek Rd** | **Fairfield** | **CT** | **06824** |

| Principal Occupation | Name of Employer |
|---|---|
| **Firefighter** | **Town of Fairfield** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/10/2026**

Aggregate Contributions: **$75.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **McLellan** | **Ann** | | **1686** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **23 Clayton Rd** | **Danbury** | **CT** | **06811** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/10/2026**

Aggregate Contributions: **$30.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Myers** | **Daniel** | | **1687** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **16 Powder Horn Hl** | **Brookfield** | **CT** | **06804** |

| Principal Occupation | Name of Employer |
|---|---|
| **Executive** | **CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/10/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Mattei** | **Cory** | | **1688** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **847 Durham Rd** | **Wallingford** | **CT** | **06492** |

| Principal Occupation | Name of Employer |
|---|---|
| **Unemployed** | **Unemployed** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/10/2026**

Aggregate Contributions: **$100.00**

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Buebendorf** | **Candy** | | **1689** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **1393 Old Colchester Rd** | **Oakdale** | **CT** | |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/10/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Martinez** | **Javier** | | **1690** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **8 Irving St** | **Plainville** | **CT** | **06062** |

| Principal Occupation | Name of Employer |
|---|---|
| **Plumber** | **Wesleyan** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/10/2026**

Aggregate Contributions: **$100.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Last364a2c9c** | **First2cb065b0** | | **1691** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **34 New Britain Ave** | **Newington** | **CT** | **06111** |

| Principal Occupation | Name of Employer |
|---|---|
| **Dishwasher** | **Riverhouse at Goodspeed Station** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/10/2026**

Aggregate Contributions: **$10.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Weikart~~ | ~~John~~ | | ~~1656~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~78 Lynn Rd~~ | ~~Ivoryton~~ | ~~CT~~ | ~~06442~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Sexton & Company, LLC~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$20.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/11/2026~~

Aggregate Contributions: ~~$360.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Oatis~~ | ~~Connor~~ | | ~~1657~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~12 Fairfield Ter~~ | ~~Norwalk~~ | ~~CT~~ | ~~06851~~ |

Principal Occupation:

Name of Employer: ~~N/A~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/11/2026~~

Aggregate Contributions: ~~$120.00~~

~~$30.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Litwack~~ | ~~Elaine~~ | | ~~1658~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~5 Sawmill Rd~~ | ~~Sherman~~ | ~~CT~~ | ~~06784~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/11/2026~~

Aggregate Contributions: ~~$100.00~~

~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Polanetska~~ | ~~Naomi~~ | | ~~1659~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~31 N Lake Dr~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

Principal Occupation:

Name of Employer: ~~Psychtherapist~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/11/2026~~

Aggregate Contributions: ~~$50.00~~

~~$25.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~HELLER~~ | ~~STANLEY~~ | | ~~1660~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~14 Lake Pl N~~ | ~~Danbury~~ | ~~CT~~ | ~~06810~~ |

Principal Occupation:

Name of Employer: ~~ct~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution:

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/11/2026~~

Aggregate Contributions: ~~$120.00~~

~~$60.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~jackson~~ | ~~wesley~~ | | ~~1661~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~70 Robin Ln~~ | ~~Guilford~~ | ~~CT~~ | ~~06437~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~Ardelyx~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$340.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/11/2026~~ | ~~$680.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Klein~~ | ~~Susan~~ | | ~~1662~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~42 Young St .~~ | ~~New Haven~~ | ~~CT~~ | ~~06511~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/11/2026~~ | ~~$20.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Lowendorf~~ | ~~Henry~~ | | ~~1663~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~42 Young St .~~ | ~~New Haven~~ | ~~CT~~ | ~~06511~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/11/2026~~ | ~~$20.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Salicki~~ | ~~Amanda~~ | | ~~1664~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~12 Bella Ln~~ | ~~Unionville~~ | ~~CT~~ | ~~06085~~ |

| Principal Occupation | Name of Employer |
|---|---|
| | ~~HHC~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$20.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/11/2026~~ | ~~$40.00~~ |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Pinto~~ | ~~Renee~~ | | ~~1665~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~8821 Ivy Mount Ln~~ | ~~Nolensville~~ | ~~TN~~ | ~~37135~~ |

Principal Occupation:

Name of Employer: ~~US TN~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/11/2026~~

Aggregate Contributions: ~~$200.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Huggins~~ | ~~Rhonda~~ | | ~~1666~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~2345 Eagle Crst~~ | ~~Grapevine~~ | ~~TX~~ | ~~76061~~ |

Principal Occupation:

Name of Employer: ~~NA~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/11/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Hoffman~~ | ~~Diane~~ | | ~~1667~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~190 Wilmot Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06514~~ |

Principal Occupation:

Name of Employer: ~~Retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/11/2026~~

Aggregate Contributions: ~~$200.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Hulten~~ | ~~Julie~~ | | ~~1668~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~39 Ashlar Village Dr~~ | ~~Wallingford~~ | ~~CT~~ | ~~06492~~ |

Principal Occupation:

Name of Employer: ~~retired~~

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☐ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/11/2026~~

Aggregate Contributions: ~~$110.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Weikart~~ | ~~John~~ | | ~~3255~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~78 Lynn Rd~~ | ~~Ivoryton~~ | ~~CT~~ | ~~06442~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Attorney~~ | ~~Sexton & Company, LLC~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$20.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/11/2026~~

Aggregate Contributions: ~~$360.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Oatis~~ | ~~Connor~~ | | ~~3256~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~12 Fairfield Ter~~ | ~~Norwalk~~ | ~~CT~~ | ~~06851~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Student~~ | ~~N/A~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$30.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/11/2026~~

Aggregate Contributions: ~~$120.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Litwack~~ | ~~Elaine~~ | | ~~3257~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~5 Sawmill Rd~~ | ~~Sherman~~ | ~~CT~~ | ~~06784~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/11/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Polanetska~~ | ~~Naomi~~ | | ~~3258~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~31 N Lake Drive Hamden Ct # 6517~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~See above~~ | ~~Psychtherapist~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/11/2026~~

Aggregate Contributions: ~~$50.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~HELLER~~ | ~~STANLEY~~ | | ~~3259~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~14 Lake Pl N~~ | ~~Danbury~~ | ~~CT~~ | ~~06810~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Administrator of peace/environmental organization~~ | ~~ct~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$60.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/11/2026~~

Aggregate Contributions: ~~$120.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~jackson~~ | ~~wesley~~ | | ~~3260~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~70 Robin Ln~~ | ~~Guilford~~ | ~~CT~~ | ~~06437~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Sales~~ | ~~Ardelyx~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$340.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/11/2026~~

Aggregate Contributions: ~~$680.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Klein~~ | ~~Susan~~ | | ~~3261~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~42 Young St .~~ | ~~New Haven~~ | ~~CT~~ | ~~06511~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/11/2026~~

Aggregate Contributions: ~~$20.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Lowendorf~~ | ~~Henry~~ | | ~~3262~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~42 Young St .~~ | ~~New Haven~~ | ~~CT~~ | ~~06511~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/11/2026~~

Aggregate Contributions: ~~$20.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Salicki~~ | ~~Amanda~~ | | ~~3263~~ |
| **Residential Street Address** | **City** | **State** | **Zip Code** |
| ~~12 Bella Ln~~ | ~~Unionville~~ | ~~CT~~ | ~~06085~~ |
| **Principal Occupation** | **Name of Employer** | | |
| ~~RN~~ | ~~HHC~~ | | |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$20.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/11/2026~~

Aggregate Contributions: ~~$40.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Pinto~~ | ~~Renee~~ | | ~~3264~~ |
| **Residential Street Address** | **City** | **State** | **Zip Code** |
| ~~8821 Ivy Mount Ln~~ | ~~Nolensville~~ | ~~TN~~ | ~~37135~~ |
| **Principal Occupation** | **Name of Employer** | | |
| ~~Retired~~ | ~~US TN~~ | | |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/11/2026~~

Aggregate Contributions: ~~$200.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Huggins~~ | ~~Rhonda~~ | | ~~3265~~ |
| **Residential Street Address** | **City** | **State** | **Zip Code** |
| ~~2345 Eagle Crst~~ | ~~Grapevine~~ | ~~TX~~ | ~~76061~~ |
| **Principal Occupation** | **Name of Employer** | | |
| ~~Retired~~ | ~~NA~~ | | |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/11/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Weikart** | **John** | | **1656** |
| **Residential Street Address** | **City** | **State** | **Zip Code** |
| **78 Lynn Rd** | **Ivoryton** | **CT** | **06442** |
| **Principal Occupation** | **Name of Employer** | | |
| **Attorney** | **Sexton & Company, LLC** | | |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$20.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/11/2026**

Aggregate Contributions: **$360.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Oatis** | **Connor** | | **1657** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **12 Fairfield Ter** | **Norwalk** | **CT** | **06851** |

| Principal Occupation | Name of Employer |
|---|---|
| **Student** | **N/A** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$30.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/11/2026**

Aggregate Contributions: **$30.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Litwack** | **Elaine** | | **1658** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **5 Sawmill Rd** | **Sherman** | **CT** | **06784** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/11/2026**

Aggregate Contributions: **$100.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Polanetska** | **Naomi** | | **1659** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **31 N Lake Dr** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **pyschothrapist** | **Psychtherapist** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/11/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **HELLER** | **STANLEY** | | **1660** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **14 Lake Pl N** | **Danbury** | **CT** | **06810** |

| Principal Occupation | Name of Employer |
|---|---|
| **Administrator of peace/environmental organization** | **ct** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$60.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/11/2026**

Aggregate Contributions: **$120.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| jackson | wesley | | 1661 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 70 Robin Ln | Guilford | CT | 06437 |

| Principal Occupation | Name of Employer |
|---|---|
| Sales | Ardelyx |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $340.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/11/2026

Aggregate Contributions: $680.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Klein | Susan | | 1662 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 42 Young St . | New Haven | CT | 06511 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/11/2026

Aggregate Contributions: $20.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Lowendorf | Henry | | 1663 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 42 Young St . | New Haven | CT | 06511 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/11/2026

Aggregate Contributions: $20.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Salicki | Amanda | | 1664 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 12 Bella Ln | Unionville | CT | 06085 |

| Principal Occupation | Name of Employer |
|---|---|
| RN | HHC |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/11/2026

Aggregate Contributions: $40.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Pinto** | **Renee** | | **1665** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **8821 Ivy Mount Ln** | **Nolensville** | **TN** | **37135** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **US-TN** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/11/2026**

Aggregate Contributions: **$200.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Huggins** | **Rhonda** | | **1666** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **2345 Eagle Crst** | **Grapevine** | **TX** | **76061** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **NA** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/11/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Hoffman** | **Diane** | | **1667** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **190 Wilmot Rd** | **Hamden** | **CT** | **06514** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/11/2026**

Aggregate Contributions: **$75.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Hulten** | **Julie** | | **1668** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **39 Ashlar Village Dr** | **Wallingford** | **CT** | **06492** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/11/2026**

Aggregate Contributions: **$105.00**

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Oatis~~ | ~~Connor~~ | | ~~3256~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~12 Fairfield Ter~~ | ~~Norwalk~~ | ~~CT~~ | ~~06851~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Student~~ | ~~N/A~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$30.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/11/2026~~ | ~~$30.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Polanetska~~ | ~~Naomi~~ | | ~~3258~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~31 N Lake Drive Hamden Ct # 6517~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~See above~~ | ~~Psychtherapist~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/11/2026~~ | ~~$0.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Luna~~ | ~~Luis~~ | | ~~3234~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~13 Barnett St~~ | ~~New Haven~~ | ~~CT~~ | ~~06515~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Consultant~~ | ~~Consultant~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$200.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/12/2026~~ | ~~$400.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Blatteau | Leslie | | 3235 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 410 Greenwich Ave | New Haven | CT | 06519 |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | NHPS |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/12/2026 | $125.00 |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Godlewski | Walter | | 3236 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 20 Sunset Hill Rd | Norfolk | CT | 06058 |

| Principal Occupation | Name of Employer |
|---|---|
| Attorney | Cohen Tauber Spievack & Wagner PC |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $340.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/12/2026

Aggregate Contributions: $340.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Bransfield | Justin | | 3237 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 55 Hodge Rd | Marlborough | CT | 06447 |

| Principal Occupation | Name of Employer |
|---|---|
| Software Engineer | TrainerRoad |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $340.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/12/2026

Aggregate Contributions: $340.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Shab | Elizabeth | | 3238 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 26 Carmen Hill Rd | New Milford | CT | 06776 |

| Principal Occupation | Name of Employer |
|---|---|
| Unemployed | Unemployed |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/12/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Segool | Natasha | | 3239 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 35 Phelps Rd | Manchester | CT | 06042 |

| Principal Occupation | Name of Employer |
|---|---|
| Professor | Univ of Hartford |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/12/2026

Aggregate Contributions: $5.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Giordano~~ | ~~Vincent~~ | | ~~3240~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~28 Fairview Ave~~ | ~~Ridgefield~~ | ~~CT~~ | ~~06877~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/12/2026~~

Aggregate Contributions: ~~$50.00~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Donald | Romney | | 3241 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 45 Stuart Ave | Norwalk | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Therapist | Nurtured Growth LLC |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/12/2026

Aggregate Contributions: $25.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Asselin | Hannah | | 3242 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 52 Narragansett Trl | Shelton | CT | 06484 |

| Principal Occupation | Name of Employer |
|---|---|
| Emergency Medical Technician | Currently on hiatus |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/12/2026

Aggregate Contributions: $25.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| MCCLEARY | Rita | | 3243 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 926 Ridge Rd | Hamden | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| clinical psychologist | Rita W McCleary, PsyD, Licensed Clinical Psycholog |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $15.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/12/2026

Aggregate Contributions: $165.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Goodwin | Margaret | | 3244 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 246 Peck Ave | West Haven | CT | 06516 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/12/2026

Aggregate Contributions: $35.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| van Beusekom | Monica | | 3245 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 97 Candide Ln | Storrs | CT | 06268 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/12/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Fox | Larry | | 3246 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 60 Mountain View Dr | West Hartford | CT | 06117 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/12/2026

Aggregate Contributions: $500.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cementina | Alan | | 3247 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 904 Flanders Rd | Coventry | CT | 06238 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/12/2026

Aggregate Contributions: $50.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Minichino | Catharine | | 3248 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 25 Wright La | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/12/2026

Aggregate Contributions: $20.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Chafee | Claudia | | 3249 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 105 Reservoir Rd | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/12/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Oestreicher | Brad | | 3250 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 117 Tri Mountain Rd | Durham | CT | 06422 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/12/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Siegelbaum | Beth | | 3251 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 57 Russell St | Norwalk | CT | 06855 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/12/2026

Aggregate Contributions: $105.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Slemp~~ | ~~Ellen~~ | | ~~3252~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~74 Camden St~~ | ~~Milford~~ | ~~CT~~ | ~~06461~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~PA~~ | ~~Self~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/12/2026~~ | ~~$50.00~~ |

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hall | Karen | | 3253 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 74 Camden St | Milford | CT | 06461 |

| Principal Occupation | Name of Employer |
|---|---|
| Creative Dramatics Enrichment Teacher | Self |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/12/2026 | $25.00 |

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hanpeter | Benjamin | | 3254 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 14 Haviland St | Norwalk | CT | 06854 |

| Principal Occupation | Name of Employer |
|---|---|
| Engineer | ASML |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/12/2026 | $100.00 |

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Slemp** | **Ellen** | | **3252** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **74 Camden St** | **Milford** | **CT** | **06461** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| **03/12/2026** | **$25.00** |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Luna | Luis | | 3234 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 13 Barnett St | New Haven | CT | 06515 |

| Principal Occupation | Name of Employer |
|---|---|
| Consultant | Luis Luna |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $200.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/12/2026

Aggregate Contributions: $200.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Giordano | Vincent | | 3240 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 28 Fairview Ave | Ridgefield | CT | 06877 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/12/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Huizenga | Susan | | 3213 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 36 Surrey Dr | Wallingford | CT | 06492 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $60.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/13/2026

Aggregate Contributions: $300.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Quarello | James | | 3215 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 28 Edgewood Dr | Wallingford | CT | 06492 |

| Principal Occupation | Name of Employer |
|---|---|
| Home Inspector | JRV Home Inspection Svcs., LLC |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/13/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hart | Seth | | 3209 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 406 Pomeroy Ave | Meriden | CT | 06450 |

| Principal Occupation | Name of Employer |
|---|---|
| Technician | Pratt and Whitney |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/13/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Lastca383e8d | First92bc5d3b | | 3210 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 46 Wilson Ave | West Haven | CT | 06516 |

| Principal Occupation | Name of Employer |
|---|---|
| Admin | Yale College |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/13/2026

Aggregate Contributions: $10.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Taborsak | Julia | | 3211 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 2 Docs Way | New Milford | CT | 06776 |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | Bethel Public Schooks |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/13/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Paro | Roberta | | 3212 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 246A Yantic St | Norwich | CT | 06360 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/13/2026

Aggregate Contributions: $75.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Huizenga~~ | ~~Susan~~ | | ~~3213~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~36 Surrey Dr~~ | ~~Wallingford~~ | ~~CT~~ | ~~06492~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~retired~~ | ~~retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$60.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/13/2026~~ | ~~$500.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Alexander | Erik | | 3214 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 80 Columbus St | Manchester | CT | 06042 |

| Principal Occupation | Name of Employer |
|---|---|
| Homemaker | Homemaker |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/13/2026 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Quarello~~ | ~~James~~ | | ~~3215~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~28 S Edgewood Rd~~ | ~~Niantic~~ | ~~CT~~ | ~~06357~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Home Inspector~~ | ~~JRV Home Inspection Svcs., LLC~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/13/2026~~ | ~~$50.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Nelson | John | | 3216 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 597 Westport Ave | Norwalk | CT | 06851 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/13/2026 | $25.00 |

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Bonneau | Larry | | 3217 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 3711 Whitney Ave | Hamden | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $240.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/13/2026

Aggregate Contributions: $240.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Clark | Brandon | | 3218 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 154 Pearsall Pl | Bridgeport | CT | 06605 |

| Principal Occupation | Name of Employer |
|---|---|
| Consultant | No Dreams Deferred |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $340.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/13/2026

Aggregate Contributions: $340.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| White | Stephen | | 3219 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 131 Thornton St | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Engineer | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $90.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/13/2026

Aggregate Contributions: $340.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Stephens | Desiree | | 3220 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 3641 Mount Diablo Blvd # 126 | Lafayette | CA | 94549 |

| Principal Occupation | Name of Employer |
|---|---|
| Consulting | Desiree Stephens |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/13/2026

Aggregate Contributions: $100.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Padowicz | Nadine | | 3221 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 34 Anderson Ave | Milford | CT | 06460 |

| Principal Occupation | Name of Employer |
|---|---|
| Social Worker- Psychotherapist in private practice | Nadine Padowicz,LCSW |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☒ Yes ☐ No

If yes, list Event # 02152026G

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/13/2026

Aggregate Contributions: $147.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Waleska | Hayley | | 3222 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1400 20th St NW | Washington | DC | 20036 |

| Principal Occupation | Name of Employer |
|---|---|
| Product Manager | Alarm.com |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/13/2026

Aggregate Contributions: $375.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hall | Brittany | | 3223 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 365 Middlefield St | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Farmer | Beets & Blooms Farm |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/13/2026

Aggregate Contributions: $25.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Wood Reviczky | Jillian | | 3224 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 110 Wall St | Coventry | CT | 06238 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/13/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Lewicki | Jerry | | 3225 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 5537 SW 37th Dr | Gainesville | FL | 32608 |

| Principal Occupation | Name of Employer |
|---|---|
| Cpa | Self employed |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $340.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/13/2026

Aggregate Contributions: $340.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Baanante | Sharon | | 3226 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 64 Comstock Hill Ave | Norwalk | CT | 06850 |

| Principal Occupation | Name of Employer |
|---|---|
| Relationship Management | Morgan Stanley |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $200.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/13/2026

Aggregate Contributions: $200.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Campanha Wheaton~~ | ~~Steph~~ | | ~~3227~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~17 2nd St~~ | ~~North Arlington~~ | ~~NJ~~ | ~~07031~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Consultant~~ | ~~Consultant~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/13/2026~~

Aggregate Contributions: ~~$150.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cosker | Tom | | 3228 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 52 Tall Pines Ln | Rocky Hill | CT | 06067 |

| Principal Occupation | Name of Employer |
|---|---|
| Advocate | DRCT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/13/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Oviatt | Dana | | 3229 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 68 Front St | Groton | CT | 06340 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/13/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Oatis | Victoria | | 3230 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 12 Fairfield Ter | Norwalk | CT | 06851 |

| Principal Occupation | Name of Employer |
|---|---|
| Librarian | City of Norwalk |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/13/2026

Aggregate Contributions: $165.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Oatis | Aidan | | 3231 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 12 Fairfield Ter | Norwalk | CT | 06851 |

| Principal Occupation | Name of Employer |
|---|---|
| Student | Student |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/13/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Oatis | Benjamin | | 3232 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 12 Fairfield Ter | Norwalk | CT | 06851 |

| Principal Occupation | Name of Employer |
|---|---|
| Physical Therapist Assistant | Professional Physical Therapy |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/13/2026

Aggregate Contributions: $100.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Salsich | James | | 3233 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 43 Herrick Rd | Brooklyn | CT | 06234 |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | Eastford elementary school |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/13/2026

Aggregate Contributions: $125.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Campanha Wheaton** | **Steph** | | **3227** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **17 2nd St** | **North Arlington** | **NJ** | **07031** |

| Principal Occupation | Name of Employer |
|---|---|
| **Consultant** | **FairVote Action** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/13/2026**

Aggregate Contributions: **$75.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Sherwani | Aida | | 3160 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 19 Kent Ct | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| student | student |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/14/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Sherwani | Akasha | | 3161 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 19 Kent Ct | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Unemployed | Unemployed |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/14/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Last4b258982 | Firstcc00319f | | 3162 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 100 Gillies Rd . | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/14/2026 | $25.00 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Winkler | Michael | | 3163 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 20 Gottier Dr | Vernon | CT | 06066 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/14/2026 | $100.00 | $50.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Swyden | Monica | | 3164 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 10 Vicki Ln | Colchester | CT | 06415 |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | Norwich Free Academy |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/14/2026 | $45.00 | $20.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Sullivan | Erin | | 3165 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 98 Worth Ave | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| Bank Examiner, CT Dept. of Banking | State of Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/14/2026 | $100.00 | $100.00 |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Golden | Liz | | 3166 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 22 Sunrise Hill Rd | Norwalk | CT | 06851 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/14/2026

Aggregate Contributions: $20.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Monday | Tarah | | 3167 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 16 Pine Trl | Avon | CT | 06001 |

| Principal Occupation | Name of Employer |
|---|---|
| Vetting coordinator | CDW LLC |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/14/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Silber~~ | ~~Matthew~~ | | ~~3168~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~230 East Ave~~ | ~~Norwalk~~ | ~~CT~~ | ~~06855~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Teacher~~ | ~~Norwalk Public Schools~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$45.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/14/2026~~

Aggregate Contributions: ~~$90.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Pearston | Robert | | 3169 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 992 Ridgewood Rd | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Transporter | Hertz |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/14/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Stoll~~ | ~~Rebecca~~ | | ~~3170~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~26 Emerson St~~ | ~~Norwalk~~ | ~~CT~~ | ~~06855~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~theatrical stagehand~~ | ~~none~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$20.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/14/2026~~

Aggregate Contributions: ~~$680.00~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Weber | Jonathan | | 3171 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 64 Filbert St | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Medical provider | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/14/2026

Aggregate Contributions: $100.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Jenkins | William | | 3172 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 63 Ridge Rd | Chaplin | CT | 06235 |

| Principal Occupation | Name of Employer |
|---|---|
| Shipbuilding | General Dynamics Electric Boat |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/14/2026

Aggregate Contributions: $50.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Fox | Paul | | 3173 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 11 Hanford Pl | Norwalk | CT | 06854 |

| Principal Occupation | Name of Employer |
|---|---|
| Engineer | ASML |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $115.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/14/2026

Aggregate Contributions: $240.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Madry | Patricia | | 3174 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 69 Oneco Ave | New London | CT | 06320 |

| Principal Occupation | Name of Employer |
|---|---|
| Cafeteria worker at New London CT. School | Work at a school |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/14/2026 | $5.00 | $5.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Higgins | Laura | | 3175 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 51 Ledgebrook Dr | Norwalk | CT | 06854 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/14/2026 | $100.00 | $100.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Lopoukhine | Natasha | | 3176 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 20 Sunset Hill Ave | Norwalk | CT | 06851 |

| Principal Occupation | Name of Employer |
|---|---|
| Brand & marketing professional | ForceBrands |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/14/2026 | $25.00 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Dellinger | Richard | | 3177 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 45 Purdy Rd E | Norwalk | CT | 06850 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/14/2026 | $50.00 | $50.00 |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| law | lindsay | | 3178 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 300 Wewaka Brk | Bridgewater | CT | 06752 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/14/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Lombardo | Wayne | | 3179 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 571 Town St | Moodus | CT | 06469 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/14/2026

Aggregate Contributions: $35.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Keeley | Raymond | | 3180 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 49 Valley Rd | Hamden | CT | 06514 |

| Principal Occupation | Name of Employer |
|---|---|
| Student | Student |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $15.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/14/2026

Aggregate Contributions: $35.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Dorman | Brett | | 3181 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 54 Cedar Ridge Dr | Glastonbury | CT | 06033 |

| Principal Occupation | Name of Employer |
|---|---|
| Engineering Technician | City of Meriden, CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/14/2026

Aggregate Contributions: $475.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Fried | Hilary | | 3182 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 16 Usher St | Milford | CT | 06460 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/14/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Bauman | Rhianna | | 3183 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 9 Pleasant St | Vernon | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Student | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/14/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Seitz | Vicki | | 3184 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 194 Haverford St | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/14/2026

Aggregate Contributions: $400.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| DeLucia | Christina | | 3185 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 48 Gordon St | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | No |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $35.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/14/2026

Aggregate Contributions: $35.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Zeftel | Peter | | 3186 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 3840 Elliot Ave | Minneapolis | MN | 55407 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/14/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Matias | Bev | | 3187 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 62 Denison Ave | Groton | CT | 06340 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/14/2026

Aggregate Contributions: $10.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Dey | Carol | | 3188 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 6205 SW Sheridan St | Portland | OR | 97225 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired attorney | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/14/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Ducey Avendano LMSW CSW | Polly | | 3189 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 99 Colonial Rd | Watertown | CT | 06795 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/14/2026

Aggregate Contributions: $15.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Fischer | Michael | | 3190 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 80 Killdeer Rd | Hamden | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Professor | Yale University |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/14/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Collins | Rita | | 3191 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1490 7th St NW | Washington | DC | 20001 |

| Principal Occupation | Name of Employer |
|---|---|
| RN, retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/14/2026

Aggregate Contributions: $60.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Smith | Diane | | 3192 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 603 Briarwood Ct | Rocky Hill | CT | 06067 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/14/2026

Aggregate Contributions: $55.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Tobin | Michael | | 3193 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 74 Helen St | Hamden | CT | 06514 |

| Principal Occupation | Name of Employer |
|---|---|
| State employee | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $250.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/14/2026

Aggregate Contributions: $450.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~DeLucia~~ | ~~Pat~~ | | ~~3194~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~7 Shepard Hill Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06514~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Teacher~~ | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/14/2026~~

Aggregate Contributions: ~~$600.00~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| LI | JIMMY | | 3195 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1008 Maple St | Rocky Hill | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Data Engineer | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/14/2026

Aggregate Contributions: $25.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Harp | Djana | | 3196 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 71 Edgewood Way | New Haven | CT | 06515 |

| Principal Occupation | Name of Employer |
|---|---|
| Healthcare | NCHC |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/14/2026

Aggregate Contributions: $100.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Logan | Monica | | 3197 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 15 Cone Mountain Rd | West Granby | CT | 06090 |

| Principal Occupation | Name of Employer |
|---|---|
| Chief Claims Officer | CapSpecialty |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/14/2026

Aggregate Contributions: $75.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| buckingham | mallory | | 3198 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 435 Butternut St | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| speech pathologist | state of ct |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/14/2026 | $25.00 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Mickelson | Rebecca | | 3199 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 131 French Ave | East Haven | CT | 06512 |

| Principal Occupation | Name of Employer |
|---|---|
| Art teacher | New haven public schools |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/14/2026 | $5.00 | $5.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Bhargava~~ | ~~Shobhana~~ | | ~~3200~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~77 Havemeyer Ln~~ | ~~Stamford~~ | ~~CT~~ | ~~06807~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| ~~03/14/2026~~ | ~~$680.00~~ | ~~$340.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Daniels | Kim | | 3201 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 24 Trotwood Dr | West Hartford | CT | 06117 |

| Principal Occupation | Name of Employer |
|---|---|
| Psychologist | Self |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/14/2026 | $10.00 | $10.00 |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| BILLINGS | DEBRA | | 3202 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 48 Hale St | Vernon | CT | 06066 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/14/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Giordano~~ | ~~Vincent~~ | | ~~3203~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~28 Fairview Ave~~ | ~~Ridgefield~~ | ~~CT~~ | ~~06877~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/14/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Turchi~~ | ~~Maria~~ | | ~~3204~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~21 Brentford Berwick~~ | ~~Ledyard~~ | ~~CT~~ | ~~06339~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Accountant~~ | ~~Maria Turchi~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/14/2026~~

Aggregate Contributions: ~~$60.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Martin | Richard | | 3205 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 25 Friendship St | New London | CT | 06320 |

| Principal Occupation | Name of Employer |
|---|---|
| Registrar of Voters | City of New London |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/14/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Post | Albert | | 3206 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 814 Rail Fence Rd | Orange | CT | 06477 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/14/2026

Aggregate Contributions: $20.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Bertolini | Peter | | 3207 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 33 Parker Ave | West Haven | CT | 06516 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/14/2026

Aggregate Contributions: $129.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Fleck | Paul | | 3208 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 112 Shepards Knoll Dr | Hamden | CT | 06514 |

| Principal Occupation | Name of Employer |
|---|---|
| Executive Director | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/14/2026

Aggregate Contributions: $85.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Silber** | **Matthew** | | **3168** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **230 East Ave** | **Norwalk** | **CT** | **06855** |

| Principal Occupation | Name of Employer |
|---|---|
| **Teacher** | **Norwalk Public Schools** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$45.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/14/2026**

Aggregate Contributions: **$45.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Stoll** | **Rebecca** | | **3170** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **26 Emerson St** | **Norwalk** | **CT** | **06855** |

| Principal Occupation | Name of Employer |
|---|---|
| **audio stagehand** | **Ambassador Theatre Group North America** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$20.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/14/2026**

Aggregate Contributions: **$660.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Turchi** | **Maria** | | **3204** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **21 Brentford Berwick** | **Ledyard** | **CT** | **06339** |

| Principal Occupation | Name of Employer |
|---|---|
| **Accountant** | **Maria Turchi** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/14/2026**

Aggregate Contributions: **$55.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Bhargava** | **Shobhana** | | **3200** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **77 Havemeyer Ln Unit 303** | **Stamford** | **CT** | **06807** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$340.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/14/2026**

Aggregate Contributions: **$340.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Giordano** | **Vincent** | | **3203** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **28 Fairview Ave** | **Ridgefield** | **CT** | **06877** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/14/2026**

Aggregate Contributions: **$50.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| DeLucia | Pat | | 3194 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 7 Shepard Hill Rd | Hamden | CT | 06514 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/14/2026 | $550.00 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Allen | Mary | E | 3152 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 14 Hewitt St | Willimantic | CT | 06226 |

| Principal Occupation | Name of Employer |
|---|---|
| Professor | University of Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/15/2026 | $30.00 | $5.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Brown | Sheri | | 3138 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 34 Riverview Dr | Norwalk | CT | 06850 |

| Principal Occupation | Name of Employer |
|---|---|
| Program director | Womens mentoring network |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/15/2026 | $25.00 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Watson | Christine | | 3154 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 636 Back Rd | North Windham | CT | 06256 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/15/2026 | $25.00 | $25.00 |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| PRICE | MARIELLE | | 3135 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 19 Gifford Rd | West Hartford | CT | 06119 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/15/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Roppo | Nico | | 3136 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 2 Beach St | Coventry | RI | 02816 |

| Principal Occupation | Name of Employer |
|---|---|
| Manufacturing | Amgen |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/15/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Dick | Linda | | 3137 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 62 Nash St | New Haven | CT | 06511 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $200.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/15/2026

Aggregate Contributions: $200.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Brown~~ | ~~Sheri~~ | | ~~3138~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~28 Dr Martin Luther King Jr Dr~~ | ~~Norwalk~~ | ~~CT~~ | ~~06854~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Program director~~ | ~~Womens mentoring network~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/15/2026~~

Aggregate Contributions: ~~$50.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cassetta | Gina | | 3139 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 16 Clairann Dr | Danbury | CT | 06811 |

| Principal Occupation | Name of Employer |
|---|---|
| Chaplain | Danbury Hospital |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $15.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/15/2026

Aggregate Contributions: $15.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Jamieson | Diane | | 3140 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 490 Sunset Hill Rd | North Grosvenordale | CT | 06255 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/15/2026

Aggregate Contributions: $125.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Gillespie | Patrice | | 3141 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 406 Main St | Ridgefield | CT | 06877 |

| Principal Occupation | Name of Employer |
|---|---|
| CT Outreach Coordinator | People's Action for Clean Energy / PACE |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $40.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/15/2026

Aggregate Contributions: $40.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Ghio | Serge | | 3142 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 17 Rome St | Norwalk | CT | 06851 |

| Principal Occupation | Name of Employer |
|---|---|
| Manager | EMCOR Group, Inc. |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/15/2026

Aggregate Contributions: $100.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Smith | Leo | | 3143 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 64 Boysenberry Ct | Suffield | CT | 06078 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/15/2026

Aggregate Contributions: $125.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Greenwood | Mary | | 3144 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 155 South Rd | New Hartford | CT | 06057 |

| Principal Occupation | Name of Employer |
|---|---|
| Operations Coordinator | Environmental Contractor Supply, Inc |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/15/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Zelaya | Sonia | | 3145 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 400 N Main St . | Manchester | CT | 06042 |

| Principal Occupation | Name of Employer |
|---|---|
| - | Collins Aerospace. |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/15/2026

Aggregate Contributions: $10.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Edwards | Mark | | 3146 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 65 West St | New Milford | CT | 06776 |

| Principal Occupation | Name of Employer |
|---|---|
| na | na |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/15/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cavanaugh | Jane | | 3147 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 177 Essex St | Deep River | CT | 06417 |

| Principal Occupation | Name of Employer |
|---|---|
| Social Work | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/15/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Demers | Kathleen | | 3148 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 48 Mason Rd | Willington | CT | 06279 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/15/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Beattie | Charla | | 3149 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 104 Underwood Rd | Putnam | CT | 06260 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/15/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Sharp | Julie | | 3150 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 6 Tulip Tree Ln | Norwalk | CT | 06851 |

| Principal Occupation | Name of Employer |
|---|---|
| Adjunct Instructor | Southern Connecticut State University |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/15/2026

Aggregate Contributions: $10.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| David | Susan | | 3151 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 121 Holmes Rd | Ridgefield | CT | 06877 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/15/2026

Aggregate Contributions: $20.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Allen~~ | ~~Mary~~ | | ~~3152~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~14 Hewitt St~~ | ~~Willimantic~~ | ~~CT~~ | ~~06226~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Professor~~ | ~~University of Connecticut~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/15/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Paolini | Marianna | | 3153 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 3 Anderson Rd | Norwalk | CT | 06851 |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | Stamford public schools |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/15/2026

Aggregate Contributions: $85.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Watson~~ | ~~Christine~~ | | ~~3154~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~636 Back Rd~~ | ~~North Windham~~ | ~~CT~~ | ~~06256~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~None~~ | ~~None~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/15/2026~~

Aggregate Contributions: ~~$50.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Romanowski | Robert | | 3155 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 105 Brookside Ct | Manchester | CT | 06042 |

| Principal Occupation | Name of Employer |
|---|---|
| Sr Staff AI Engineer | Hartford Insurance |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.23

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/15/2026

Aggregate Contributions: $10.23

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Faraji | Golnaz | | 3156 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 26 Pipers Hill Rd | Wilton | CT | 06897 |

| Principal Occupation | Name of Employer |
|---|---|
| Physician | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/15/2026

Aggregate Contributions: $20.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Velez | Sophia | | 3157 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 19 Lincoln Ave | Norwalk | CT | 06854 |

| Principal Occupation | Name of Employer |
|---|---|
| Attorney | NYS OCA |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/15/2026

Aggregate Contributions: $375.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Zuniga | Iliana | | 3158 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 8 Running Brook Ln | Norwalk | CT | 06850 |

| Principal Occupation | Name of Employer |
|---|---|
| Director global human capital | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/15/2026

Aggregate Contributions: $75.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Pickett | Anna | | 3159 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 144 Foster St | New Haven | CT | 06511 |

| Principal Occupation | Name of Employer |
|---|---|
| Nonprofit Development | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/15/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Eickel | Teresa | | 3103 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 8 Doolittle Rd | Preston | CT | 06365 |

| Principal Occupation | Name of Employer |
|---|---|
| Executive Director | Interreligious Eco-justice anetwork |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/16/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Burton | Nancy | | 3104 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 57 Fremont St | Meriden | CT | 06451 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired nurse-midwife | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/16/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Seavy | Charmaine | | 3105 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 18 Quarry Rd | Simsbury | CT | 06070 |

| Principal Occupation | Name of Employer |
|---|---|
| Advertising | CV Media Inc |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/16/2026

Aggregate Contributions: $325.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McAuliffe | Joe | | 3106 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 218 Preston St . | Windsor | CT | 06095 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/16/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| March | Eric | | 3107 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 253 Willow St | New Haven | CT | 06511 |

| Principal Occupation | Name of Employer |
|---|---|
| Self-Employed: Artist, Educator, Web Developer | Eric March Art + Design LLC |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/16/2026

Aggregate Contributions: $15.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Maser~~ | ~~Amy~~ | | ~~3108~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~26 Seneca Rd~~ | ~~Danbury~~ | ~~CT~~ | ~~06811~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Executive Assistant~~ | ~~Private equity~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/16/2026~~

Aggregate Contributions: ~~$110.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Duncan~~ | ~~Christina~~ | | ~~3109~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~27 Keelers Ridge Rd~~ | ~~Wilton~~ | ~~CT~~ | ~~06897~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~retired~~ | ~~Connecticut~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$340.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/16/2026~~

Aggregate Contributions: ~~$680.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Mandell | Rebecca | | 3110 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 62 Lawrence St | New Haven | CT | 06511 |

| Principal Occupation | Name of Employer |
|---|---|
| Fundraiser | Fairfield county,Äôs community foundation |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/16/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Post | Gail | | 3111 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 18 Rock Rd | Milford | CT | 06460 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/16/2026

Aggregate Contributions: $20.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Vaughan~~ | ~~Anne~~ | | ~~3112~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~609 Trails End Rd~~ | ~~Manchester~~ | ~~CT~~ | ~~06042~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/16/2026~~

Aggregate Contributions: ~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| LaMark Muir | Renee | | 3113 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 256 Warsaw St | Deep River | CT | 06417 |

| Principal Occupation | Name of Employer |
|---|---|
| State Representative | CT General Assembly |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/16/2026

Aggregate Contributions: $75.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Davidson | Dorota | | 3114 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 60 Bmw Dr | Jewett City | CT | 06351 |

| Principal Occupation | Name of Employer |
|---|---|
| Accountant | PMG Coop |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/16/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Manuel Lopez | Johan | | 3115 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 41 Fairfield Ave | Norwalk | CT | 06854 |

| Principal Occupation | Name of Employer |
|---|---|
| Data analyst | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $40.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/16/2026

Aggregate Contributions: $40.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Scully | Kathleen | | 3116 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 127 Quarry Village Rd | Cheshire | CT | 06410 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/16/2026

Aggregate Contributions: $15.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Derenthal | Samantha | | 3117 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 47 Highland St | Moosup | CT | 06354 |

| Principal Occupation | Name of Employer |
|---|---|
| Hr | Ihi |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/16/2026

Aggregate Contributions: $100.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cash | William | | 3118 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 586 Opening Hill Rd | Madison | CT | 06443 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/16/2026

Aggregate Contributions: $152.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cash | William | | 3119 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 586 Opening Hill Rd | Madison | CT | 06443 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/16/2026

Aggregate Contributions: $152.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Klopfer~~ | ~~Anne~~ | | ~~3120~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~140 Deepwoods Dr~~ | ~~Longmeadow~~ | ~~MA~~ | ~~01106~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~Massachusetts~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/16/2026~~

Aggregate Contributions: ~~$300.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hansen | Michael | | 3121 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 44 Grandview Ave | Old Lyme | CT | 06371 |

| Principal Occupation | Name of Employer |
|---|---|
| Communications supervisor | Amtrak |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/16/2026

Aggregate Contributions: $100.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cogle | Colin | | 3122 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 39 Hop Brook Rd Apt 3 | Brookfield | CT | 06804 |

| Principal Occupation | Name of Employer |
|---|---|
| IT consultant/manager | Endsight |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/16/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McLean Salls | Amy | | 3123 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 36 Elmstreet | Tariffville | CT | 06081 |

| Principal Occupation | Name of Employer |
|---|---|
| Manager of Residential Energy Efficiency | Avangrid |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☒ Yes ☐ No

If yes, list Event # 03222026H

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/16/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Shain | Diana | | 3124 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 241 Jared Sparks Rd | Willington | CT | 06279 |

| Principal Occupation | Name of Employer |
|---|---|
| Sr Financial Analyst | Dxc Technology |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/16/2026

Aggregate Contributions: $35.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Page | Theresa | | 3125 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1 Jeffrey Rd | East Haven | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/16/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Tierney~~ | ~~Tricis~~ | | ~~3126~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~53 Willow St~~ | ~~Norwalk~~ | ~~CT~~ | ~~06851~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/16/2026~~ | ~~$50.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cumberbatch | Evelyn | | 3127 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 147 Thornton St | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/16/2026 | $250.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Sanchione~~ | ~~Louise~~ | | ~~3128~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~315 Eastern St .~~ | ~~New Haven~~ | ~~CT~~ | ~~06513~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired educator and ND/Certified Classical Homeop~~ | ~~NA~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/16/2026~~ | ~~$45.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Heimer | Win | | 3129 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 799 Prospect Ave | West Hartford | CT | 06105 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/16/2026 | $25.00 |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Axcell | Sherri | | 3130 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 12 Willow St | Bethel | CT | 06801 |

| Principal Occupation | Name of Employer |
|---|---|
| IT | Fujifilm Healthcare Americas |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/16/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Van Dam | Evan | | 3131 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 50 Briarwood Rd | West Hartford | CT | 06107 |

| Principal Occupation | Name of Employer |
|---|---|
| Software Engineer | self employed/contractor |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $14.77

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/16/2026

Aggregate Contributions: $14.77

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Wilhelm~~ | ~~Thomas~~ | | ~~3132~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~143 Hoyt St .~~ | ~~Stamford~~ | ~~CT~~ | ~~06905~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/16/2026~~

Aggregate Contributions: ~~$200.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Repasz | Craig | | 3133 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 18 Nutmeg Hill Rd | Hamden | CT | 06514 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/16/2026

Aggregate Contributions: $300.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hallen | Kathryn | | 3134 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 80 Autumn Ct | Cheshire | CT | 06410 |

| Principal Occupation | Name of Employer |
|---|---|
| Attorney | Brenner Saltzman & Wallman LLP |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/16/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Tierney** | **Patricia** | | **3126** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **52 Willow St** | **Norwalk** | **CT** | **06851** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/16/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Sanchione** | **Louise** | | **3128** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **315 Eastern St .** | **New Haven** | **CT** | **06513** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/16/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Maser** | **Amy** | | **3108** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **26 Seneca Rd** | **Danbury** | **CT** | **06811** |

| Principal Occupation | Name of Employer |
|---|---|
| **Executive Assistant** | **Private equity** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/16/2026**

Aggregate Contributions: **$85.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Klopfer** | **Anne** | | **3120** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **140 Deepwoods Dr** | **Longmeadow** | **MA** | **01106** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$150.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/16/2026**

Aggregate Contributions: **$150.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Wilhelm** | **Thomas** | | **3132** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **143 Hoyt St .** | **Stamford** | **CT** | **06905** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/16/2026**

Aggregate Contributions: **$100.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Duncan** | **Christina** | | **3109** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **27 Keelers Ridge Rd** | **Wilton** | **CT** | **06897** |

| Principal Occupation | Name of Employer |
|---|---|
| **retired** | **No Employer** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$340.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/16/2026**

Aggregate Contributions: **$340.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Vaughan** | **Lois** | **A** | **3112** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **609 Trails End Rd** | **Manchester** | **CT** | **06042** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/16/2026**

Aggregate Contributions: **$5.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Beman** | **Mary** | | **3093** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **593 Main St** | **Wilbraham** | **MA** | **01095** |

| Principal Occupation | Name of Employer |
|---|---|
| **Educational consultant** | **Beman Literacy Consulting** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/17/2026**

Aggregate Contributions: **$75.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Elliott** | **William** | | **3094** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **116 Battis Rd** | **Hamden** | **CT** | **06514** |

| Principal Occupation | Name of Employer |
|---|---|
| **Flight attendant** | **Delta Air Lines** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/17/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Sotelo** | **Vanessa** | | **3090** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **8 Cedar Ridge Rd** | **Gales Ferry** | **CT** | **06335** |

| Principal Occupation | Name of Employer |
|---|---|
| **Student** | **Student** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/17/2026**

Aggregate Contributions: **$10.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Lynch | Joyce | | 3087 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 7 Clearview Dr | Wallingford | CT | 06492 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired teacher | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/17/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hassin | Gita | | 3088 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 290 Montauk Ave | New London | CT | 06320 |

| Principal Occupation | Name of Employer |
|---|---|
| Administrative Assistant | Child and Family Agency of Southeastern Connecticu |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/17/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Shinde | Sanjay | | 3089 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 39 Pocahontas Dr | West Hartford | CT | 06117 |

| Principal Occupation | Name of Employer |
|---|---|
| IT | Travelers |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/17/2026

Aggregate Contributions: $200.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Sotelo~~ | ~~Vanessa~~ | | ~~3090~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~8 Cedar Ridge Rd~~ | ~~Gales Ferry~~ | ~~CT~~ | ~~06335~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Student~~ | ~~Student~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/17/2026~~

Aggregate Contributions: ~~$20.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Dimmock | Mary | | 3091 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 34 Dimmock Rd | Waterford | CT | 06385 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/17/2026

Aggregate Contributions: $50.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| E Romano | Gina | | 3092 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1 Terrace Dr | Sherman | CT | 06784 |

| Principal Occupation | Name of Employer |
|---|---|
| Substitute Teacher, retired amusemant park operato | Omano Cybersecurity |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $200.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/17/2026

Aggregate Contributions: $375.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Beman~~ | ~~Mary~~ | | ~~3093~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~593 Main St~~ | ~~Wilbraham~~ | ~~MA~~ | ~~01095~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Self-employed - Educational consultant~~ | ~~Beman Literacy Consulting~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/17/2026~~

Aggregate Contributions: ~~$125.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Elliott~~ | ~~Billy~~ | | ~~3094~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~116 Battis Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06514~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Flight attendant~~ | ~~Delta Air Lines~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/17/2026~~

Aggregate Contributions: ~~$45.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| PADOWICZ | NADINE | | 3095 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 34 Anderson Ave | Milford | CT | 06460 |

| Principal Occupation | Name of Employer |
|---|---|
| Social Worker | Nadine Padowicz, LCSW |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/17/2026

Aggregate Contributions: $247.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Howard | Donna L | | 3096 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 250 Town Hill Rd | New Hartford | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $250.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/17/2026

Aggregate Contributions: $250.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Allen | Claudia | | 3097 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 56 Taylor Rd | Thompson | CT | 06277 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/17/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McIntee | Sarah | | 3098 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 6 Susan Ct | Norwalk | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| N/a | N/a |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/17/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Brown | Lauren | | 3099 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 35 Flying Point Rd | Branford | CT | 06405 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/17/2026

Aggregate Contributions: $50.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Waldron | Renee | | 3100 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 79 Main | North Grosvenordale | CT | 06255 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/17/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Huttner | Sharon | | 3101 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 37 Turtle Bay Dr | Branford | CT | 06405 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $340.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/17/2026

Aggregate Contributions: $340.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Beman | Elizabeth | | 3102 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 21 Wicker St | Putnam | CT | 06260 |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | Town of Douglas MA |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $190.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/17/2026

Aggregate Contributions: $405.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Crossman | Steve | | 3069 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 20320 Hollands Ln | Willits | CA | 95490 |

| Principal Occupation | Name of Employer |
|---|---|
| College counselor | Mendocino College |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $15.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/18/2026

Aggregate Contributions: $15.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Allen | Kyler | | 3070 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 3 Shady Dr | Wallingford | CT | 06492 |

| Principal Occupation | Name of Employer |
|---|---|
| Neuropsychologist | Hospital for Special Care |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/18/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cox | Steve | | 3071 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 643 Cherry Brook Rd | Canton | CT | 06019 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/18/2026

Aggregate Contributions: $20.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Kevorkian | Corinne | | 3072 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1 Jericho Rd S | Sherman | CT | 06784 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/18/2026

Aggregate Contributions: $300.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Rizzolo | Carol | | 3073 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 24 Long Hl Farm | Guilford | CT | 06437 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/18/2026

Aggregate Contributions: $100.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Russek | James | | 3074 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 5 Governors Row | West Hartford | CT | 06117 |

| Principal Occupation | Name of Employer |
|---|---|
| Advertising Strategist and Creative Director | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/18/2026 | $25.00 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Coleman | Neverill | | 3075 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| PO Box 2401 | Manchester | CT | 06045 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/18/2026 | $5.00 | $5.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Jacklin | Michele | | 3076 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 31 Adenas Walk | Glastonbury | CT | 06033 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/18/2026 | $150.00 | $75.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Rundio~~ | ~~Emma~~ | | ~~3077~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~82 Wells Farm Dr~~ | ~~Wethersfield~~ | ~~CT~~ | ~~06109~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Employed~~ | ~~CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| ~~03/18/2026~~ | ~~$50.00~~ | ~~$25.00~~ |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cantelmo | Karen | | 3078 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 46 Sunset Hill Rd | Simsbury | CT | 06070 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/18/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Paro | Roberta | | 3079 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 246A Yantic St | Norwich | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/18/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Forrester | Kerstin | | 3080 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 104 Underwood Rd | Putnam | CT | 06260 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/18/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Levesque | Larry | | 3081 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 32 Park Place Cir | West Hartford | CT | 06110 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/18/2026

Aggregate Contributions: $400.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Haynes | Laura | | 3082 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 39 Fawnbrook Ln | Simsbury | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Professor | Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/18/2026 | $50.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Dewell | Joslyn | | 3083 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 21 Station Rd | Wilton | CT | 06897 |

| Principal Occupation | Name of Employer |
|---|---|
| Unemployed | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/18/2026 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Loewenthal | Adlyn | | 3084 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 137 Steele Rd | West Hartford | CT | 06119 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $340.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/18/2026 | $340.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Wormser | Andrew | | 3085 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 85 Bedford Ave | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| MD | CMG |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/18/2026 | $425.00 |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Ramia | Julie | | 3086 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 154 Kings Hwy Apt F | Milford | CT | 06460 |

| Principal Occupation | Name of Employer |
|---|---|
| Dementia Specialist | Hartford Healthcare |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/18/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Rundio** | **Emma** | | **3077** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **82 Wells Farm Dr** | **Wethersfield** | **CT** | **06109** |

| Principal Occupation | Name of Employer |
|---|---|
| **Transportation supervising engineer** | **Connecticut department of transportation** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/18/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Allen** | **Mary** | **E** | **3061** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **14 Hewitt St** | **Willimantic** | **CT** | **06226** |

| Principal Occupation | Name of Employer |
|---|---|
| **Professor** | **UCONN** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/19/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Allen** | **Mary** | **E** | **3052** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **14 Hewitt St** | **Willimantic** | **CT** | **06226** |

| Principal Occupation | Name of Employer |
|---|---|
| **Professor** | **UConn** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/19/2026**

Aggregate Contributions: **$35.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Menta** | **Anne Marie** | | **3042** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **365 Mather St Unit 190** | **Hamden** | **CT** | **06514** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/19/2026**

Aggregate Contributions: **$90.00**

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Leadley | Esther | | 3041 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 55 Ayrault Rd Apt 307 | Fairport | NY | 14450 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/19/2026

Aggregate Contributions: $10.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Menta~~ | ~~Anne Marie~~ | | ~~3042~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~365 Mather St Unit 190~~ | ~~Hamden~~ | ~~CT~~ | ~~06514~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/19/2026~~

Aggregate Contributions: ~~$155.00~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Weiner | Eric | | 3043 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 150 Broad St | Windsor | CT | 06095 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/19/2026

Aggregate Contributions: $75.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Gauthier | Nicholas | | 3044 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 38 Norman St | Waterford | CT | 06385 |

| Principal Occupation | Name of Employer |
|---|---|
| State Representative | Connecticut General Assembly |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $207.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/19/2026

Aggregate Contributions: $367.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Jefferson | Ed | | 3045 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 373 Hill St | Hamden | CT | 06514 |

| Principal Occupation | Name of Employer |
|---|---|
| Owner | CCP PLUMBING |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/19/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Vasudevan | Divya | | 3046 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 43 Lexington Gdns | North Haven | CT | 06473 |

| Principal Occupation | Name of Employer |
|---|---|
| Attorney | Eversource Energy |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/19/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Last41630fc2 | First33c301c2 | | 3047 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 69 Belden Rd | Hamden | CT | 06514 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/19/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Sieng | Ryan | | 3048 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 150 Foxon Rd | East Haven | CT | 06513 |

| Principal Occupation | Name of Employer |
|---|---|
| Student | Student |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/19/2026 | $35.00 | $5.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| NEGRALLE | Mark A. | | 3049 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 53 Colchester Ave | East Hampton | CT | 06424 |

| Principal Occupation | Name of Employer |
|---|---|
| Trades | State of CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/19/2026 | $50.00 | $50.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Scruggs | Lyle | | 3050 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 25 Stephen St | Manchester | CT | 06040 |

| Principal Occupation | Name of Employer |
|---|---|
| Educator | Univ of Connectcut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/19/2026 | $25.00 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cementina | Alan | | 3051 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 904 Flanders Rd | Coventry | CT | 06238 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/19/2026 | $75.00 | $25.00 |

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Allen~~ | ~~Mary~~ | | ~~3052~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~14 Hewitt St~~ | ~~Willimantic~~ | ~~CT~~ | ~~06226~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Professor~~ | ~~UConn~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/19/2026~~ | ~~$60.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Darasz | Wendy | | 3053 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 781 South Rd | Harwinton | CT | 06791 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/19/2026 | $100.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Walach | Brian | | 3054 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 497 Woodlawn Ave | Stratford | CT | 06614 |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/19/2026 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Sexton | Alice | | 3055 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 45 Hardin Ln | Glastonbury | CT | 06033 |

| Principal Occupation | Name of Employer |
|---|---|
| Attorney | State of CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/19/2026 | $275.00 |

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Coutant | Maria | | 3056 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 10 Highfields Dr | Canton | CT | 06019 |

| Principal Occupation | Name of Employer |
|---|---|
| Social worker | University of Hartford |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $15.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/19/2026

Aggregate Contributions: $15.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Rameikas | Julia | | 3057 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 186 Oxford St | Hartford | CT | 06105 |

| Principal Occupation | Name of Employer |
|---|---|
| Deputy Campaign Manager | Josh For CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/19/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Oestreicher | Wendy | | 3058 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 117 Tri Mountain Rd | Durham | CT | 06422 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/19/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Kocsondy | Ryan | | 3059 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 73 Bonny View Rd | West Hartford | CT | 06107 |

| Principal Occupation | Name of Employer |
|---|---|
| CEO | N/a |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $200.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/19/2026

Aggregate Contributions: $200.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Looney | Curtis | | 3060 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 10 Cedar Glen Rd | West Simsbury | CT | 06092 |

| Principal Occupation | Name of Employer |
|---|---|
| Consultant | Self employed |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $300.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/19/2026

Aggregate Contributions: $300.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Allen~~ | ~~Mary Beth~~ | | ~~3061~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~14 Hewitt St~~ | ~~Willimantic~~ | ~~CT~~ | ~~06226~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Professor~~ | ~~UCONN~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/19/2026~~

Aggregate Contributions: ~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Wuerth | Allie | | 3062 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 100 Tresser Blvd | Stamford | CT | 06901 |

| Principal Occupation | Name of Employer |
|---|---|
| Sales | Oracle |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/19/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Haque | Yasmin | | 3063 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1728 Whitney Ave | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| teacher | Hamden Hall |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/19/2026

Aggregate Contributions: $75.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Coassin~~ | ~~Sophie~~ | | ~~3064~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~33 Westerly Dr~~ | ~~Hamden~~ | ~~CT~~ | ~~06518~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Student~~ | ~~Student~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$130.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/19/2026~~

Aggregate Contributions: ~~$560.00~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Busillo | Ryan | | 3065 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 5 Mountain View Rd | Wallingford | CT | 06492 |

| Principal Occupation | Name of Employer |
|---|---|
| Video Tech | Town of Wallingford |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/19/2026

Aggregate Contributions: $5.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Durlach | Karen | | 3066 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 94 Tuft Hill Rd | North Grosvenordale | CT | 06255 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/19/2026

Aggregate Contributions: $50.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Prescott | Heather | | 3067 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 43 Village Ln | Collinsville | CT | 06019 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | None |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/19/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Warinsky | Karen | | 3068 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 25 Tattoon Rd | Woodstock | CT | 06281 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/19/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Coassin** | **Sophie** | | **3064** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **33 Westerly Dr** | **Hamden** | **CT** | **06518** |

| Principal Occupation | Name of Employer |
|---|---|
| **Student** | **Student** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$130.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/19/2026**

Aggregate Contributions: **$430.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Strong | Julien | | 3035 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 55 Belmont St | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Professor | CCSU |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/20/2026

Aggregate Contributions: $202.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Winch | Paul | | 3036 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 2405 Whitney Ave | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/20/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Pezzini | Norma | | 3037 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 59 Hubbard Pl | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/20/2026

Aggregate Contributions: $45.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Lawrence | Jan | | 3038 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 6 Hills Ln | Hebron | CT | 06248 |

| Principal Occupation | Name of Employer |
|---|---|
| Information Technology Supervisor | State of Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/20/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Wade | Donna | | 3039 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 241 Hogan Rd | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/20/2026

Aggregate Contributions: $275.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Bruckner | Steven | | 3040 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 2448 NW Westover Rd | Portland | OR | 97210 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/20/2026

Aggregate Contributions: $75.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Amore** | **Scott** | | **3021** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **13 Jenna Rd** | **Wallingford** | **CT** | **06492** |

| Principal Occupation | Name of Employer |
|---|---|
| **Media Production** | **Scott N. Amore** |

| Is contributor a principal of a state contractor or prospective state contractor? | Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | Amount of Contribution |
|---|---|---|
| ☐ Yes ☒ No | ☐ Yes ☒ No | |
| If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative | | |

| Is this contribution associated with an event reported in Section J1? | Method of contribution: | Date Received | Aggregate Contributions |
|---|---|---|---|
| ☐ Yes ☒ No | ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card | **03/20/2026** | **$5.00** |
| If yes, list Event # | | | |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Suczek | Marybelle | | 2990 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 143 Hoyt St . | Stamford | CT | 06905 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

| Is contributor a principal of a state contractor or prospective state contractor? | Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | Amount of Contribution |
|---|---|---|
| ☐ Yes ☒ No | ☐ Yes ☒ No | |
| If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative | | |

| Is this contribution associated with an event reported in Section J1? | Method of contribution: | Date Received | Aggregate Contributions |
|---|---|---|---|
| ☐ Yes ☐ No | ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card | 03/20/2026 | $50.00 |
| If yes, list Event # | | | |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Leary | Shannon | | 2991 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 8 Kilbourn Rd 8 Kilbourn Rd | Simsbury | CT | 06070 |

| Principal Occupation | Name of Employer |
|---|---|
| Simsbury Community Media Manager, Community Engage | Connecticut |

| Is contributor a principal of a state contractor or prospective state contractor? | Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | Amount of Contribution |
|---|---|---|
| ☐ Yes ☒ No | ☐ Yes ☒ No | |
| If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative | | |

| Is this contribution associated with an event reported in Section J1? | Method of contribution: | Date Received | Aggregate Contributions |
|---|---|---|---|
| ☐ Yes ☐ No | ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card | 03/20/2026 | $150.00 |
| If yes, list Event # | | | |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Arnini | Christin | | 2992 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 42 Hamilton Dr | Bethany | CT | 06524 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

| Is contributor a principal of a state contractor or prospective state contractor? | Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | Amount of Contribution |
|---|---|---|
| ☐ Yes ☒ No | ☐ Yes ☒ No | |
| If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative | | |

| Is this contribution associated with an event reported in Section J1? | Method of contribution: | Date Received | Aggregate Contributions |
|---|---|---|---|
| ☐ Yes ☐ No | ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card | 03/20/2026 | $50.00 |
| If yes, list Event # | | | |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Brown | Susan | | 2993 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 6 Hale Rd | Glastonbury | CT | 06033 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/20/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Silva~~ | ~~Phil~~ | | ~~2994~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~22 Triangle St~~ | ~~Danbury~~ | ~~CT~~ | ~~06810~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Health Admin~~ | ~~N/a~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/20/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Fleischman | Henry | | 2995 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 314 Kingfisher Ln | Mills River | NC | 28759 |

| Principal Occupation | Name of Employer |
|---|---|
| NA | NA |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/20/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Holm | Stacie | | 2996 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 398A Federal Rd | Brookfield | CT | 06804 |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | Board of Ed |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $15.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/20/2026

Aggregate Contributions: $15.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hussey | Rebecca | | 2997 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 73 Linda Ln | Bethel | CT | 06801 |

| Principal Occupation | Name of Employer |
|---|---|
| Professor | CT State Norwalk |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/20/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Kozak | David | | 2998 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 88 Whitney Ridge Ter | North Haven | CT | 06473 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $140.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/20/2026

Aggregate Contributions: $440.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Platt | Halina | | 2999 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 200 Leeder Hill Dr | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/20/2026

Aggregate Contributions: $200.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Capasso | John | | 3000 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 643 Riverdale Dr | Stratford | CT | 06615 |

| Principal Occupation | Name of Employer |
|---|---|
| Hair Stylist | John Thomas Hair Studio |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/20/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McDonald | Ian | | 3001 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 548 | Dayville | CT | 06241 |

| Principal Occupation | Name of Employer |
|---|---|
| Stonemason | n/a |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/20/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Lombardo | Wayne | | 3002 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 571 Town St | Moodus | CT | 06469 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/20/2026

Aggregate Contributions: $40.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Melley Genolio | Elizabeth | | 3003 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 78 Bellstone Ave | Westbrook | CT | 06498 |

| Principal Occupation | Name of Employer |
|---|---|
| Childcare | Town of Westbrook park and recreation |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/20/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Okun | MarcAnthony | | 3004 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 21 Clarke Rd | Tolland | CT | 06084 |

| Principal Occupation | Name of Employer |
|---|---|
| Manager | NASRCC |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/20/2026

Aggregate Contributions: $100.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Calabrese | Christopher | | 3005 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 61 Loomis Rd | Colchester | CT | 06415 |

| Principal Occupation | Name of Employer |
|---|---|
| Policy Analyst | State of CT - General Assembly |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/20/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Wheeler | Brian | | 3006 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 119 Highland Ave | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Non-profit Executive | Oddfellows Playhouse |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/20/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Krieger | Irwin | | 3007 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 115 Lakeview Dr | Ashford | CT | 06278 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/20/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Donnelly | Kate | | 3008 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 202 Station Rd | Hampton | CT | 06247 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/20/2026

Aggregate Contributions: $400.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Morthanos | Paula | | 3009 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 4 Ocean Ave | Stratford | CT | 06615 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/20/2026

Aggregate Contributions: $275.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cabral | Jason | | 3010 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 322 Old Farms Rd | Simsbury | CT | 06070 |

| Principal Occupation | Name of Employer |
|---|---|
| Software Engineer | Chubb |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/20/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McCarthy | Shirley | | 3011 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 16 Rockland Park | Branford | CT | 06405 |

| Principal Occupation | Name of Employer |
|---|---|
| retired physician | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/20/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McCormick | Thomas | | 3012 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 8 Mary Butler Dr | Waterford | CT | 06385 |

| Principal Occupation | Name of Employer |
|---|---|
| Mech.Engr. Struc.Vib's & Acoust. FEA Expert | Retired Engineer |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/20/2026

Aggregate Contributions: $150.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Vivier | Gretchen | | 3013 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 54 White Ave | West Hartford | CT | 06119 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/20/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Godzeno | Jennifer | | 3014 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 29 Douglas Ave | Stamford | CT | 06906 |

| Principal Occupation | Name of Employer |
|---|---|
| Nonprofit program director | United Way Coastal & Western CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/20/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Molina | Amy | | 3015 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 44 E Gate Ln | Hamden | CT | 06514 |

| Principal Occupation | Name of Employer |
|---|---|
| Technology Center Operations Manager | Quinnipiac University |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/20/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Miller | Brian | | 3016 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 108 Colonial Hill Dr | Wallingford | CT | 06492 |

| Principal Occupation | Name of Employer |
|---|---|
| City Planner | Miller Planning Group LLC |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/20/2026

Aggregate Contributions: $5.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Flaherty-Ludwig | Mary Ellen | | 3017 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 89 Soundview Ave | Norwalk | CT | 06854 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $300.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/20/2026

Aggregate Contributions: $340.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Peterson | June | | 3018 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 44 Ashpohtag Rd | Norfolk | CT | 06058 |

| Principal Occupation | Name of Employer |
|---|---|
| media relations | Mediabids |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/20/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Favreau | Janice | | 3019 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 446 Pleasant Valley Rd | South Windsor | CT | 06074 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | reetired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/20/2026

Aggregate Contributions: $200.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Giglio | Mary | | 3020 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 53 Virginia Dr | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/20/2026

Aggregate Contributions: $75.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Amore~~ | ~~Scott~~ | | ~~3021~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~13 Jenna Rd~~ | ~~Wallingford~~ | ~~CT~~ | ~~06492~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Media Production~~ | ~~Scott N. Amore~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/20/2026~~ | ~~$10.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Green | Heidi | | 3022 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 306 S Main | West Hartford | CT | 06107 |

| Principal Occupation | Name of Employer |
|---|---|
| Fundraiser | Ct state community college gateway |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/20/2026 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Sakey | Mike | | 3023 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 85 Abbe Rd | Enfield | CT | 06082 |

| Principal Occupation | Name of Employer |
|---|---|
| Realtor | Haus of Sakey LLC |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/20/2026 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Zolvik | Kim | | 3024 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 21 Forest St | Branford | CT | 06405 |

| Principal Occupation | Name of Employer |
|---|---|
| Graphic Designer | Yale University |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/20/2026 | $75.00 |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Wang~~ | ~~Jennifer~~ | | ~~3025~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~84 April Dr~~ | ~~Glastonbury~~ | ~~CT~~ | |

| Principal Occupation | Name of Employer |
|---|---|
| ~~consulting services~~ | ~~self-employed: Jennifer Wang~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/20/2026~~

Aggregate Contributions: ~~$100.00~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Knudsen | John | | 3026 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 283 Babcock Hill Rd | Lebanon | CT | 06249 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☒ Yes ☐ No

If yes, list Event # 02082026E

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/20/2026

Aggregate Contributions: $100.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McClanahan | Rebecca | | 3027 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 42 Robin Ct | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/20/2026

Aggregate Contributions: $25.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Joaquim | Nancy | | 3028 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 845 Westside Rd | Cheshire | CT | 06410 |

| Principal Occupation | Name of Employer |
|---|---|
| Rate Specialist | State of CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/20/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Knudsen | Janice | | 3029 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 283 Babcock Hill Rd | Lebanon | CT | 06249 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/20/2026 | $100.00 | $100.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McGary | Nikki | | 3030 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 36 E Maxwell Dr . | West Hartford | CT | 06107 |

| Principal Occupation | Name of Employer |
|---|---|
| Professor | CT State |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/20/2026 | $225.00 | $75.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Pearston | Robert | | 3031 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 992 Ridgewood Rd | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Transporter | Hertz |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/20/2026 | $50.00 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Chafee | Brandon | | 3032 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 73 Ten Acre Rd | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Engineer | Eversource |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/20/2026 | $340.00 | $90.00 |

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Fox | Ellen | | 3033 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 522 Traditions Ct N | Oxford | CT | 06478 |

| Principal Occupation | Name of Employer |
|---|---|
| Registrar of Voters | Town of Oxford, CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/20/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Iorfino | Anthony | | 3034 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 117 Cavalry Rd | Wilton | CT | 06897 |

| Principal Occupation | Name of Employer |
|---|---|
| bookkeeper | None |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $12.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/20/2026

Aggregate Contributions: $12.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Wang** | **Jennifer** | | **3025** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **84 April Dr** | **Glastonbury** | **CT** | |

| Principal Occupation | Name of Employer |
|---|---|
| **Consultant** | **Jennifer Wang** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/20/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Silva** | **Phil** | | **2994** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **22 Triangle St** | **Danbury** | **CT** | **06810** |

| Principal Occupation | Name of Employer |
|---|---|
| **Medical Coder** | **Northwell Health** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/20/2026**

Aggregate Contributions: **$25.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Webster** | **Tyler** | | **2983** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **6-17 Forest Glen Cir** | **Middletown** | **CT** | **06066** |

| Principal Occupation | Name of Employer |
|---|---|
| **Occupational Therapist** | **Bristol Public Schools** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/21/2026**

Aggregate Contributions: **$225.00**

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Fleuette | Chandler | | 2981 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 88 Beers Rd | Easton | CT | 06612 |

| Principal Occupation | Name of Employer |
|---|---|
| Engineer | ASML |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $340.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/21/2026

Aggregate Contributions: $340.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Sandadi | Rishi | | 2982 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 14 Twin Oaks Dr | Cromwell | CT | 06416 |

| Principal Occupation | Name of Employer |
|---|---|
| Student | N/A |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/21/2026

Aggregate Contributions: $5.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Webster~~ | ~~Tyler~~ | | ~~2983~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~6-17 Forest Glen Cir~~ | ~~Middletown~~ | ~~CT~~ | ~~06457~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Occupational Therapist~~ | ~~Bristol Public Schools~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/21/2026~~

Aggregate Contributions: ~~$375.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Leviton | Ann | | 2984 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 701 Snowy Plain Rd | Fort Collins | CO | 80525 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Re |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/21/2026

Aggregate Contributions: $60.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Connor | Sean | | 2985 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 252 Route 198 | Woodstock Valley | CT | 06282 |

| Principal Occupation | Name of Employer |
|---|---|
| Video editor | WCVB-TV Hearst |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/21/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Santiago | Abraham | | 2986 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 178 Sherman Ave | New Haven | CT | 06511 |

| Principal Occupation | Name of Employer |
|---|---|
| Clinical Technician | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/21/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Simon | Esther | | 2987 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 48 N Lake Dr | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/21/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Purohit | Vivek | | 2988 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 48 Heritage Rd | East Lyme | CT | 06333 |

| Principal Occupation | Name of Employer |
|---|---|
| Scientist | Incyte |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/21/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cramer | Marina | | 2989 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 10 Prospect St | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Homemaker | Unemployed |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/21/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Gammon** | **George** | | **2968** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **33 Edgehill Ter** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Physician** | **George Davis Gammon, Jr, MD** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$40.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/22/2026**

Aggregate Contributions: **$290.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Penn-Gesek** | **Tyra** | | **2980** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **28 Blain Rd** | **North Grosvenordale** | **CT** | **06255** |

| Principal Occupation | Name of Employer |
|---|---|
| **Director of Planning and Development** | **Town of Thompson** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/22/2026**

Aggregate Contributions: **$25.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Hagearty** | **Kathleen** | | **2970** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **47 Hunters Ln** | **Newington** | **CT** | **06111** |

| Principal Occupation | Name of Employer |
|---|---|
| **Clinical social worker** | **State of CT - DMHAS** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| **03/22/2026** | **$25.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Connor | Susan | | 2948 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 252 Route 198 | Woodstock Valley | CT | 06282 |

| Principal Occupation | Name of Employer |
|---|---|
| preschool teacher | Maple Moon Montessori, LLC |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/22/2026 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Schwartz | Jeremy | | 2949 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 71 Chestnut St | Willimantic | CT | 06226 |

| Principal Occupation | Name of Employer |
|---|---|
| Rabbi | Temple Bnai Israel |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/22/2026 | $35.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Glanzer | Theodore | | 2950 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 22A Mohawk Dr | Unionville | CT | 06085 |

| Principal Occupation | Name of Employer |
|---|---|
| Press Aide | State of CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/22/2026 | $25.00 |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hubbard | Dana | | 2951 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 20 Chestnut St | Bethel | CT | 06801 |

| Principal Occupation | Name of Employer |
|---|---|
| Administrative Assistant | Icahn School of Medicine at Mount Sinai |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/22/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Das~~ | ~~Riju~~ | | ~~2952~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~4 Talcott Gln~~ | ~~Farmington~~ | ~~CT~~ | ~~06032~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Attorney~~ | ~~State of Virginia~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$200.00~~

Is this contribution associated with an event reported in Section J1? ☒ Yes ☐ No

If yes, list Event #: ~~03222026H~~

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/22/2026~~

Aggregate Contributions: ~~$450.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Bonnett | Lynne | | 2953 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 675 Townsend Ave , | New Haven | CT | 06512 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/22/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Kimmich | Daniela | | 2954 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 93 Dry Hill Rd | Norwalk | CT | 06851 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/22/2026

Aggregate Contributions: $5.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Buckingham | Mallory | | 2955 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 435 Butternut St | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Speech pathologist | State of Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/22/2026

Aggregate Contributions: $125.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Ereshena Manning | Lynn | | 2956 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 39 W Town St | Lebanon | CT | 06249 |

| Principal Occupation | Name of Employer |
|---|---|
| Clinical social worker | Lynn Ereshena Manning LCSW |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/22/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Harris | Loughlin | | 2957 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 76 Deepwood Rd | Darien | CT | 06820 |

| Principal Occupation | Name of Employer |
|---|---|
| Unemployed | Unemployed |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/22/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Drummond | Barbara | | 2958 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 82 Woodhouse Ave | Northford | CT | 06472 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | None |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/22/2026

Aggregate Contributions: $5.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Tucci | Michael | | 2959 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 369 Main St | Farmington | CT | 06032 |

| Principal Occupation | Name of Employer |
|---|---|
| Town Clerk | Town of Farmington |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☒ Yes ☐ No

If yes, list Event # 03222026H

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/22/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Seitz | Vicki | | 2960 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 194 Haverford St | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/22/2026

Aggregate Contributions: $425.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Das | Swapna | | 2961 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1 Crabapple Ln | Unionville | CT | 06085 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☒ Yes ☐ No

If yes, list Event # 03222026H

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/22/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Salls | Tucker | | 2962 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 11 Tunxis Pl | Simsbury | CT | 06081 |

| Principal Occupation | Name of Employer |
|---|---|
| Legislative Affairs | CT Military Department |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/22/2026

Aggregate Contributions: $200.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Belanger | Sarah | | 2963 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 56 Bee Brook Rd | Washington Depot | CT | 06794 |

| Principal Occupation | Name of Employer |
|---|---|
| Library Clerk | Regional School District 12 |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/22/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Sapieha-Yanchak | Teresa | | 2964 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 208 S Mountain Dr | New Britain | CT | 06052 |

| Principal Occupation | Name of Employer |
|---|---|
| Academic Curriculum Coordinator | State of CT UConn SOM |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $340.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/22/2026

Aggregate Contributions: $340.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Paro | Roberta | | 2965 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 246A Yantic St | Norwich | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/22/2026

Aggregate Contributions: $45.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Glenn | Michael | | 2966 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 15 Camille Ln | West Simsbury | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/22/2026

Aggregate Contributions: $100.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| PARTRIDGE | Vivian | | 2967 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1594 Boston Post Rd | Westbrook | CT | 06498 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/22/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Gammon~~ | ~~George~~ | | ~~2968~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~33 Edgehill Ter~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Physician~~ | ~~Self~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$40.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/22/2026~~

Aggregate Contributions: ~~$380.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Waldron | Mary | | 2969 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 30 Bokum Rd # 103 | Essex | CT | 06426 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/22/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Hagearty~~ | ~~Kathleen~~ | | ~~2970~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~47 Hunters Ln~~ | ~~Newington~~ | ~~CT~~ | ~~06512~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Clinical social worker~~ | ~~State of CT - DMHAS~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/22/2026~~

Aggregate Contributions: ~~$50.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Mellen | Amy | | 2971 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 59 Mantup Rd | Putnam | CT | 06260 |

| Principal Occupation | Name of Employer |
|---|---|
| Veterinary Technician | Tufts university |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/22/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Yeisley | Diana | | 2972 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 78 County Rd | Simsbury | CT | 06070 |

| Principal Occupation | Name of Employer |
|---|---|
| Homemaker | Homemaker |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/22/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Tylek | Bianca | | 2973 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 408 W 57th St | New York | NY | 10019 |

| Principal Occupation | Name of Employer |
|---|---|
| Attorney | Worth Rises |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/22/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Bradford | Rene' | | 2974 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 81 Canton Rd | West Simsbury | CT | 06092 |

| Principal Occupation | Name of Employer |
|---|---|
| Homemaker | No |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/22/2026

Aggregate Contributions: $50.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ROHRER | W Jean | | 2975 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 50 Clark Point Rd | Southwest Harbor | ME | 04679 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired RN |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $15.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/22/2026

Aggregate Contributions: $15.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Morgan | Collin | | 2976 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 2 Foley Rd | Portland | CT | 06480 |

| Principal Occupation | Name of Employer |
|---|---|
| Software Engineer | Sonalysts, inc. |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/22/2026

Aggregate Contributions: $249.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Walker | Rachel | | 2977 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 43 Girard Ave | Hartford | CT | 06105 |

| Principal Occupation | Name of Employer |
|---|---|
| Associate Professor | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/22/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Clifford~~ | ~~Douglas~~ | | ~~2978~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~6 Rundelane~~ | ~~Bloomfield~~ | ~~CT~~ | ~~06002~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Self-employed~~ | ~~Connecticut~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/22/2026~~

Aggregate Contributions: ~~$50.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Farnsworth | Peter | | 2979 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 82 Chichester Rd . | New Canaan | CT | 06840 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/22/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Penn~~ | ~~Tyra~~ | | ~~2980~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~28 Blain Rd~~ | ~~North Grosvenordale~~ | ~~CT~~ | ~~06255~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Director of Planning and Development~~ | ~~Town of Thompson~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/22/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Clifford** | **Douglas** | | **2978** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **6 Rundelane** | **Bloomfield** | **CT** | **06002** |

| Principal Occupation | Name of Employer |
|---|---|
| **Not Employed** | **Not Employed** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/22/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Das** | **Riju** | | **2952** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **4B Talcott Gln** | **Farmington** | **CT** | **06032** |

| Principal Occupation | Name of Employer |
|---|---|
| **Attorney** | **State of Virginia** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$200.00**

Is this contribution associated with an event reported in Section J1? ☒ Yes ☐ No

If yes, list Event # **03222026H**

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/22/2026**

Aggregate Contributions: **$225.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **LaPorte-Grimes** | **Laurel** | | **2943** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **112 Putnam St** | **Bristol** | **CT** | **06010** |

| Principal Occupation | Name of Employer |
|---|---|
| **Research/Evaluation** | **Phoenix Project Planning and Production Services,** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/23/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Popp** | **Cathy** | | **2945** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **69 Belden Rd** | **Hamden** | **CT** | **06514** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/23/2026**

Aggregate Contributions: **$277.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Giordano** | **Vincent** | | **2941** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **28 Fairview Ave** | **Ridgefield** | **CT** | **06877** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/23/2026**

Aggregate Contributions: **$75.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Mendoza** | **Linnette** | | **2932** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **76 Bennett Ave** | **Waterbury** | **CT** | **06708** |

| Principal Occupation | Name of Employer |
|---|---|
| **HR** | **Easterseals** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$15.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/23/2026**

Aggregate Contributions: **$15.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Dudek** | **Karl** | | **2939** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **515 Killarney Pass Cir** | **Mundelein** | **IL** | **60060** |

| Principal Occupation | Name of Employer |
|---|---|
| **Contract Asset Manager** | **Northern Equipment Remarketing, LLC** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$150.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/23/2026**

Aggregate Contributions: **$450.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Paro | Roberta | | 2929 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 246A Yantic St | Norwich | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/23/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Wade | Carol | | 2930 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 30 Beaver Hill Ln | New Haven | CT | 06511 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $15.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/23/2026

Aggregate Contributions: $15.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Wilcox | Alexis | | 2931 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 124 Colonial Dr | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| Train Conductor | MetroNorth RR |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/23/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Mendoza~~ | ~~Linnette~~ | | ~~2932~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~76 Bennett Ave~~ | ~~Waterbury~~ | ~~CT~~ | ~~06708~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~HR~~ | ~~Easterseals~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$15.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/23/2026~~ | ~~$30.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Stewart | Raleigh | | 2933 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1925 Main St | Newington | CT | 06111 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/23/2026 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Bonjo | Laurie | | 2934 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 330 Concord St | East Haven | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| University Professor | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/23/2026 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Linehan | Liz | | 2935 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 405 Sycamore Ln | Cheshire | CT | 06410 |

| Principal Occupation | Name of Employer |
|---|---|
| Legislator | CT State Legislature |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/23/2026 | $200.00 |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Pagani | Linda | | 2936 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 4 Guernsey Rd | Bloomfield | CT | 06002 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/23/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Schmidt | Robert | | 2937 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 62 Pond Cir | Somers | CT | 06071 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/23/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hughes | Thomas | | 2938 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 67 North St | Easton | CT | 06612 |

| Principal Occupation | Name of Employer |
|---|---|
| Camp Director | SNEUCC |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/23/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Dudek~~ | ~~Karl~~ | | ~~2939~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~515 Killarney Pass Cir~~ | ~~Mundelein~~ | ~~IL~~ | ~~60060~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Sales~~ | ~~Retired/Part-Time Self Employed~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/23/2026~~

Aggregate Contributions: ~~$600.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Chamberlin | Tyler | | 2940 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 241 West St . | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| software engineer | mpulse |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/23/2026

Aggregate Contributions: $50.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~giordano~~ | ~~vincent~~ | | ~~2941~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~28 Fairview Ave~~ | ~~Ridgefield~~ | ~~CT~~ | ~~06877~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/23/2026~~

Aggregate Contributions: ~~$150.00~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Shere | Victoria | | 2942 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 581A Heritage Vlg | Southbury | CT | 06488 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $290.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/23/2026

Aggregate Contributions: $390.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~LaPorte-Grimes~~ | ~~Laurel~~ | | ~~2943~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~112 Putnam St~~ | ~~Bristol~~ | ~~CT~~ | ~~06010~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Research/Evaluation~~ | ~~Self-employed~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/23/2026~~

Aggregate Contributions: ~~$50.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Levarek | Carol | | 2944 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 102 N Racebrook Rd | Woodbridge | CT | 06525 |

| Principal Occupation | Name of Employer |
|---|---|
| Health Benefits Consultant | Health Benefit Solutions LLC |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/23/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Popp~~ | ~~Cathy~~ | | ~~2945~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~69 Belden Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06514~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~Connecticut~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/23/2026~~

Aggregate Contributions: ~~$427.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Edwards | Margaret | | 2946 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 100 White St | West Haven | CT | 06516 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/23/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| O'NEILL | MICHAEL | | 2947 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 8 Federal Rd | Chaplin | CT | 06235 |

| Principal Occupation | Name of Employer |
|---|---|
| Professor | University of Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/23/2026

Aggregate Contributions: $10.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Elliott** | **William** | | **2924** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **116 Battis Rd** | **Hamden** | **CT** | **06514** |

| Principal Occupation | Name of Employer |
|---|---|
| **Flight attendant** | **Delta Air Lines** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/24/2026**

Aggregate Contributions: **$70.00**

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Rosoff | Ellen | | 2918 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 115 Promenade Dr | Hamden | CT | 06514 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/24/2026

Aggregate Contributions: $25.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Flynn | Shawn | | 2919 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 124 N Racebrook Rd | Woodbridge | CT | 06525 |

| Principal Occupation | Name of Employer |
|---|---|
| Senior Analyst | Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/24/2026

Aggregate Contributions: $25.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McCaffrey | James | | 2920 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 122 Main St | Farmington | CT | 06032 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/24/2026

Aggregate Contributions: $150.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Last5c435804 | Firsta257ab06 | | 2921 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 31 Zoar Rd | Sandy Hook | CT | 06482 |

| Principal Occupation | Name of Employer |
|---|---|
| Television Producer | Self Employed |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/24/2026 | $50.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Saviano | Carrie | | 2922 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 3 Park St | Norwalk | CT | 06851 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/24/2026 | $100.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Manning | Kyle | | 2923 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 5 Roberts St | West Haven | CT | 06516 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | State |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/24/2026 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Elliott~~ | ~~William~~ | | ~~2924~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~116 Battis Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06514~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Flight attendant~~ | ~~Delta Air Lines~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/24/2026~~ | ~~$120.00~~ |

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Altman | Shelly | | 2925 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 207 Colony Rd | New Haven | CT | 06511 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/24/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Rodda | Geri | | 2926 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 215 Pumpkin Hill Rd | New Milford | CT | 06776 |

| Principal Occupation | Name of Employer |
|---|---|
| teacher | Burnham School |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/24/2026

Aggregate Contributions: $10.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Carlucci~~ | ~~Tracy~~ | | ~~2927~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~15 Morning Glory Ln~~ | ~~Easton~~ | ~~CT~~ | ~~06612~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~School Manager~~ | ~~Self-employed; Fairfield School of Music~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/24/2026~~

Aggregate Contributions: ~~$20.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hamilton | Pennell | | 2928 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 28 Park Ln | Woodbridge | CT | 06525 |

| Principal Occupation | Name of Employer |
|---|---|
| Registrar of Voters | Town of Woodbridge |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/24/2026

Aggregate Contributions: $100.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Carlucci** | **Tracy** | | **2927** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **15 Morning Glory Ln** | **Easton** | **CT** | **06612** |

| Principal Occupation | Name of Employer |
|---|---|
| **Music School Owner & Director** | **Fairfield School of Music** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| **03/24/2026** | **$10.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Burns | Meghan | | 2877 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 43 Lansdowne Ave | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Homemaker | Homemaker |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/25/2026 | $200.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Polgar | Michelle | | 2878 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 511 Griswold St | Glastonbury | CT | 06033 |

| Principal Occupation | Name of Employer |
|---|---|
| Managing Director, Connecticut Repertory Theatre | University of Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/25/2026 | $75.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Fernandez | Lisa | | 2879 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 148 Cold Spring St | New Haven | CT | 06511 |

| Principal Occupation | Name of Employer |
|---|---|
| Administration | Yale University |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $340.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/25/2026 | $340.00 |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Adams | Ann | | 2880 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 199 Santa Fe Ave | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Consultant | Farnam Associates |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/25/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Grade | Aaron | | 2881 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 51 Cooper Ave | Wallingford | CT | 06492 |

| Principal Occupation | Name of Employer |
|---|---|
| Analyst | ICF |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/25/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Copland | Laura | | 2882 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 11 Stonebrook Dr | Ivoryton | CT | 06442 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/25/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Vazquez~~ | ~~Luis~~ | | ~~2883~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~31 Meg Way~~ | ~~Windsor Locks~~ | ~~CT~~ | ~~06096~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Software Engineer~~ | ~~CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/25/2026~~

Aggregate Contributions: ~~$10.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Sims | Wendi | | 2884 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 10 Green Valley Lake Rd | East Lyme | CT | 06333 |

| Principal Occupation | Name of Employer |
|---|---|
| Registrar of Voters | Town of East Lyme |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/25/2026

Aggregate Contributions: $125.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Fredlund | Jason | | 2885 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 289 Sargeant St | Hartford | CT | 06105 |

| Principal Occupation | Name of Employer |
|---|---|
| Consultant | Self: Jason Fredlund |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/25/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Poulos | Charles | | 2886 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 29 Doubleday Rd | Columbia | CT | 06237 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $315.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/25/2026

Aggregate Contributions: $340.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Stein | Sandra | | 2887 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 161 Ford Rd | Woodbridge | CT | 06525 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $340.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/25/2026

Aggregate Contributions: $340.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| bernard | Smith | | 2888 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 76 Fanning St | Waterbury | CT | 06704 |

| Principal Occupation | Name of Employer |
|---|---|
| Student | Student |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/25/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Corzo | Richard | | 2889 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 55 Mill Plain Rd | Danbury | CT | 06811 |

| Principal Occupation | Name of Employer |
|---|---|
| computer programmer | Western Connecticut State University |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/25/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Madore | Paul | | 2890 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 63 Greenwoods Rd E | Norfolk | CT | 06058 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/25/2026

Aggregate Contributions: $130.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Yanaway~~ | ~~Quinn~~ | | ~~2891~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~139 Kent Ln~~ | ~~South Windsor~~ | ~~CT~~ | ~~06074~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Student~~ | ~~Student~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$20.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/25/2026~~

Aggregate Contributions: ~~$40.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Lewendon~~ | ~~Whitney~~ | | ~~2892~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~57 Laurelwood Ln~~ | ~~Hamden~~ | ~~CT~~ | ~~06518~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~retired~~ | ~~ct~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/25/2026~~ | ~~$200.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Duenzl | John | | 2893 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 100 Bedlam Rd | Chaplin | CT | 06235 |

| Principal Occupation | Name of Employer |
|---|---|
| Licensing Analyst | Accel Compliance |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $35.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/25/2026 | $35.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| BIEN | CLAIRE | | 2894 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 44 N Lake Dr Apt A1 | Hamden | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Mental Health Advocacy and Education | Advocacy Unlimited |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/25/2026 | $150.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Green | Ronald | | 2895 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 142 Deer Run | Burlington | CT | 06013 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/25/2026 | $25.00 |

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Karnes | Nathan | | 2896 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 4 Juniper Rd | Windsor | CT | 06095 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/25/2026 | $40.00 | $40.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Unfried | Douglas | | 2897 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 67 Kenyon St | Hartford | CT | 06105 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/25/2026 | $50.00 | $50.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Roach | Jon | | 2898 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 42 E Thompson Rd | Thompson | CT | 06277 |

| Principal Occupation | Name of Employer |
|---|---|
| Warehousing Manager | Lignans For Life |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/25/2026 | $25.00 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Poulos | Linda | | 2899 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 29 Doubleday Rd | Columbia | CT | 06237 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/25/2026 | $340.00 | $240.00 |

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Schoen | Claire | | 2900 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 7 Studio Ln | Norwalk | CT | 06850 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/25/2026 | $75.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Gunn | Gwen | | 2901 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 395 Nut Plains Rd | Guilford | CT | 06437 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/25/2026 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Paine | Cathy | | 2902 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 100 River Rd Apt 205 | Wilton | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Health Consultant, semi-retired | Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/25/2026 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Warinsky | Karen | | 2903 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 25 Tattoon Rd | Woodstock | CT | 06281 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/25/2026 | $100.00 |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Duffy | Leigh | | 2904 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 108 Crane Hill Rd | Storrs | CT | 06268 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $200.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/25/2026

Aggregate Contributions: $200.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Post | Albert | | 2905 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 814 Rail Fence Rd | Orange | CT | 06477 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $15.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/25/2026

Aggregate Contributions: $35.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Van Kleef | Susan | | 2906 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 6 Mallard Cir | Tariffville | CT | 06081 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/25/2026

Aggregate Contributions: $10.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Abdul-Mbacke~~ | ~~Makunda~~ | | ~~2907~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~5680 Green Dale Ct~~ | ~~Summerfield~~ | ~~NC~~ | ~~27358~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Physician~~ | ~~Self~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/25/2026~~

Aggregate Contributions: ~~$150.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Niles | Dawn | | 2908 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 26 Fairwaydrive | Windham | CT | 06256 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/25/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| marlatt | susan | | 2909 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 32 Montgomery Pkwy | Branford | CT | 06405 |

| Principal Occupation | Name of Employer |
|---|---|
| Physician | Yale |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/25/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| broderick | colleen | | 2910 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 18 Mimosa Ct | Ridgefield | CT | 06877 |

| Principal Occupation | Name of Employer |
|---|---|
| homemaker | homemaker |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/25/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Bernstein~~ | ~~Abigail~~ | | ~~2911~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~519 W River St~~ | ~~Milford~~ | ~~CT~~ | ~~06461~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Conservationist~~ | ~~Eightmile River Watershed~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/25/2026~~

Aggregate Contributions: ~~$10.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cementina | Alan | | 2912 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 904 Flanders Rd | Coventry | CT | 06238 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/25/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Allen | Ben | | 2913 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 89 Haynes Rd | West Hartford | CT | 06117 |

| Principal Occupation | Name of Employer |
|---|---|
| Filmmaker | Bad Actors |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/25/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Mooney | Sean | | 2914 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 35 Carson Way | Simsbury | CT | 06070 |

| Principal Occupation | Name of Employer |
|---|---|
| Pilot | Blue City Holdings LLC |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/25/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Livingstone | Elaine | | 2915 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 81 Bear Path Rd | Hamden | CT | 06514 |

| Principal Occupation | Name of Employer |
|---|---|
| teacher | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/25/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Watson~~ | ~~Christine~~ | | ~~2916~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~636 Back Rd~~ | ~~North Windham~~ | ~~CT~~ | ~~06256~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~None~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/25/2026~~ | ~~$100.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Salesky | Elizabeth | | 2917 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 3906 1st Ave NE | Seattle | WA | 98105 |

| Principal Occupation | Name of Employer |
|---|---|
| research | Google |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/25/2026 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Lewendon** | **Whitney** | | **2892** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **57 Laurelwood Ln** | **Hamden** | **CT** | **06518** |

| Principal Occupation | Name of Employer |
|---|---|
| **retired** | **retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| **03/25/2026** | **$150.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Abdul-Mbacke** | **Makunda** | | **2907** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **5680 Green Dale Ct** | **Summerfield** | **NC** | **27358** |

| Principal Occupation | Name of Employer |
|---|---|
| **Physician** | **Piedmont Preferred Women's Healthcare** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| **03/25/2026** | **$75.00** |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Watson** | **Christine** | | **2916** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **636 Back Rd** | **North Windham** | **CT** | **06256** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **03/25/2026** | **$50.00** | **$25.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Vazquez** | **Luis** | | **2883** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **31 Meg Way** | **Windsor Locks** | **CT** | **06096** |

| Principal Occupation | Name of Employer |
|---|---|
| **Software Engineer** | **IBM** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **03/25/2026** | **$5.00** | **$5.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Bernstein** | **Abigail** | | **2911** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **519 W River St** | **Milford** | **CT** | **06461** |

| Principal Occupation | Name of Employer |
|---|---|
| **Conservationist** | **Eightmile River Watershed** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **03/25/2026** | **$5.00** | **$5.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Yanaway** | **Quinn** | | **2891** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **139 Kent Ln** | **South Windsor** | **CT** | **06074** |

| Principal Occupation | Name of Employer |
|---|---|
| **Student** | **Student** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **03/25/2026** | **$20.00** | **$20.00** |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Morrell** | **Victoria** | | **2871** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **18 Turnor Ave** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/26/2026**

Aggregate Contributions: **$10.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Budai** | **Jennifer** | | **2864** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **173 Woodcrest Ave** | **Stratford** | **CT** | **06614** |

| Principal Occupation | Name of Employer |
|---|---|
| **Unemployed** | **Unemployed** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$12.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/26/2026**

Aggregate Contributions: **$32.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Burgess | Carol | | 2861 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 28 New Hampshire Ln | Oakdale | CT | 06370 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/26/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cementina | Alan | | 2862 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 904 Flanders Rd | Coventry | CT | 06238 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/26/2026

Aggregate Contributions: $125.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Gorvine | Tara | | 2863 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 23 Elmwood Rd | Wallingford | CT | 06492 |

| Principal Occupation | Name of Employer |
|---|---|
| Unemployed | Unemployed |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/26/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Budai~~ | ~~Jen~~ | | ~~2864~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~173 Woodcrest Ave~~ | ~~Stratford~~ | ~~CT~~ | ~~06614~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~N/A~~ | ~~N/A~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$12.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/26/2026~~

Aggregate Contributions: ~~$49.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Freake | Hedley | | 2865 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 327 South St | Willimantic | CT | 06226 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/26/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Pinkin | June | | 2866 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 22 Santina Dr | Manchester | CT | 06040 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/26/2026

Aggregate Contributions: $5.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Baskan | Sinan | | 2867 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 3 Conifer Ln | Avon | CT | 06001 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/26/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Dunigan | Jake | | 2868 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 12 Ashby St | Mystic | CT | 06355 |

| Principal Occupation | Name of Employer |
|---|---|
| Attorney | Dunigan Law, PLLC |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/26/2026

Aggregate Contributions: $20.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Winkler | Michael | | 2869 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 20 Gottier Dr | Vernon | CT | 06066 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $240.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/26/2026

Aggregate Contributions: $340.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Taylor | Carson | | 2870 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 257 Martin Rd | Hebron | CT | 06248 |

| Principal Occupation | Name of Employer |
|---|---|
| Attorney | Gordon Rees Scully Mansukhani, LLP |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/26/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Morrell~~ | ~~Victoria~~ | | ~~2871~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~18 Turnor Ave~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~No~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/26/2026~~ | ~~$20.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Wyatt | Sydney | | 2872 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 25 Adelaide Ave | Waterbury | CT | 06708 |

| Principal Occupation | Name of Employer |
|---|---|
| Social Media Manager | Self-Employed |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/26/2026 | $5.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Bigalow-Kern | Adrienne | | 2873 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 76 Second Hill Rd | New Milford | CT | 06776 |

| Principal Occupation | Name of Employer |
|---|---|
| Scientist | Duracell |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $200.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/26/2026 | $200.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Harte | Stephen | | 2874 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 174 Pond Plain Rd | Westwood | MA | 02090 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $340.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/26/2026 | $340.00 |

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Scott | Dani | | 2875 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 199 Cherry Brook Rd | Canton | CT | 06019 |

| Principal Occupation | Name of Employer |
|---|---|
| Operations & Fundraising Manager | Two Coyotes Wilderness School |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/26/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Colston | Kimberlee | | 2876 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 489 Warnertown Rd | West Suffield | CT | 06093 |

| Principal Occupation | Name of Employer |
|---|---|
| Treasurer | Town of Suffield |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/26/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Beebe | Marilee | | 2826 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 90 Rhodes Rd | Tolland | CT | 06084 |

| Principal Occupation | Name of Employer |
|---|---|
| Civil Engineer | WSP USA |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/27/2026

Aggregate Contributions: $225.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Desjardins | John | | 2827 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 523 Raymond Hill Rd | Uncasville | CT | 06382 |

| Principal Occupation | Name of Employer |
|---|---|
| Man of Leisure, President, New London Maritime So | Retired, RN |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/27/2026

Aggregate Contributions: $50.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| silbert | erica | | 2828 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 15 Scuppo Rd | Danbury | CT | 06811 |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | Employed |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/27/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Silbermann | Rachel | | 2829 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 61 Santa Fe Ave | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Unemployed | Unemployed |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $200.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/27/2026

Aggregate Contributions: $200.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Lamont | Alice | | 2830 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 16 Bluestem | Cromwell | CT | 06416 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | N/A |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/27/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Chenier~~ | ~~Christopher~~ | | ~~2831~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~56 Prospect St~~ | ~~Portland~~ | ~~CT~~ | ~~06480~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Design and Media Services~~ | ~~Self Employed - Design and Digital Media Consultan~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/27/2026~~

Aggregate Contributions: ~~$50.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Altman | Yvette Scharf | | 2832 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 165 Howard Dr | Hamden | CT | 06514 |

| Principal Occupation | Name of Employer |
|---|---|
| researcher | employed |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/27/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Nolan | Anthony | | 2833 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 105 Blackhall St | New London | CT | 06320 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | No |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/27/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Scruggs | Lyle | | 2834 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 25 Stephen St | Manchester | CT | 06040 |

| Principal Occupation | Name of Employer |
|---|---|
| Educator | UConn |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/27/2026

Aggregate Contributions: $125.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Fisher~~ | ~~Shepard~~ | | ~~2835~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~51 Seneca Dr .~~ | ~~Meriden~~ | ~~CT~~ | ~~06450~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Student~~ | ~~Student~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$30.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/27/2026~~

Aggregate Contributions: ~~$60.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Jamieson | Diane | | 2836 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 490 Sunset Hill Rd | North Grosvenordale | CT | 06255 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $110.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/27/2026

Aggregate Contributions: $235.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Shyne-Appignani | Dawson | | 2837 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 131 Heather Rdg | Shelton | CT | 06484 |

| Principal Occupation | Name of Employer |
|---|---|
| Collegiate Rowing Coach | Sacred Heart University |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $125.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/27/2026

Aggregate Contributions: $125.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Crebase | Colleen | | 2838 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 66 Dalewood Rd | Newington | CT | 06111 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/27/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Gianini | Donna | | 2839 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 5 Butternut Cir | Avon | CT | 06001 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | None |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/27/2026

Aggregate Contributions: $225.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Panayotakis | Alicia | | 2840 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 419 Denslow Hill Rd | Hamden | CT | 06514 |

| Principal Occupation | Name of Employer |
|---|---|
| Accountant | O2SafeSolutions |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/27/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| VanDuzee | Kathleen | | 2841 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 198 Whisconier Rd | Brookfield | CT | 06804 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/27/2026

Aggregate Contributions: $300.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cotnoir | Robert | | 2842 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 200 Westbrook Rd | Essex | CT | 06426 |

| Principal Occupation | Name of Employer |
|---|---|
| Music Editor | Netflix |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/27/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Robbins | Andrew | | 2843 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 2355 Lancashire Dr | Ann Arbor | MI | 48105 |

| Principal Occupation | Name of Employer |
|---|---|
| Research Application Specialist | University of Michigan |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/27/2026

Aggregate Contributions: $75.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Copland | Laura | | 2844 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 11 Stonebrook Dr | Ivoryton | CT | 06442 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/27/2026

Aggregate Contributions: $200.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Quarello~~ | ~~James~~ | | ~~2845~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~28 S Edgewood Rd~~ | ~~Niantic~~ | ~~CT~~ | ~~06357~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Home Inspector~~ | ~~JRV Home Inspection Svcs., LLC~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/27/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Visel | Marion | | 2846 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 24 Day Spring Ave | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/27/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Koistinen | Edward | | 2847 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 490 Sunset Hill Rd | North Grosvenordale | CT | 06255 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/27/2026

Aggregate Contributions: $100.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Walker | Rachel | | 2848 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 43 Girard Ave | Hartford | CT | 06105 |

| Principal Occupation | Name of Employer |
|---|---|
| Associate Professor | University of Hartford |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/27/2026

Aggregate Contributions: $125.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Carlson | Mary | | 2849 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 76 Valley Falls Rd | Vernon | CT | 06066 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/27/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Brown | Thomas | | 2850 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 370 Darling Rd | Salem | CT | 06420 |

| Principal Occupation | Name of Employer |
|---|---|
| Engineer | RTZ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/27/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Graesser | Christine | | 2851 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 28 Lawrence Ave | Avon | CT | 06001 |

| Principal Occupation | Name of Employer |
|---|---|
| Retire | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/27/2026

Aggregate Contributions: $849.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Ortiz | Sara | | 2852 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 200 Oak St | West Haven | CT | 06516 |

| Principal Occupation | Name of Employer |
|---|---|
| Unemployed | Unemployed |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/27/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Maitland | Michelle | | 2853 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 6 Acorn Dr | Niantic | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Project Manager | Unemployed for two weeks |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/27/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Dewell | Joslyn | | 2854 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 21 Station Rd | Wilton | CT | 06897 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/27/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Turchi~~ | ~~Maria~~ | | ~~2855~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~21 Brentford Berwick~~ | ~~Ledyard~~ | ~~CT~~ | ~~06339~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Accountant~~ | ~~Self employed Maria Turchi~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/27/2026~~

Aggregate Contributions: ~~$110.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Ellwanger | Robert | | 2856 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 85 Sasapequan Rd | Fairfield | CT | 06824 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/27/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Waldron | Mary | | 2857 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 30 Bokum Rd # 103 | Essex | CT | 06426 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/27/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Pistell | Anne | | 2858 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 88 Whitney Ridge Ter | North Haven | CT | 06473 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/27/2026

Aggregate Contributions: $250.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cannady | Dana | | 2859 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 2405 Whitney Ave | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| Finance | Aware Recovery Care |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/27/2026

Aggregate Contributions: $35.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| NOEL-JOHNSON | Kathy | | 2860 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 580 Pudding Hill Rd | Hampton | CT | 06247 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☒ Yes ☐ No

If yes, list Event # 02082026D

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/27/2026

Aggregate Contributions: $100.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Quarello** | **James** | | **2845** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **28 Edgewood Dr** | **Wallingford** | **CT** | **06492** |

| Principal Occupation | Name of Employer |
|---|---|
| **Home Inspector** | **JRV Home Inspection Svcs., LLC** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/27/2026**

Aggregate Contributions: **$50.00**

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Turchi** | **Maria** | | **2855** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **21 Brentford Berwick** | **Ledyard** | **CT** | **06339** |

| Principal Occupation | Name of Employer |
|---|---|
| **Accountant** | **Maria Turchi** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/27/2026**

Aggregate Contributions: **$80.00**

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Fisher** | **Shepard** | | **2835** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **51 Seneca Dr .** | **Meriden** | **CT** | **06450** |

| Principal Occupation | Name of Employer |
|---|---|
| **Student** | **Student** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$30.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/27/2026**

Aggregate Contributions: **$30.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Croll | James | | 2825 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 90 Rhodes Rd | Tolland | CT | 06084 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/27/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Chenier** | **Christopher** | **J** | **2831** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **56 Prospect St** | **Portland** | **CT** | **06480** |

| Principal Occupation | Name of Employer |
|---|---|
| **Design and Media Services** | **Christopher James Chenier** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/27/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Peterson** | **Charles** | | **2790** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **48 Garfield Rd** | **Rocky Hill** | **CT** | **06067** |

| Principal Occupation | Name of Employer |
|---|---|
| **Contractor** | **Bathroom Refinishing** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/28/2026**

Aggregate Contributions: **$100.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Tierney** | **Patricia** | | **2819** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **52 Willow St** | **Norwalk** | **CT** | **06851** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/28/2026**

Aggregate Contributions: **$50.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Little** | **Bethal** | | **2797** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **1045 Balboa Ct SE** | **Los Lunas** | **NM** | **87031** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/28/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Logsdon** | **Linda** | | **2813** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **230 Ellsworth Ave** | **New Haven** | **CT** | **06511** |

| Principal Occupation | Name of Employer |
|---|---|
| **Outside Sales** | **Trinity Solar** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/28/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **D'Antonio** | **Christian** | | **2788** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **18 Montano Rd** | **Enfield** | **CT** | **06082** |

| Principal Occupation | Name of Employer |
|---|---|
| **Software Engineer** | **The Hartford** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/28/2026**

Aggregate Contributions: **$10.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Moore | Gwendolyn | | 2773 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 238 Myhr Grn | Nashville | TN | 37221 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $36.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $36.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Powell | Kristina | | 2774 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 95 Water St | Guilford | CT | 06437 |

| Principal Occupation | Name of Employer |
|---|---|
| Homemaker | Homemaker |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Rogers | Emily | | 2775 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 14 Morningside Dr | West Granby | CT | 06090 |

| Principal Occupation | Name of Employer |
|---|---|
| Attorney | N/a |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $73.46

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $73.46

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Larson | Roger | | 2776 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 18707 SE Newport Way # 211 | Issaquah | WA | 98028 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McFarland | Reed | | 2777 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 12 Acorn Dr | Niantic | CT | 06357 |

| Principal Occupation | Name of Employer |
|---|---|
| Special Ed teacher | Middletown public schools |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $45.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Mooney | Whitney | | 2778 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1015 N Main Street Ext | Wallingford | CT | 06492 |

| Principal Occupation | Name of Employer |
|---|---|
| Director of development | Middlesex United way |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Winkler | Phyllis | | 2779 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 20 Gottier Dr | Vernon | CT | 06066 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $240.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $415.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Sperduti | David | | 2780 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 65 Dogwood Dr | New Britain | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Self employed | Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Comeforo | Kristin | | 2781 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 16 Pine Trl | Avon | CT | 06001 |

| Principal Occupation | Name of Employer |
|---|---|
| Professor | University of Hartford |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Skaggs | Kelly | | 2782 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 285 Bolton Center Rd | Bolton | CT | 06043 |

Principal Occupation: Manager

Name of Employer: Travelers Insurance

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Noel | Judy | | 2783 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 33 11th Section Rd | Hampton | CT | 06247 |

Principal Occupation: Care Navigator

Name of Employer: United Services, Inc

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $350.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Seidner | Allen | | 2784 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 120 Bothin Rd | Fairfax | CA | 94930 |

Principal Occupation: Consultant

Name of Employer: Thought For Food Consulting

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Barton | Frank | | 2785 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 636 Cherry Brook Rd | North Canton | CT | 06059 |

Principal Occupation: retired

Name of Employer: CT

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $240.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $450.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Mcgeever | Kelly | | 2786 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 151 Elmfield St | West Hartford | CT | 06110 |

| Principal Occupation | Name of Employer |
|---|---|
| Higher education | University of hartford |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| gardner | christopher | | 2787 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 20 David Dr | Montville | CT | 06370 |

| Principal Occupation | Name of Employer |
|---|---|
| Hospitalist PA | Team health |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Dantonio~~ | ~~Christian~~ | | ~~2788~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~18 Montano Rd~~ | ~~Enfield~~ | ~~CT~~ | ~~06082~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Software Engineer~~ | ~~The Hartford~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/28/2026~~

Aggregate Contributions: ~~$20.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Rohlf | Gerard | | 2789 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 323 Churchill Rd | Pittsburgh | PA | 15235 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $5.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Peterson~~ | ~~Charles~~ | | ~~2790~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~48 Garfield Rd~~ | ~~Rocky Hill~~ | ~~CT~~ | ~~06067~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Contractor~~ | ~~Bathroom Refinishing~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/28/2026~~ | ~~$200.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Towle | Jamie | | 2791 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 23 Old Colony Rd | North Stonington | CT | 06359 |

| Principal Occupation | Name of Employer |
|---|---|
| Professor | Rhode Island College |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/28/2026 | $5.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Smith | Scott | | 2792 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 388 Fowler Ave | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Optical technician | Employed |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/28/2026 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| formica | marilynn | | 2793 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 7562 Seaspring Dr Unit 102 | Huntington Beach | CA | 92648 |

| Principal Occupation | Name of Employer |
|---|---|
| Therapist | CA |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/28/2026 | $5.00 |

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Slemp | Ellen | | 2794 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 74 Camden St | Milford | CT | 06461 |

| Principal Occupation | Name of Employer |
|---|---|
| Unemployed | Unemployed |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $70.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Minor | Craig | | 2795 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 755 Quinnipiac Ln | Stratford | CT | 06614 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hibbs | Carol | | 2796 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 6205 SW Sheridan St | Portland | OR | 97225 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired attorney | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Little~~ | ~~Bethal~~ | | ~~2797~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1045 Balboa Ct SE~~ | ~~Los Lunas~~ | ~~NM~~ | ~~87031~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~None~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/28/2026~~

Aggregate Contributions: ~~$10.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hard | Andrew | | 2798 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 35 Prospect St | Terryville | CT | 06786 |

| Principal Occupation | Name of Employer |
|---|---|
| Case aid | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Gambardella | Michael | | 2799 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 200 W 70th St | New York | NY | 10023 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $10.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Chappell | Christopher | | 2800 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 132 Summer Hill Rd | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Factory worker | Forrest Machine |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Parsons | Ariele | | 2801 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 199 E Marvin Ave | Longwood | FL | 32750 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $5.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Yanaway | SIERRA | | 2802 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 139 Kent Ln | South Windsor | CT | 06074 |

| Principal Occupation | Name of Employer |
|---|---|
| Manager | CCADV |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Riley | Shannon | | 2803 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 11 Deer Run Rd | Brookfield | CT | 06804 |

| Principal Occupation | Name of Employer |
|---|---|
| Educator | Brewster Central Schools |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $10.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Pagliuco | Joan | | 2804 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 99 Woodland Park | Shelton | CT | 06484 |

| Principal Occupation | Name of Employer |
|---|---|
| Court reporter | Self employed |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $10.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Kaye | Beverly S | | 2805 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 15 Lorraine Dr . | Woodbridge | CT | 06525 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired art gallery owner |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $10.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McGowan | Lisa | | 2806 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 33 Spinnaker Dr | Niantic | CT | 06357 |

| Principal Occupation | Name of Employer |
|---|---|
| Physical Therapist | Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Kimball | Barbara | | 2807 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 14 Garland Dr | Glastonbury | CT | 06033 |

| Principal Occupation | Name of Employer |
|---|---|
| Client Services | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Whitehouse | Michael | | 2808 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 36 Sunnyside Park | Groton | CT | 06340 |

| Principal Occupation | Name of Employer |
|---|---|
| Coach | Self |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| DeMallie | Hildegard | | 2809 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 275B Heritage Vlg | Southbury | CT | 06488 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $100.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Tarr | Greg | | 2810 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 17 Sharon Ct | Bethel | CT | 06801 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/28/2026 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Machalick | Ryan | | 2811 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 294 Central Ave | Norwich | CT | 06360 |

| Principal Occupation | Name of Employer |
|---|---|
| Union carpenter | Liberty Builders |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/28/2026 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Roberts | Julie | | 2812 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1907 Quaker Hollow Ln | Streamwood | IL | |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $15.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/28/2026 | $15.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Logsdon~~ | ~~Linda~~ | | ~~2813~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~230 Ellsworth Ave~~ | ~~New Haven~~ | ~~CT~~ | ~~06511~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/28/2026~~ | ~~$10.00~~ |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Lombardo | Wayne | | 2814 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 571 Town St | Moodus | CT | 06469 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $45.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Prasad | Sheela | | 2815 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 70 W Shepard Ave | Hamden | CT | 06514 |

| Principal Occupation | Name of Employer |
|---|---|
| Educator | Teach For America |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $30.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Shain | Diana | | 2816 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 241 Jared Sparks Rd | Willington | CT | 06279 |

| Principal Occupation | Name of Employer |
|---|---|
| Sr. Fncl Analyst | Dxc technology |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $60.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Mahler | Eunice | | 2817 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 202 Harbor St | Branford | CT | 06405 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $50.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Gigantino | Caroline | | 2818 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 119 Stonewall Dr | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| Sales Support | Abel Womack Inc. |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Tierney~~ | ~~Tricis~~ | | ~~2819~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~53 Willow St~~ | ~~Norwalk~~ | ~~CT~~ | ~~06851~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/28/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Brantley | John | | 2820 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 15 Cobblestone Dr | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| Realtor | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $325.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Arsenio | William | | 2821 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 335 Ridge Rd | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $50.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Shaw | Ivan | | 2822 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 505 W 37th St | New York | NY | 10018 |

| Principal Occupation | Name of Employer |
|---|---|
| Visual Editor | Conde Nast |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McManus | Joan | | 2823 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 5 Broadview Rd | Brookfield | CT | 06804 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $340.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McManus | Michael | | 2824 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 5 Broadview Rd | Brookfield | CT | 06804 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/28/2026

Aggregate Contributions: $375.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Heuss-Severance** | **Gwenith** | | **2763** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **24 King St** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/29/2026**

Aggregate Contributions: **$50.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Sullivan** | **Ryan** | | **2741** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **995 Hopmeadow St** | **Simsbury** | **CT** | **06070** |

| Principal Occupation | Name of Employer |
|---|---|
| **Teacher** | **Hartford Public Schools** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/29/2026**

Aggregate Contributions: **$100.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Sanchione** | **Louise** | | **2748** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **315 Eastern St .** | **New Haven** | **CT** | **06513** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/29/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Trueman** | **Ashley** | | **2738** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **300 Dunbar Hill Rd** | **Hamden** | **CT** | **06514** |

| Principal Occupation | Name of Employer |
|---|---|
| **Nanny** | **Katherine Goodrich** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/29/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Perroncel** | **Renee** | | **2760** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **626 Avon Dr** | **Orange** | **CT** | **06477** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$340.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/29/2026**

Aggregate Contributions: **$340.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Ray** | **Dara** | | **2745** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **254 Greenwood Ave** | **Bethel** | **CT** | **06801** |

| Principal Occupation | Name of Employer |
|---|---|
| **Teacher** | **Region 12 Schools** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/29/2026**

Aggregate Contributions: **$100.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Durham** | **Christine** | | **2744** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **30 Homelands Ter** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **retired** | **retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$150.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/29/2026**

Aggregate Contributions: **$150.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Peterson | Tara | | 2727 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 18 Westview Ln | Brookfield | CT | 06804 |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | Wilton public schools |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/29/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cohen | Harold | | 2728 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 200 Leeder Hill Dr | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/29/2026

Aggregate Contributions: $350.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Graham | Susan | | 2729 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 850 Atlantic St . | Bridgeport | CT | 06604 |

| Principal Occupation | Name of Employer |
|---|---|
| Graphic Artist | Susan Graham Graphic Design |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/29/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| O'Brien | Mary | | 2730 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 154 McTigh Rd | Higganum | CT | 06441 |

| Principal Occupation | Name of Employer |
|---|---|
| Homemaker | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/29/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Fahan | John | | 2731 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 40 Clarendon Steeet | Stratford | CT | 06614 |

| Principal Occupation | Name of Employer |
|---|---|
| Inside Sales | Colony Hardware |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/29/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Griffin | Thea | | 2732 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 65 W District Rd | Unionville | CT | 06085 |

| Principal Occupation | Name of Employer |
|---|---|
| Admin | Mott |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/29/2026

Aggregate Contributions: $20.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Jarett | Laura | | 2733 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 88 River Edge Farms Rd | Madison | CT | 06443 |

| Principal Occupation | Name of Employer |
|---|---|
| psychologist | self |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/29/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Majocha | Anne | | 2734 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 206 S Main St | Marlborough | CT | 06447 |

| Principal Occupation | Name of Employer |
|---|---|
| Analyst | Aetna |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/29/2026

Aggregate Contributions: $10.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Kosty | Kevin | | 2735 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 79 Cedarcrest Ct | Shelton | CT | 06484 |

| Principal Occupation | Name of Employer |
|---|---|
| Senior Technical Support Specialist | PerkinElmer |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/29/2026

Aggregate Contributions: $175.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Last003e2d9e | First5828aa2f | | 2736 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 25 Hamden Hills Dr Unit 42 | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/29/2026

Aggregate Contributions: $10.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| rosenfeld | gail | | 2737 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 34 Wild Rose Ct | Bloomfield | CT | 06002 |

| Principal Occupation | Name of Employer |
|---|---|
| Psychotherapist | Gail Rosenfeld, LPC |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $340.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/29/2026

Aggregate Contributions: $340.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Trueman~~ | ~~Ashley~~ | | ~~2738~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~300 Dunbar Hill Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06514~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Nanny~~ | ~~Private family~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/29/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Leach | Richard | | 2739 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 30 Union St # A | Stamford | CT | 06906 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/29/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Resch | Paula | | 2740 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 95 Broadfield Rd | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/29/2026

Aggregate Contributions: $375.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Sullivan~~ | ~~Ryan~~ | | ~~2741~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~995 Hopmeadow St~~ | ~~Simsbury~~ | ~~CT~~ | ~~06070~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Teacher~~ | ~~N/a~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| ~~03/29/2026~~ | ~~$150.00~~ | ~~$50.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Brown | Susan | | 2742 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 6 Hale Rd | Glastonbury | CT | 06033 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/29/2026 | $45.00 | $20.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Fischer | Michael | | 2743 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 80 Killdeer Rd | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Professor | Yale University |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/29/2026 | $75.00 | $75.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Durham~~ | ~~Christine~~ | | ~~2744~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~30 Homelands Ter~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~retired~~ | ~~retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| ~~03/29/2026~~ | ~~$300.00~~ | ~~$150.00~~ |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Ray~~ | ~~Dara~~ | | ~~2745~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~254 Greenwood Ave~~ | ~~Bethel~~ | ~~CT~~ | ~~06801~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Teacher~~ | ~~Region 12 Schools~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/29/2026~~ | ~~$200.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Thurz | Beth | | 2746 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 24 Webster Ln | Rocky Hill | CT | 06067 |

| Principal Occupation | Name of Employer |
|---|---|
| CPA | HarperWhitfield PC |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/29/2026 | $150.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Burley | David | | 2747 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1023 Naval Ave | Portsmouth | VA | 23704 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/29/2026 | $5.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Sanchione~~ | ~~Louise~~ | | ~~2748~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~315 Eastern St .~~ | ~~New Haven~~ | ~~CT~~ | ~~06513~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/29/2026~~ | ~~$95.00~~ |

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Dowling | Robert | | 2749 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 7 Prospect St | New London | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Professor | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/29/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Carpenter | Maureen | | 2750 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 412 Kelsey St | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/29/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Villone | Craig | | 2751 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 60 Elika Rd | Wallingford | CT | 06492 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $30.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/29/2026

Aggregate Contributions: $205.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Brown | Jennifer | | 2752 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 10 Blackman Ave | Bethel | CT | 06801 |

| Principal Occupation | Name of Employer |
|---|---|
| Homemaker | None |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/29/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Tracy | Beverly | | 2753 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 246 Prospect St | Woodstock | CT | 06281 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/29/2026 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Anderson | April | | 2754 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 48 Natureview Trl | Bethel | CT | 06801 |

| Principal Occupation | Name of Employer |
|---|---|
| Na | Na |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $15.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/29/2026 | $15.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Long | Gloria | | 2755 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 98 Warrenton Ave | Hartford | CT | 06105 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/29/2026 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Baglia | Alan | | 2756 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 10 Esther Dr | Rocky Hill | CT | 06067 |

| Principal Occupation | Name of Employer |
|---|---|
| Arts Administration | ARS |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $80.02

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/29/2026 | $80.02 |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Martinez | Maura | | 2757 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 87 Frederic Rd | Vernon | CT | 06066 |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | Enfield public schools |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/29/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Longo | Michael | | 2758 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 36 Cerretta St | Stamford | CT | 06907 |

| Principal Occupation | Name of Employer |
|---|---|
| Scientist | Pfizer |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/29/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Doocy | Fred | | 2759 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 37 Old Colony Rd | Storrs | CT | 06268 |

| Principal Occupation | Name of Employer |
|---|---|
| Appliance Repair | Self employed |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/29/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Perroncel~~ | ~~Renee~~ | | ~~2760~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~626 Avon Dr~~ | ~~Orange~~ | ~~CT~~ | ~~06477~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$340.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/29/2026~~

Aggregate Contributions: ~~$680.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Chapin | William | | 2761 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 28 Castle Rock | Branford | CT | 06405 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/29/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Wormser | Andrew | | 2762 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 85 Bedford Ave | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| MD | CMG |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/29/2026

Aggregate Contributions: $525.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Heuss-Severance~~ | ~~Gwenith~~ | | ~~2763~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~24 King St~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Teacher~~ | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/29/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Crawford~~ | ~~Vanessa~~ | | ~~2764~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~129 Russell St~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Student~~ | ~~Student~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/29/2026~~

Aggregate Contributions: ~~$500.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Perloe | Jonathan | | 2765 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 34 Bridge St | Great Barrington | MA | 01230 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/29/2026

Aggregate Contributions: $125.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Dick | Leslie | | 2766 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 230 Ridgewood Ave | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/29/2026

Aggregate Contributions: $155.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Webel~~ | ~~Sue~~ | | ~~2767~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~115 Andrew Dr~~ | ~~Canton~~ | ~~CT~~ | ~~06019~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/29/2026~~

Aggregate Contributions: ~~$100.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Geist | Gabriel | | 2768 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 116 Briarcliff Rd | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | NHBOE |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/29/2026

Aggregate Contributions: $250.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Greenblatt | Sarah B | | 2769 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 190 Wooster St | New Haven | CT | 06511 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/29/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Taylor | Karen | | 2770 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 35 Whitney St | Hartford | CT | 06105 |

| Principal Occupation | Name of Employer |
|---|---|
| Psychotherapist | Future Path Collaborative, PLLC |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $36.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/29/2026

Aggregate Contributions: $72.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Metcalf | Jennifer | | 2771 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 27 Old Farms Ln | West Suffield | CT | 06093 |

| Principal Occupation | Name of Employer |
|---|---|
| Project Manager | Sheldon Oak Central, Inc |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/29/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Tabor | Roslyn | | 2772 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1511 Plantation Oak Dr | Baton Rouge | LA | 70810 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $8.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/29/2026

Aggregate Contributions: $8.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Crawford** | **Vanessa** | | **2764** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **129 Russell St** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Student** | **Student** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$150.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/29/2026**

Aggregate Contributions: **$250.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Webel** | **Susan** | **J** | **2767** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **115 Andrew Dr** | **Canton** | **CT** | **06019** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/29/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Doerr** | **Kristi** | | **2658** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **12 Penny Ln** | **Wallingford** | **CT** | **06492** |

| Principal Occupation | Name of Employer |
|---|---|
| **AVP tax** | **Richemont North America Inc** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/30/2026**

Aggregate Contributions: **$280.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Avenia** | **Jennifer** | | **2654** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **34 Dyer Ave** | **Canton** | **CT** | **06019** |

| Principal Occupation | Name of Employer |
|---|---|
| **Director of Immigration Practice** | **Department of Children and Families, State of CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$18.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/30/2026**

Aggregate Contributions: **$54.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Allen | Mary | E | 2677 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 14 Hewitt St | Willimantic | CT | 06226 |

| Principal Occupation | Name of Employer |
|---|---|
| Professor | UCONN |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $40.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Giordano | Vincent | | 2723 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 28 Fairview Ave | Ridgefield | CT | 06877 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Bentley | Kimberly | | 2724 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 185 Cedar Heights Rd | Stamford | CT | 06905 |

| Principal Occupation | Name of Employer |
|---|---|
| Library Assistant / Bookmobile Driver | Ferguson Library (Stamford) |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Goodrich | Robert | | 2711 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 15 Derenthal Dr | Madison | CT | 06443 |

| Principal Occupation | Name of Employer |
|---|---|
| Self: Non-Profit Management and Strategic Planning | Robert M Goodrich |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $250.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $750.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Salsich** | **Janice** | | **2651** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **27 Church St** | **Mystic** | **CT** | **06355** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **03/30/2026** | **$70.00** | **$20.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Mccaw** | **Amanda** | | **2667** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **38 Rudolph Rd** | **Bristol** | **CT** | |

| Principal Occupation | Name of Employer |
|---|---|
| **Quality Engineer** | **Ensign Bickford** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **03/30/2026** | **$100.00** | **$75.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Magnesi** | **John** | | **2684** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **7 Partridge Run** | **Wallingford** | **CT** | **06492** |

| Principal Occupation | Name of Employer |
|---|---|
| **retired** | **retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **03/30/2026** | **$25.00** | **$25.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Gartland** | **Daniel** | | **2691** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **26 Laurel St** | **Norwalk** | **CT** | **06855** |

| Principal Occupation | Name of Employer |
|---|---|
| **journalist** | **Sports Illustrated** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **03/30/2026** | **$100.00** | **$75.00** |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Correa-Brown** | **Linda Ivelisse** | | **2687** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **15 Putnam St** | **Hartford** | **CT** | **06106** |

| Principal Occupation | Name of Employer |
|---|---|
| **Office Assistant** | **K&S Wholesale** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/30/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Baird** | **Laura** | | **2722** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **50 Sawmill Xing** | **Wethersfield** | **CT** | **06109** |

| Principal Occupation | Name of Employer |
|---|---|
| **Clinical Psychologist** | **Laura L Baird, LLC** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/30/2026**

Aggregate Contributions: **$100.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Woods** | **Peter** | | **2660** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **10 Fort Hill Rd** | **Groton** | **CT** | **06340** |

| Principal Occupation | Name of Employer |
|---|---|
| **APRN** | **New London Clinic** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$125.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/30/2026**

Aggregate Contributions: **$452.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Crabtree** | **Davida** | | **2663** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **400 Seabury Dr** | **Bloomfield** | **CT** | **06002** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired clergy** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/30/2026**

Aggregate Contributions: **$25.00**

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Casey** | **Julia** | **M** | **2683** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **20 Pleasant Ave** | **Kensington** | **CT** | **06037** |

| Principal Occupation | Name of Employer |
|---|---|
| **Area Director** | **Residential Management Services Development Inc.** |

| Is contributor a principal of a state contractor or prospective state contractor? | Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | Amount of Contribution |
|---|---|---|
| ☐ Yes ☒ No | ☐ Yes ☒ No | |
| If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative | | |

| Is this contribution associated with an event reported in Section J1? | Method of contribution: | Date Received | Aggregate Contributions |
|---|---|---|---|
| ☐ Yes ☒ No | ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card | **03/30/2026** | **$75.00** |
| If yes, list Event # | | | |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| mullane | david | | 2623 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1056 Whippoorwill Ln | Stratford | CT | 06614 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | CT |

| Is contributor a principal of a state contractor or prospective state contractor? | Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | Amount of Contribution |
|---|---|---|
| ☐ Yes ☒ No | ☐ Yes ☒ No | |
| If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative | | |

| Is this contribution associated with an event reported in Section J1? | Method of contribution: | Date Received | Aggregate Contributions |
|---|---|---|---|
| ☐ Yes ☐ No | ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card | 03/30/2026 | $5.03 |
| If yes, list Event # | | | |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Faber | Alice | | 2624 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 232 Anns Farm Rd | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

| Is contributor a principal of a state contractor or prospective state contractor? | Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | Amount of Contribution |
|---|---|---|
| ☐ Yes ☒ No | ☐ Yes ☒ No | |
| If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative | | |

| Is this contribution associated with an event reported in Section J1? | Method of contribution: | Date Received | Aggregate Contributions |
|---|---|---|---|
| ☐ Yes ☐ No | ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card | 03/30/2026 | $75.00 |
| If yes, list Event # | | | |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Linkens | Jessica | | 2625 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 20 Wicker St | Putnam | CT | 06260 |

| Principal Occupation | Name of Employer |
|---|---|
| Regulatory compliance | Connecticut |

| Is contributor a principal of a state contractor or prospective state contractor? | Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | Amount of Contribution |
|---|---|---|
| ☐ Yes ☒ No | ☐ Yes ☒ No | |
| If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative | | |

| Is this contribution associated with an event reported in Section J1? | Method of contribution: | Date Received | Aggregate Contributions |
|---|---|---|---|
| ☐ Yes ☐ No | ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card | 03/30/2026 | $5.00 |
| If yes, list Event # | | | |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McFadden | Laurie | | 2626 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 484 Long Hill Rd | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $250.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Palmer | Aidan | | 2627 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 385 Mountain Rd | Cheshire | CT | 06410 |

| Principal Occupation | Name of Employer |
|---|---|
| events coordinator | Josh for CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $30.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Dalmedo | Olivia | | 2628 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 234 Seaside Ave | Stamford | CT | 06902 |

| Principal Occupation | Name of Employer |
|---|---|
| Publishing | Active Interest Media |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Shevgaonkar | mihir | | 2629 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 255 Salsbury Dr | Santa Clara | CA | 95051 |

| Principal Occupation | Name of Employer |
|---|---|
| unemployed | unemployed |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $15.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $15.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Nwokoye | Agnes | | 2630 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 18 Tower Ln | New Haven | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Paro | Roberta | | 2631 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 246A Yantic St | Norwich | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $55.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Brandes | Lisa | | 2632 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 162 Willard St | New Haven | CT | 06515 |

| Principal Occupation | Name of Employer |
|---|---|
| retired college administrator | retired; student |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $340.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $340.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Heilmann | Niels | | 2633 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 89 Grovers Ave | Bridgeport | CT | 06605 |

| Principal Occupation | Name of Employer |
|---|---|
| Investor | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $340.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $340.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Ghio | Serge | | 2634 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 17 Rome St | Norwalk | CT | 06851 |

| Principal Occupation | Name of Employer |
|---|---|
| Manager | EMCOR Group |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/30/2026 | $125.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Poulos | Leslie | | 2635 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 5 Sleepy Hollow Rd | Columbia | CT | 06237 |

| Principal Occupation | Name of Employer |
|---|---|
| Librarian | Richmond MemorialLibrary |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/30/2026 | $450.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Knebel | Mark | | 2636 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 16 Route 164 | Preston | CT | 06365 |

| Principal Occupation | Name of Employer |
|---|---|
| Engineer | General dynamics electric boat |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/30/2026 | $75.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Caffrey | Robert | | 2637 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 30 Jenny Cliff Rd | Manchester | CT | 06040 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/30/2026 | $20.00 |

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Donato | Frank | | 2638 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 15 Beech Tree Hill Rd | Shelton | CT | 06484 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $60.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Schwarzenberg | Lynn Ann | | 2639 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 63 Hubbell Ave | Ansonia | CT | 06401 |

| Principal Occupation | Name of Employer |
|---|---|
| Homemaker | None |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $15.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $15.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Collins | Cathleen | | 2640 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 55 Eaton St | Stratford | CT | 06614 |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | Weston Public Schools |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Breverman | Craig | | 2641 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 13 Phillip Ln | Ledyard | CT | 06339 |

| Principal Occupation | Name of Employer |
|---|---|
| IT Manager | Yale New Haven Health System |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $125.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Anderson | Erik | | 2642 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 11 Lakeview Ave | Chester | CT | 06412 |

| Principal Occupation | Name of Employer |
|---|---|
| Power plant operator. | Yale University |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Garsson | Geoff | | 2643 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 140 New Rd | Avon | CT | 06001 |

| Principal Occupation | Name of Employer |
|---|---|
| Tutor | theCoderSchool |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| cooke | judy-ann | | 2644 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 16 Sage Park Rd | Windsor | CT | 06095 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $93.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Shirvell | Bridget | | 2645 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 13 School St | Mystic | CT | 06355 |

| Principal Occupation | Name of Employer |
|---|---|
| Writer | Yale |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Janiga | Joseph | | 2646 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 75 Frank St | East Haven | CT | 06512 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Tracy | Kathleen | | 2647 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 4 On the Grn | Windsor | CT | 06095 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Dewell | Joslyn | | 2648 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 21 Station Rd | Wilton | CT | 06897 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $200.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Ludwig | Patricia | | 2649 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 570 Hunting Hill Ave | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $5.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Carter | Brandon | | 2650 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 159 School St | Bloomfield | CT | 06002 |

| Principal Occupation | Name of Employer |
|---|---|
| Heavy Duty Kitchen Utility Porter | Pratt&Whitney RTX/Eurest Inc. |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~SALSICH~~ | ~~Janice~~ | | ~~2651~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~27 Church St~~ | ~~Mystic~~ | ~~CT~~ | ~~06355~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$20.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/30/2026~~

Aggregate Contributions: ~~$90.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hand | Mark | | 2652 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 17 Wild Apple Ln | Old Saybrook | CT | 06475 |

| Principal Occupation | Name of Employer |
|---|---|
| Financial Advisor | Intelligent Advisors LLC |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Froines | Ann | | 2653 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 211 Treadwell St . | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| University faculty member | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $50.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Avenia~~ | ~~Jennifer~~ | | ~~2654~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~34 Dyer Ave~~ | ~~Canton~~ | ~~CT~~ | ~~06019~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Lawyer~~ | ~~State of CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$18.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/30/2026~~

Aggregate Contributions: ~~$90.00~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Osadchey | Sherry | | 2655 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 12 Clover Ct | Avon | CT | 06001 |

| Principal Occupation | Name of Employer |
|---|---|
| Psychotherapist | Self employed psychotherapist |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $335.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $345.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| giaimo | gerald | | 2656 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 45 Filbert St | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Attorney | N/A |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $10.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Foster | Sharon | | 2657 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1199 Whitney Ave | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Retred | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Doerr~~ | ~~Kristi~~ | | ~~2658~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~12 Penny Ln~~ | ~~Wallingford~~ | ~~CT~~ | ~~06492~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~AVP tax~~ | ~~Richemont North America Inc~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/30/2026~~

Aggregate Contributions: ~~$305.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Chapman | Jeni | | 2659 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 23 Goodwives River Rd | Darien | CT | 06820 |

| Principal Occupation | Name of Employer |
|---|---|
| Self employed | Insight snd Impact Consulting |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $250.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $250.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Woods~~ | ~~Peter~~ | | ~~2660~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~10 Fort Hill Rd~~ | ~~Groton~~ | ~~CT~~ | ~~06340~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~APRN~~ | ~~CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$125.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/30/2026~~

Aggregate Contributions: ~~$577.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Dannies | Priscilla | | 2661 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 299 Edwards St | New Haven | CT | 06511 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $125.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Miller | Kristin | | 2662 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 10 Fairgreen Ln | Old Greenwich | CT | 06870 |

| Principal Occupation | Name of Employer |
|---|---|
| Real estate | Richman Group |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $340.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $340.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Crabtree~~ | ~~Davida~~ | | ~~2663~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~400 Seabury Dr~~ | ~~Bloomfield~~ | ~~CT~~ | ~~06002~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired clergy~~ | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/30/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Kimball | Mary Eliza | | 2664 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| Seth Kimball Rd | Pomfret Center | CT | 06259 |

| Principal Occupation | Name of Employer |
|---|---|
| Consultant | Consultant |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Padowicz | Nadine | | 2665 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 34 Anderson Ave | Milford | CT | 06460 |

| Principal Occupation | Name of Employer |
|---|---|
| Social Worker- Psychotherapist in private practice | Nadine Padowicz,LCSW |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $272.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Morin | Albert | | 2666 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 20 Orchard Brook Dr | Wethersfield | CT | 06109 |

| Principal Occupation | Name of Employer |
|---|---|
| Actuary | AXA XL |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Mccaw~~ | ~~Amanda~~ | | ~~2667~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~38 Rudolph Rd~~ | ~~Bristol~~ | ~~CT~~ | |

| Principal Occupation | Name of Employer |
|---|---|
| ~~NA~~ | ~~Ensign Bickford~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/30/2026~~

Aggregate Contributions: ~~$175.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| CUNNINGHAM | ALISON | | 2668 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 19 Wilkins St | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Higher Ed | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Sandoval III | Salvador | | 2669 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 19 Waller Ct | New London | CT | 06320 |

| Principal Occupation | Name of Employer |
|---|---|
| Sailor | Navy |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Huffard | Trevor | | 2670 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 27 Glen Hill Rd | Wilton | CT | 06897 |

| Principal Occupation | Name of Employer |
|---|---|
| President | TLH Structures LLC |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Gillespie | Patrice | | 2671 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 406 Main St | Ridgefield | CT | 06877 |

| Principal Occupation | Name of Employer |
|---|---|
| Outreach Coordinator | PACE |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $65.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Berube | Marc | | 2672 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 531 Highland St | Wethersfield | CT | 06109 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $115.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Watson~~ | ~~Christine~~ | | ~~2673~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~636 Back Rd~~ | ~~North Windham~~ | ~~CT~~ | ~~06256~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~N/A~~ | ~~None~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/30/2026~~

Aggregate Contributions: ~~$200.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Minichino | Catharine | | 2674 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 25 Wright Ln | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/30/2026 | $15.00 | $15.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Matus | Laurel | | 2675 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1 N Main St | East Granby | CT | 06026 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | No |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/30/2026 | $20.00 | $5.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Popp | Cathy | | 2676 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 69 Belden Rd | Hamden | CT | 06514 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/30/2026 | $452.00 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Allen~~ | ~~Mary~~ | | ~~2677~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~14 Hewitt St~~ | ~~Willimantic~~ | ~~CT~~ | ~~06226~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Professor~~ | ~~UCONN~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| ~~03/30/2026~~ | ~~$70.00~~ | ~~$5.00~~ |

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Ide | Lynne | | 2678 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 67 Francis St | Willimantic | CT | 06226 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/30/2026 | $100.00 | $100.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Winters | Robert | | 2679 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 39 Ore Hill Rd . | Lakeville | CT | 06039 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/30/2026 | $25.00 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Martucci | Mick | | 2680 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 720 Mt Carmel Ave | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/30/2026 | $175.00 | $50.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Irwin | James | | 2681 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 58 Marbern Dr | Suffield | CT | 06078 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/30/2026 | $340.00 | $240.00 |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McMenemy | Donald | | 2682 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 20 Orchard Brook Dr | Wethersfield | CT | 06109 |

| Principal Occupation | Name of Employer |
|---|---|
| Engineer | State of Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Casey~~ | ~~Julia~~ | | ~~2683~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~20 Pleasant Ave~~ | ~~Kensington~~ | ~~CT~~ | ~~06037~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Director~~ | ~~Residential management services~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/30/2026~~

Aggregate Contributions: ~~$150.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Magnesi~~ | ~~John~~ | | ~~2684~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~7 Partridge Run~~ | ~~Wallingford~~ | ~~CT~~ | ~~06492~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~retired~~ | ~~CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/30/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Seitz | Vicki | | 2685 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 194 Haverford St | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $450.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| knudsen | daniel | | 2686 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 275 Route 148 | Killingworth | CT | 06419 |

| Principal Occupation | Name of Employer |
|---|---|
| Carpenter | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Last3d1f4b99~~ | ~~First2612a776~~ | | ~~2687~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~59 Mill Pond Rd~~ | ~~Broad Brook~~ | ~~CT~~ | ~~06016~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Data entry~~ | ~~K&S wholesale~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/30/2026~~

Aggregate Contributions: ~~$10.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Irwin | Suzanne | | 2688 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 58 Marbern Dr | Suffield | CT | 06078 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $340.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $340.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Burgess | Kristin | | 2689 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 29 Temple St | Hartford | CT | 06103 |

| Principal Occupation | Name of Employer |
|---|---|
| Attorney | EpicWorks |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $155.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Monday | Tarah | | 2690 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 16 Pine Trl | Avon | CT | 06001 |

| Principal Occupation | Name of Employer |
|---|---|
| Vetting supervisor | CDW |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Gartland~~ | ~~Dan~~ | | ~~2691~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~26 Laurel St~~ | ~~Norwalk~~ | ~~CT~~ | ~~06855~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~journalist~~ | ~~Sports Illustrated~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/30/2026~~

Aggregate Contributions: ~~$175.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Davidson | Dorota | | 2692 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 60 Bmw Dr | Jewett City | CT | 06351 |

| Principal Occupation | Name of Employer |
|---|---|
| Accountant | PMG |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $15.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Nadeau | Erin | | 2693 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 67 Black Walnut Ln | Burlington | CT | 06013 |

| Principal Occupation | Name of Employer |
|---|---|
| SVP, Head of Analytic Asset Integration | Chubb |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Dangelo | Karen | | 2694 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1021 Roosevelt Dr . | Derby | CT | 06418 |

| Principal Occupation | Name of Employer |
|---|---|
| faculty | Southern Connecticut State University |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $15.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $15.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Bruce | Lori | | 2695 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 34 Deepwood Dr | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Research scientist | Yale University |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Gallant | Eric | | 2696 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 237 Alps Rd | Branford | CT | 06405 |

| Principal Occupation | Name of Employer |
|---|---|
| Owner | Gofor Services, Inc. |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Caffrey | Karen | | 2697 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 30 Jenny Cliff Rd | Manchester | CT | 06040 |

| Principal Occupation | Name of Employer |
|---|---|
| Psychotherapist | Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $530.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Lhamon | Judy | | 2698 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 24 King St | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $200.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Chirmanova | Irene | | 2699 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 73 Allen Avenue Ext | Falmouth | ME | 04105 |

| Principal Occupation | Name of Employer |
|---|---|
| Unemployed | Unemployed |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $340.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Berube | Marc | | 2700 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 531 Highland St | Wethersfield | CT | 06109 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $115.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| fortuna | thomas | | 2701 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 205 Gilbert Ave | Hamden | CT | 06514 |

| Principal Occupation | Name of Employer |
|---|---|
| accountant | the tax guy llc |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $50.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Crisci | Anthony | | 2702 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 21 Knollwood Rd | Norwalk | CT | 06854 |

| Principal Occupation | Name of Employer |
|---|---|
| Healthcare Administrator | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cooney | Suzanne | | 2703 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 35 Filbert St | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $502.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Burrill | Christine | | 2704 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 7 Murzen Ln | Plainville | CT | 06062 |

| Principal Occupation | Name of Employer |
|---|---|
| Environmental Analyst | State of CT Department of Public Health |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hamilton | Pennell | | 2705 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 28 Park Ln | Woodbridge | CT | 06525 |

| Principal Occupation | Name of Employer |
|---|---|
| Registrar of Voters | Town of Woodbridge |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $150.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| VanDuzee | Kathleen | | 2706 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 198 Whisconier Rd . | Brookfield | CT | 06804 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $175.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cadoff | Evan | | 2707 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 438 Evergreen Rd | Torrington | CT | 06790 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $175.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Tomasiello | Joan | | 2708 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 22 Senator Dr | Cromwell | CT | 06416 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | NA |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Rosenblum | Betsy | | 2709 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 4275 Whitney Ave | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| Faculty | SCSU |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $5.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Schweitzer | Chris | | 2710 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 361 Elm St | New Haven | CT | 06511 |

| Principal Occupation | Name of Employer |
|---|---|
| Director | New Haven Leon SCP |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $102.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Goodrich~~ | ~~Robert~~ | | ~~2711~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~15 Derenthal Dr~~ | ~~Madison~~ | ~~CT~~ | ~~06443~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Self: Non-Profit Management and Strategic Planning~~ | ~~Self: RACCE Inc~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$250.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/30/2026~~

Aggregate Contributions: ~~$1,250.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Muller | Bonnie | | 2712 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 25 Tuttle Ave | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| social worker private practice (self-employed) | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Natali | Blanche | | 2713 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 53 Westwood Rd | Fairfield | CT | 06825 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $60.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Mower | Gabriel | | 2714 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 16 Route 164 | Preston | CT | 06365 |

| Principal Occupation | Name of Employer |
|---|---|
| Associate Biomanufacturer | Amgen |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $40.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $340.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Allik | Hazel | | 2715 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 45 Stillman Ave | Pawcatuck | CT | 06379 |

| Principal Occupation | Name of Employer |
|---|---|
| Student | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Powers | Blake | | 2716 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 103 Housatonic Ave | Stratford | CT | 06615 |

| Principal Occupation | Name of Employer |
|---|---|
| Graphic Designer | Glanbia |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Manus | Tina | | 2717 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 315 Fox Hill Rd | Stratford | CT | 06614 |

| Principal Occupation | Name of Employer |
|---|---|
| Researcher | Redwood Data LLC |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $5.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Badger | Daniel | | 2718 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 33 Whitman Avenye | West Hartford | CT | 06092 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| O'Brien | Tom | | 2719 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 134 Wellsville Ave | New Milford | CT | 06776 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Lee-Chin | Matthew | | 2720 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 175 Godfrey Rd E | Weston | CT | 06883 |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | Equality Charter School |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $30.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Richardson | Cheryl | | 2721 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 36 Vina Ln | Brooklyn | CT | 06234 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Baird~~ | ~~Laura~~ | | ~~2722~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~50 Sawmill Xing~~ | ~~Wethersfield~~ | ~~CT~~ | ~~06109~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Clinical Psychologist~~ | ~~Laura L Baird, LLC~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/30/2026~~

Aggregate Contributions: ~~$200.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~giordano~~ | ~~v~~ | | ~~2723~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~28 Fairview Ave~~ | ~~Ridgefield~~ | ~~CT~~ | ~~06877~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/30/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Bentley~~ | ~~Kimberly~~ | | ~~2724~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~185 Cedar Heights Rd~~ | ~~Stamford~~ | ~~CT~~ | ~~06905~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Library Assistant / Bookmobile Driver~~ | ~~Ferguson Library (Stamford)~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/30/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Fusaro | Justin | | 2725 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 40 Cobbs Mill Rd | Wilton | CT | 06897 |

| Principal Occupation | Name of Employer |
|---|---|
| Business Consultant | B2B CFO |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| MISRA | MANOJ | | 2726 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 2 Pleasant Rise Cir | Brookfield | CT | 06804 |

| Principal Occupation | Name of Employer |
|---|---|
| Professor | Western CT State Uni |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/30/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Watson** | **Christine** | | **2673** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **636 Back Rd** | **North Windham** | **CT** | **06256** |

| Principal Occupation | Name of Employer |
|---|---|
| **retired** | **retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/30/2026**

Aggregate Contributions: **$100.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Balsley** | **Elaine** | | **2552** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **63 Tracy Ave** | **Waterbury** | **CT** | **06706** |

| Principal Occupation | Name of Employer |
|---|---|
| **occupational therapist** | **Reachout Inc.** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/31/2026**

Aggregate Contributions: **$300.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Avenia** | **Jennifer** | | **2568** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **34 Dyer Ave** | **Canton** | **CT** | **06019** |

| Principal Occupation | Name of Employer |
|---|---|
| **Director of Immigration Practice** | **Department of Children and Families, State of CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/31/2026**

Aggregate Contributions: **$15.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Coffey | David | | 2586 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 25 Springside Ave | New Haven | CT | 06515 |

| Principal Occupation | Name of Employer |
|---|---|
| Instructor | Guitar Center |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $30.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $141.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Elliott | William | | 2468 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 116 Battis Rd | Hamden | CT | 06514 |

| Principal Occupation | Name of Employer |
|---|---|
| Flight attendant | Delta Air Lines |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $35.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hine | Jason | | 2579 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 23 Denison Ave | Mystic | CT | 06355 |

| Principal Occupation | Name of Employer |
|---|---|
| Store owner/manager | Jason Hine |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hernandez | Cristina | | 2515 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1025 Main St | Stratford | CT | 06615 |

| Principal Occupation | Name of Employer |
|---|---|
| HR Manager | Pump Technology Inc. |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $200.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Jones** | **Deborah** | | **2541** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **26 N Main St Trlr 5** | **Branford** | **CT** | **06405** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/31/2026**

Aggregate Contributions: **$75.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Luddy** | **Maggie** | | **2553** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **418 E Grand Ave** | **Des Moines** | **IA** | **50309** |

| Principal Occupation | Name of Employer |
|---|---|
| **Consultant** | **JT4IA** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/31/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Pilaar** | **Jeremy** | | **2404** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **144 Hepburn Rd** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Associate research scholar** | **Yale Law School** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$100.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/31/2026**

Aggregate Contributions: **$350.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **ROBINSON** | **JOHN** | | **2564** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **79 Elm St** | **Guilford** | **CT** | **06437** |

| Principal Occupation | Name of Employer |
|---|---|
| **software developer** | **Travelers** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$20.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/31/2026**

Aggregate Contributions: **$20.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Ritter** | **Carol** | | **2405** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **175 Pepper St** | **Monroe** | **CT** | **06468** |

| Principal Occupation | Name of Employer |
|---|---|
| **retired** | **retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/31/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Vaughan** | **Lois** | **A** | **2476** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **609 Trails End Rd** | **Manchester** | **CT** | **06042** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/31/2026**

Aggregate Contributions: **$30.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Bandhauer** | **Carina** | | **2429** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **1500 Georges Hill Rd** | **Southbury** | **CT** | **06488** |

| Principal Occupation | Name of Employer |
|---|---|
| **Professor** | **WCSU** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/31/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Giordano** | **Vincent** | | **2608** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **28 Fairview Ave** | **Ridgefield** | **CT** | **06877** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retired** | **Retired** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/31/2026**

Aggregate Contributions: **$100.00**

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Gigantino** | **Thomas** | | **2408** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **119 Stonewall Dr** | **Hamden** | **CT** | **06518** |

| Principal Occupation | Name of Employer |
|---|---|
| **Assistant Golf Professional** | **The VUE** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/31/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Fontaine** | **Debra** | | **2398** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **36 Maplewood Rd** | **Storrs** | **CT** | **06268** |

| Principal Occupation | Name of Employer |
|---|---|
| **Pastor** | **Second Church of Coventry, CT** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/31/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Ferrero** | **Ivan** | | **2528** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **15 Orpington St** | **Hamden** | **CT** | **06517** |

| Principal Occupation | Name of Employer |
|---|---|
| **Sales** | **Klett World Languages** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$5.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/31/2026**

Aggregate Contributions: **$5.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Obuchon** | **Colin** | | **2436** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **22 Sandhurst Dr** | **West Hartford** | **CT** | **06107** |

| Principal Occupation | Name of Employer |
|---|---|
| **Student** | **Student** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$10.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/31/2026**

Aggregate Contributions: **$10.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Rusted** | **Michelle** | | **2539** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **211 Long Hill Dr** | **Glastonbury** | **CT** | **06033** |

| Principal Occupation | Name of Employer |
|---|---|
| **PA** | **Hhc** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/31/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Amore** | **Scott** | | **2438** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **13 Jenna Rd** | **Wallingford** | **CT** | **06492** |

| Principal Occupation | Name of Employer |
|---|---|
| **Media Production** | **Scott N. Amore** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/31/2026**

Aggregate Contributions: **$30.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Malinoski | Philip | | 2406 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 129 Echo Rd | Coventry | CT | 06238 |

| Principal Occupation | Name of Employer |
|---|---|
| Consultant | Higher Ed Strategies, LLC |

Is contributor a principal of a state contractor or prospective state contractor? ☒ Yes ☐ No

If yes, indicate which branch or branches of government the contract is with: ☒ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Griggs | Kelly | | 2407 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 111 Riverview Pl | Stratford | CT | 06615 |

| Principal Occupation | Name of Employer |
|---|---|
| Marketing manager | PRO |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $50.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Gigantino~~ | ~~Thomas~~ | | ~~2408~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~119 Stonewall Dr~~ | ~~Hamden~~ | ~~CT~~ | ~~06518~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Assistant Golf Professional~~ | ~~The VUE~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/31/2026~~ | ~~$100.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Burton | Nancy | | 2409 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 57 Fremont St | Meriden | CT | 06451 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/31/2026 | $50.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Khan-Bureau | Diba | | 2410 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 40 Hill Top Trl | Salem | CT | 06420 |

| Principal Occupation | Name of Employer |
|---|---|
| Professor | CT State Community College Three Rivers campus |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/31/2026 | $200.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Abernathy | Laurie | | 2411 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1 Reed St | Vernon | CT | 06066 |

| Principal Occupation | Name of Employer |
|---|---|
| Full-time | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/31/2026 | $5.00 |

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Lin | Leo | | 2412 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1630 Ralene Ct | San Jose | CA | 95131 |

| Principal Occupation | Name of Employer |
|---|---|
| Network engineer | Chunghwa Telecom Global |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Caskey~~ | ~~Joshua~~ | | ~~2413~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1 Grooms Way~~ | ~~East Lyme~~ | ~~CT~~ | ~~06333~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Student~~ | ~~Student~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/31/2026~~

Aggregate Contributions: ~~$20.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Blossom | Jackson | | 2414 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 5 Joes Hill Rd | Danbury | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Felthous | Elizabeth | | 2415 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 23 Gregory Blvd | Norwalk | CT | 06855 |

| Principal Occupation | Name of Employer |
|---|---|
| Therapist | Betterhelp |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $75.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Malaguti | Jen | | 2416 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 99 Turkey Hill Rd | Chester | CT | 06412 |

| Principal Occupation | Name of Employer |
|---|---|
| Outdoor Elementary School Teacher | Incarnation Center, Inc |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Taylor | Karen | | 2417 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 35 Whitney St | Hartford | CT | 06105 |

| Principal Occupation | Name of Employer |
|---|---|
| Psychotherapist | Future Path Collaborative, PLLC |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $97.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Harris | Loughlin | | 2418 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 76 Deepwood Rd | Darien | CT | 06820 |

| Principal Occupation | Name of Employer |
|---|---|
| Unemployed | Unemployed |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $10.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Davey | J | | 2419 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1324 Asylum Ave | Hartford | CT | 06105 |

| Principal Occupation | Name of Employer |
|---|---|
| Gainfully Employed | Why do you need to know where I work? It‚Äôs $25. |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Coassin | Michael | | 2420 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 33 Westerly Dr | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| President | Atlantic Masonry Products Inc. |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Fennell | Darrell | | 2421 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1150 S Main St | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Coff | Ilana | | 2422 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 294 Brewster | Bridgeport | CT | 06605 |

| Principal Occupation | Name of Employer |
|---|---|
| Attorney | Center for Children,Äôs Advocacy |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Erickson | Paul H B | | 2423 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 20 Summit Pl | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Professor | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Chalmers | Maureen | | 2424 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 24 Shelton Rd | Oxford | CT | 06478 |

| Principal Occupation | Name of Employer |
|---|---|
| College communication and instructional specialist | State of CT, CT State Community College |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Fusco | Lori | | 2425 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 562 New Haven Rd | Durham | CT | 06422 |

| Principal Occupation | Name of Employer |
|---|---|
| Attorney | The Law Office of Lori Lastrina-Fusco LLC |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Gerjuoy | Berri | | 2426 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 106 Dover Rd | West Hartford | CT | 06119 |

| Principal Occupation | Name of Employer |
|---|---|
| Attorney | UConn Health |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Polgar | Robi | | 2427 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 511 Griswold St | Glastonbury | CT | 06033 |

| Principal Occupation | Name of Employer |
|---|---|
| Writer/Copy Editor | Self-employed: rpEdit LLC |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Johnson | Lara | | 2428 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 22 Kidder Brook Rd | Ashford | CT | 06278 |

| Principal Occupation | Name of Employer |
|---|---|
| Marketer | Beacon Bank |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $35.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Bandhauer~~ | ~~Carina~~ | | ~~2429~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1500 Georges Hill Rd~~ | ~~Southbury~~ | ~~CT~~ | ~~06488~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Professor~~ | ~~WCSU~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/31/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hines | Sharon | | 2430 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 301 B Old Whitfield St | Guilford | CT | 06437 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Prasad | Sheela | | 2431 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 70 W Shepard Ave | Hamden | CT | 06514 |

| Principal Occupation | Name of Employer |
|---|---|
| Educator | Teach for America |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $55.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Levesque | Rob | | 2432 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 63 Madison St | East Hartford | CT | 06118 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Parker | Holly | | 2433 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1829 Asylum Ave | West Hartford | CT | 06117 |

| Principal Occupation | Name of Employer |
|---|---|
| Transportation Planner | Texas A& M Transportation Institute |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Wallace Smith | Cheryl | | 2434 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 32 Robinhood Rd | Danbury | CT | 06811 |

| Principal Occupation | Name of Employer |
|---|---|
| Banker | Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Kent | Philip | | 2435 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 160 Carmalt Rd | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Attorney | Brenner, Saltzman & Wallman LLP |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Obuchon~~ | ~~Colin~~ | | ~~2436~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~22 Sandhurst Dr~~ | ~~West Hartford~~ | ~~CT~~ | ~~06107~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Student~~ | ~~Student~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/31/2026~~

Aggregate Contributions: ~~$20.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Reiter | Anna | | 2437 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 264 Mile Creek Rd | Old Lyme | CT | 06371 |

| Principal Occupation | Name of Employer |
|---|---|
| Homemaker | Honemaker |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Amore~~ | ~~Scott~~ | | ~~2438~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~13 Jenna Rd~~ | ~~Wallingford~~ | ~~CT~~ | ~~06492~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Media Production~~ | ~~Self~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/31/2026~~

Aggregate Contributions: ~~$60.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Korenblit | Michael | | 2439 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 2808 W Lexington Way | Edmond | OK | 73012 |

| Principal Occupation | Name of Employer |
|---|---|
| Educator | Educator |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $10.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| James | David | | 2440 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1863 Chamberlain Hwy | Berlin | CT | 06037 |

| Principal Occupation | Name of Employer |
|---|---|
| toolmaker | jovek mfg |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $10.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hayden | Zachary | | 2441 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 341 Cold Spring Dr | Westbrook | CT | 06498 |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | Oxford Academy |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $15.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $40.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hoben | Aimee | | 2442 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 296 E Hill Rd | Canton | CT | 06019 |

| Principal Occupation | Name of Employer |
|---|---|
| Attorney | The Hartford |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Siddall | Carol | | 2443 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 237 Flag Swamp Rd | Southbury | CT | 06488 |

| Principal Occupation | Name of Employer |
|---|---|
| Systems Analyst | Connecticut Community Care |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $150.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Potter | Justin | | 2444 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 121 Kent Cornwall Rd | Kent | CT | 06757 |

| Principal Occupation | Name of Employer |
|---|---|
| Manager | Nettleton Hollow |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Last4b258982 | Firstcc00319f | | 2445 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 100 Gillies Rd . | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| E Welch | Margaret | | 2446 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 9 Farmstead Ln | Waterford | CT | 06385 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $20.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Perkins | Annie | | 2447 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 920 Storrs Rd | Storrs | CT | 06268 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $75.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Schultz | Diana | | 2448 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 86 Buff Cap Rd | Tolland | CT | 06084 |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | CT Technical High Schools |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McEvoy | Emily | | 2449 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 254 Carriage Crossing Ln | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Organizer | 4Cs SEIU Local 1973 |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $30.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Martin | Karen | | 2450 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 15 Oak Grove Rd | East Haven | CT | 06512 |

| Principal Occupation | Name of Employer |
|---|---|
| Radiologic Technologist | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Dunn | Greg | | 2451 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 25 Bonnie View Dr | Trumbull | CT | 06611 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $20.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Wilds | Tracey | | 2452 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 54 Cherry Ln | Madison | CT | 06443 |

| Principal Occupation | Name of Employer |
|---|---|
| Nurse | Yale New Haven Health |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hansen | Michael | | 2453 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 44 Grandview Ave | Old Lyme | CT | 06371 |

| Principal Occupation | Name of Employer |
|---|---|
| Communications Supervisor | Amtrak |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $125.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Levin | Edward | | 2454 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 286 N Main St | Stonington | CT | 06378 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $10.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Testani | Amy | | 2455 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 18 Sun Pond Ln | New Milford | CT | 06776 |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | Regional School District 12 |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $5.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Jensen | Kristen | | 2456 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 93 Catherine St | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Banker | Ellafi Federal Credit Union Union |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McFarland | Reed | | 2457 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 12 Acorn Dr | Niantic | CT | 06357 |

| Principal Occupation | Name of Employer |
|---|---|
| Special education teacher | Middletown public schools |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $70.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Baekey | Kara | | 2458 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 69 Melbourne Road Ext | Norwalk | CT | 06851 |

| Principal Occupation | Name of Employer |
|---|---|
| Executive | Indegene |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $52.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $52.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Cordeira~~ | ~~Laura~~ | | ~~2459~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~12 Highview Ter~~ | ~~Bethel~~ | ~~CT~~ | ~~06801~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Director of Community Health~~ | ~~N/a~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/31/2026~~

Aggregate Contributions: ~~$100.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Lasta3495351 | Firstb054702c | | 2460 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 113 Latham Dr . | Griswold | CT | 06351 |

| Principal Occupation | Name of Employer |
|---|---|
| Student Affairs Coordinator | Plainfield BOE |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/31/2026 | $20.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Wrobel | Loretta | | 2461 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 297 Pumpkin Hill Rd | Ashford | CT | 06278 |

| Principal Occupation | Name of Employer |
|---|---|
| self employed private practice | psychotherapist |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/31/2026 | $50.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Eisenberg | Justin | | 2462 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 36 French Rd | Manchester | CT | 06042 |

| Principal Occupation | Name of Employer |
|---|---|
| Engineer | RTX |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/31/2026 | $5.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Zammiello~~ | ~~Jay~~ | | ~~2463~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~24 Honeysuckle Ln~~ | ~~Milford~~ | ~~CT~~ | ~~06461~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~DFO~~ | ~~GHS~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/31/2026~~ | ~~$100.00~~ |

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Kaas | Carolyn | | 2464 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 39 Chestnut St | West Haven | CT | 06516 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired lawyer and law professor | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McNicol | Katy | | 2465 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 28 Norwood Ave | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| Library director | James Blackstone memorial library |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Rhine | Martha | | 2466 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 60 Lemay St | West Hartford | CT | 06107 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Karp | Gerald | | 2467 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 105 Deerfield Dr | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| Mechanical Engineer | Thinklogical |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $75.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Elliott~~ | ~~Billy~~ | | ~~2468~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~116 Battis Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06514~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Flight attendant~~ | ~~Delta Air Lines~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$10.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/31/2026~~ | ~~$65.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Talbert-Slagle | Kristina | | 2469 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 36 Carriage Dr | Durham | CT | 06422 |

| Principal Occupation | Name of Employer |
|---|---|
| Academic | Yale University |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/31/2026 | $100.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Schramm | Michael | | 2470 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 28 Cricket Knl | Wethersfield | CT | 06109 |

| Principal Occupation | Name of Employer |
|---|---|
| Fundraiser | Wesleyan University |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/31/2026 | $55.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Canzano | Gail | | 2471 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 19 Vanderbilt Rd | West Hartford | CT | 06119 |

| Principal Occupation | Name of Employer |
|---|---|
| Psychologist | Gail Southard Canzaano, PhD |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/31/2026 | $20.00 |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Soto | Cynthia | | 2472 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 4 Charter Rd | Ellington | CT | 06029 |

| Principal Occupation | Name of Employer |
|---|---|
| Home daycare | Jacks Playhouse |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $225.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Nemiah | Karen | | 2473 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 634 Main St | South Glastonbury | CT | 06073 |

| Principal Occupation | Name of Employer |
|---|---|
| Unemployed | Unemployed |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Despard~~ | ~~Matthew~~ | | ~~2474~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~3 Gordon Ln~~ | ~~Enfield~~ | ~~CT~~ | ~~06082~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Mental health counselor~~ | ~~Self employed~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/31/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Kenney | Ellen | | 2475 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 9 W Simsbury Rd | Canton | CT | 06019 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | None |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Vaughan~~ | ~~Anne~~ | | ~~2476~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~609 Trails End Rd~~ | ~~Manchester~~ | ~~CT~~ | ~~06042~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/31/2026~~

Aggregate Contributions: ~~$60.00~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Prizio | Adam | | 2477 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 46 Holly Ln | Wethersfield | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Attorney | State Of Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $75.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hughes | Anne | | 2478 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 67 North St . | Easton | CT | 06612 |

| Principal Occupation | Name of Employer |
|---|---|
| Legislator | State of CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $100.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Buckingham | Mallory | | 2479 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 435 Butternut St | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Speech Pathologist | State of CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $225.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Elia | Cathy | | 2480 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 164 Dorrance St | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $125.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Arnold | Platt | | 2481 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 160 Upper Pattagansett Rd | East Lyme | CT | 06333 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hansen | Kelly | | 2482 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 574 Central Ave | New Haven | CT | 06515 |

| Principal Occupation | Name of Employer |
|---|---|
| Communications Manager | Albertus Magnus College |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Travers | Natalie | | 2483 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 5 Uplands Dr | Canton | CT | 06019 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $20.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Detmers~~ | ~~Mollie~~ | | ~~2484~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~25 Lynwood Pl Apt 4~~ | ~~New Haven~~ | ~~CT~~ | ~~06511~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Student~~ | ~~Student~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$150.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/31/2026~~ | ~~$400.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Matus | Laurel | | 2485 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1 N Main St | East Granby | CT | 06026 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | No |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/31/2026 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Lambert | Melanie | | 2486 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 7 Red Stone Dr | Weatogue | CT | 06089 |

| Principal Occupation | Name of Employer |
|---|---|
| Advocate | Center for Medicare Advocacy |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/31/2026 | $5.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McElroy | Cathy | | 2487 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1089 Church Hill Rd | Fairfield | CT | 06825 |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | Stamford Public Schools |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/31/2026 | $25.00 |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Croteau | Daniel Steven | | 2488 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 365 Mather St | Hamden | CT | 06514 |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | New Haven Public Schools |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Shea | Lorel | | 2489 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 633 Liberty Hwy | Putnam | CT | 06260 |

| Principal Occupation | Name of Employer |
|---|---|
| Manager | Alpha NetSolutions |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Williams | Audrey | | 2490 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 70 Richard Dr | Hamden | CT | 06514 |

| Principal Occupation | Name of Employer |
|---|---|
| Entertainment/Events | Yale University |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Martin | Melanie | | 2491 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 10 Glen Ridge Ct | New Milford | CT | 06776 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $175.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Gifford | Holly | | 2492 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 230 Clintonville Ln | North Haven | CT | 06473 |

| Principal Occupation | Name of Employer |
|---|---|
| Registered nurse | Bridgeport hospital |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Davis | Richard | | 2493 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 926 Ridge Rd | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Banigan | Gail | | 2494 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 38 E Maple St | New Canaan | CT | 06840 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Garry | Sarah | | 2495 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1105 Windsor Station Dr | Windsor | CT | 06095 |

| Principal Occupation | Name of Employer |
|---|---|
| Unemployed | Unemployed |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $5.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Schramm | Kate | | 2496 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 40 Orchard St | Rocky Hill | CT | 06067 |

| Principal Occupation | Name of Employer |
|---|---|
| Folklorist | Connecticut Museum of Culture and History |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Smith | Scott | | 2497 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 388 Fowler Ave | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Optical technician | Zygo corp |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hartman | Keith | | 2498 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| PO Box 48 | Canton Center | CT | 06020 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $20.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Ruth | Lauren | | 2499 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 484 Horton Hill Rd | Naugatuck | CT | 06770 |

| Principal Occupation | Name of Employer |
|---|---|
| Trauma therapist | Center for Neuropotential |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $75.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Kochol | Peter | | 2500 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 97 Harrison St | New Britain | CT | 06052 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Percival | Ann | | 2501 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 22 1/2 Silver St | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McClanahan | Rebecca | | 2502 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 42 Robin Ct | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Smith | George | | 2503 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 8 Maplevale Rd | East Haven | CT | 06512 |

| Principal Occupation | Name of Employer |
|---|---|
| Management | AG Cleaning Agents |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $325.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Evans | Barbara | | 2504 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 151 Pine Lake Dr | Coventry | CT | 06238 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $340.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $340.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McCarthy | John | | 2505 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 127 Greyrock Pl . | Stamford | CT | 06901 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Rodriguez | Felix | | 2506 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 30 Elliott St | New Haven | CT | 06519 |

| Principal Occupation | Name of Employer |
|---|---|
| Field Organizer | The Connecticut Project |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Kirk | Erin | | 2507 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 747 Old Stamford Rd . | New Canaan | CT | 06840 |

| Principal Occupation | Name of Employer |
|---|---|
| Ombudsman | State of Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~White~~ | ~~Marissa~~ | | ~~2508~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~19 Susan Ln~~ | ~~Southington~~ | ~~CT~~ | ~~06489~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Mental health consultant~~ | ~~Marissa Manzi, LCSW,LLC~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/31/2026~~ | ~~$525.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Shanahan | Timothy | | 2509 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 12 Dubois Rd | Uncasville | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Security Officer | Securitas Security USA |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/31/2026 | $10.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Belcher | Samuel | | 2510 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 208 Saddle Hill Rd | Manchester | CT | 06040 |

| Principal Occupation | Name of Employer |
|---|---|
| Store Associate | At Home |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/31/2026 | $15.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Bartlett | Shana | | 2511 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 560 Main St | Willimantic | CT | 06226 |

| Principal Occupation | Name of Employer |
|---|---|
| Program Coordinator | University of Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/31/2026 | $50.00 |

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Thompson | Kimberly | | 2512 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 2 Littlefield Ln | Old Lyme | CT | 06371 |

| Principal Occupation | Name of Employer |
|---|---|
| Clinical research | Early Access Care |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| King | Audra | | 2513 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 498 Prospect Ave | Hartford | CT | 06105 |

| Principal Occupation | Name of Employer |
|---|---|
| Professor | Central Connecticut State University |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Healy | Patrick | | 2514 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 20 Clapp Rd | Windsor | CT | 06095 |

| Principal Occupation | Name of Employer |
|---|---|
| Video editor | Frontline productions |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Hernandez~~ | ~~Cristina~~ | | ~~2515~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~1025 Main St~~ | ~~Stratford~~ | ~~CT~~ | ~~06615~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Hr~~ | ~~Homa~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/31/2026~~

Aggregate Contributions: ~~$400.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cappadona | John | | 2516 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 36 Cold Spring Dr | Bloomfield | CT | 06002 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Diorio | Charles | | 2517 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 120 Vaune Ln | Pottstown | PA | 19465 |

| Principal Occupation | Name of Employer |
|---|---|
| Program Manager | Bentley Systems |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Grey | Alexander | | 2518 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 414 Warrenville Rd | Mansfield Center | CT | 06250 |

| Principal Occupation | Name of Employer |
|---|---|
| Program Manager | Serco-NA |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Demers | Kathleen | | 2519 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 48 Mason Rd | Willington | CT | 06279 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $100.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Viani | Terri | | 2520 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 105 Brooklyn Rd | Pomfret Center | CT | 06259 |

| Principal Occupation | Name of Employer |
|---|---|
| Self-employed, writer | Self Employed. The Writer, ink |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Craig | George | | 2521 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 120 Hoerle Blvd | Torrington | CT | 06790 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Warinsky | Karen | | 2522 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 25 Tattoon Rd | Woodstock | CT | 06281 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $200.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hilton | Taqeem | | 2523 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 26-3 Guiel Pl | Meriden | CT | 06450 |

| Principal Occupation | Name of Employer |
|---|---|
| Courier delivery driver | Self-Employed 1099 Gig Worker (Lyft/DoorDash) |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Seritella | Freda | | 2524 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 88 Ashley St | Hartford | CT | 06105 |

| Principal Occupation | Name of Employer |
|---|---|
| Employed | CGA |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $30.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Seitz | Vicki | | 2525 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 194 Haverford St | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $475.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Maltby | Sarah | | 2526 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 242 Salmon Kill Rd | Lakeville | CT | 06039 |

| Principal Occupation | Name of Employer |
|---|---|
| Homemaker | Homemaker |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $100.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Davidson | Dorota | | 2527 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 60 Bmw Dr | Jewett City | CT | 06351 |

| Principal Occupation | Name of Employer |
|---|---|
| Accountant | PMG |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $40.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Ferrero~~ | ~~Ivan~~ | | ~~2528~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~15 Orpington St~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Sales~~ | ~~Klett World Languages~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/31/2026~~

Aggregate Contributions: ~~$10.00~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Tegtmeier | Amy | | 2529 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 12 Barrington Way | Glastonbury | CT | 06033 |

| Principal Occupation | Name of Employer |
|---|---|
| Retire | None |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Zolvik | Kim | | 2530 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 21 Forest St | Branford | CT | 06405 |

| Principal Occupation | Name of Employer |
|---|---|
| graphic designer | Yale University |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $100.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Farnsworth | Molly | | 2531 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 82 Chichester Rd | New Canaan | CT | 06840 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $340.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $340.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Steel | Catherine | | 2532 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 23 Rose Ln | East Lyme | CT | 06333 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Ausiello | Barbara | | 2533 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 11 Fall Brk | Avon | CT | 06001 |

| Principal Occupation | Name of Employer |
|---|---|
| Realtor | Coldwell Banker Realty |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $340.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $340.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Yingling | Daniel | | 2534 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 222 Williams St E | Glastonbury | CT | 06033 |

| Principal Occupation | Name of Employer |
|---|---|
| Software engineer | Daida |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $525.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Jenkins | Avery | | 2535 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 44 Torrington Rd | Litchfield | CT | 06759 |

| Principal Occupation | Name of Employer |
|---|---|
| chiropractic physician | Center for Alternative Medicine, LLC |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Markham | Eli | | 2536 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 73 Allen Avenue Ext | Falmouth | ME | 04105 |

| Principal Occupation | Name of Employer |
|---|---|
| Attorney | Kirkland & Ellis LLP |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $340.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McManus | Michael | | 2537 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 5 Broadview Rd | Brookfield | CT | 06804 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $165.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $540.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Haldeman | Margaret | | 2538 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 17 Banks Rd | Simsbury | CT | 06070 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Rusted~~ | ~~Michelle~~ | | ~~2539~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~211 Long Hill Dr~~ | ~~Glastonbury~~ | ~~CT~~ | ~~06033~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~PA~~ | ~~Hhc~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/31/2026~~

Aggregate Contributions: ~~$50.00~~

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Horowitz | Kimberly | | 2540 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 7 Brockett Rd | Wallingford | CT | 06492 |

| Principal Occupation | Name of Employer |
|---|---|
| Unemployed | Unemployed |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/31/2026 | $75.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Jones~~ | ~~Deborah~~ | | ~~2541~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~26 N Main St Trlr 5~~ | ~~Branford~~ | ~~CT~~ | ~~06405~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~no~~ | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$75.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/31/2026~~ | ~~$150.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Petersen Hatcher | Karen | | 2542 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 7 Pheasant Run | Windsor | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/31/2026 | $100.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Gerics | Susan | | 2543 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 466 Riverdale Dr | Stratford | CT | 06615 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/31/2026 | $25.00 |

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Schroth | Jon | | 2544 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 21 W Silver St | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Artist | Self |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Herbert | William | | 2545 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 850 Atlantic St . | Bridgeport | CT | 06604 |

| Principal Occupation | Name of Employer |
|---|---|
| Self Employed Warehouse owner | WHH Leasing Corp. |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Downing | Jacqueline | | 2546 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 41 Hideaway Ln | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| Nonprofit Administration | Community Foundation for Greater New Haven |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Ugurlu | Yasemin | | 2547 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 15 Boulder Rd | Colchester | CT | 06415 |

| Principal Occupation | Name of Employer |
|---|---|
| Shop Owner | Reboot Eco |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $175.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Delane | Debra | | 2548 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 218 Sunnyfield Dr | Windsor | CT | 06095 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Gianquinto | Christine | | 2549 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 2 Binney Rd | Old Lyme | CT | 06371 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $55.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Dutcher | Susan | | 2550 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 43 Bartlett Holw | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $15.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $15.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Turner | Peggy | | 2551 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 314 Glen Hills Rd | Meriden | CT | 06451 |

| Principal Occupation | Name of Employer |
|---|---|
| Accountant | John Canning & Co Ltd |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Balsley~~ | ~~Elaine~~ | | ~~2552~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~63 Tracy Ave~~ | ~~Waterbury~~ | ~~CT~~ | ~~06706~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Director Reachout~~ | ~~Reachout Inc.~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$50.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/31/2026~~

Aggregate Contributions: ~~$475.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Luddy~~ | ~~Maggie~~ | | ~~2553~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~418 E Grand Ave~~ | ~~Des Moines~~ | ~~IA~~ | ~~50309~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Consultant~~ | ~~JT4IA~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/31/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Grasso | Lawrence | | 2554 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 79 Amidon Rd | Ashford | CT | 06278 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Munno | Steven | | 2555 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 41 Ford Rd | Woodbridge | CT | 06525 |

| Principal Occupation | Name of Employer |
|---|---|
| Farmer/Educator | Massaro Community Farm |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $50.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ferber | Donna | | 2556 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 114 Farmington Chase Cres | Farmington | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hathaway | Kim | | 2557 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 37 Trailsend | Canton | CT | 06019 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Bue-Hepner | Catherine | | 2558 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 36 Van Buren Ave | West Hartford | CT | 06107 |

| Principal Occupation | Name of Employer |
|---|---|
| Professor | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $10.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Sammut | Dylan | | 2559 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 32 Hope St | Bridgeport | CT | 06605 |

| Principal Occupation | Name of Employer |
|---|---|
| Editor | Irving Levin Associates |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $15.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $15.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Winkler | Michelle | | 2560 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 47 Indian Hill Rd | Canton | CT | 06019 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Smith | Leo | | 2561 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 64 Boysenberry Ct | Suffield | CT | 06078 |

| Principal Occupation | Name of Employer |
|---|---|
| DarkSky | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Formica | Marcia | | 2562 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 57 High Ridge Rd | Glastonbury | CT | 06073 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | N/A |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $175.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Durso | Daniel | | 2563 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1490 Forbes St | East Hartford | CT | 06118 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $55.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~ROBINSON~~ | ~~JOHN~~ | | ~~2564~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~79 Elm St~~ | ~~Guilford~~ | ~~CT~~ | ~~06437~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~software developer~~ | ~~Travelers~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$20.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/31/2026~~

Aggregate Contributions: ~~$40.00~~

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Pynn | Regina | | 2565 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 25 Walker Dr | Simsbury | CT | 06070 |

| Principal Occupation | Name of Employer |
|---|---|
| General Manager | Lightera |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $155.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Atchley | Chris | | 2566 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 31 Colony St | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| Client Technologies Administrator II | Yale University |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $275.00

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Fowler | Rebecca | | 2567 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 162 Homestead St | Manchester | CT | 06042 |

| Principal Occupation | Name of Employer |
|---|---|
| Recycling Coordinator | Town of Manchester |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Avenia~~ | ~~Jennifer~~ | | ~~2568~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~34 Dyer Ave~~ | ~~Collinsville~~ | ~~CT~~ | ~~06019~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Lawyer~~ | ~~State of CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/31/2026~~ | ~~$20.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hourihan | Jeremiah | | 2569 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 535 Hunting Ridge Rd | Stamford | CT | 06903 |

| Principal Occupation | Name of Employer |
|---|---|
| Manager | PURE Insurance |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/31/2026 | $150.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Meyerson | Catherine | | 2570 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 13 Charlton Hill Rd | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/31/2026 | $50.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| MOORE | Brent | | 2571 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 12 Waite St | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Research Scientist | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/31/2026 | $100.00 |

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| York | Jason | | 2572 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 150 Dowd St | Newington | CT | 06111 |

| Principal Occupation | Name of Employer |
|---|---|
| Communications Manager | State of Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $200.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Lorange | Patricia | | 2573 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 3 Shepard Hill Rd | Hamden | CT | |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $20.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Faulkner | Sarah | | 2574 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 25 Dyer Ave | Canton | CT | 06019 |

| Principal Occupation | Name of Employer |
|---|---|
| teacher | Town of East Granby Board of Education |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| King | Neile | | 2575 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 7 The Green | Collinsville | CT | 06019 |

| Principal Occupation | Name of Employer |
|---|---|
| Homemaker | Homemaker |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $150.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Rokicki | Connie | | 2576 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 287 Martin Rd | Hebron | CT | 06248 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| joerg | zach | | 2577 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 31 Hubbard Run Dr | Glastonbury | CT | 06033 |

| Principal Occupation | Name of Employer |
|---|---|
| Internal audit | CVS Health |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Snover | Gerard | | 2578 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 95 Church Rd | Easton | CT | 06612 |

| Principal Occupation | Name of Employer |
|---|---|
| Trusts & Estates | Fifth Third Bank |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Hine~~ | ~~Jason~~ | | ~~2579~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~23 Denison Ave~~ | ~~Mystic~~ | ~~CT~~ | ~~06355~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Self-employed~~ | ~~The Ditty Bag~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$5.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/31/2026~~

Aggregate Contributions: ~~$10.00~~

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Yigit | Nilgun | | 2580 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 95 Church Rd | Easton | CT | 06612 |

| Principal Occupation | Name of Employer |
|---|---|
| Home Storage Solutions | Paradise Home LLC |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/31/2026 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Grzadko | Krzysztof | | 2581 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 11 Sunnyside Ave | Hamden | CT | 06518 |

| Principal Occupation | Name of Employer |
|---|---|
| it | amazon |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/31/2026 | $177.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Powell | Chris | | 2582 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 5 Chestnut St | Trumbull | CT | 06611 |

| Principal Occupation | Name of Employer |
|---|---|
| Student | Student |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $26.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/31/2026 | $281.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Mordecai | MaryBeth | | 2583 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1 Lakeview Rd | Moodus | CT | 06469 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/31/2026 | $25.00 |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Last0cb094e7 | First2cf41cb9 | | 2584 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 90 Heloise St | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | West Haven Board of Education |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Deotte | Penelope | | 2585 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1151 Washington St | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Software Analyst | OPTUM |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Coffey~~ | ~~David~~ | | ~~2586~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~25 Springside Ave~~ | ~~New Haven~~ | ~~CT~~ | ~~06515~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Instructor~~ | ~~Guitar Center~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$30.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/31/2026~~

Aggregate Contributions: ~~$201.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| McLean | Scott | | 2587 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 162 Willard St | New Haven | CT | 06515 |

| Principal Occupation | Name of Employer |
|---|---|
| Professor | Quinnipiac University |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $20.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $340.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Rizzardi | Maribeth | | 2588 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 39 Prospect St Apt 2A | Milford | CT | 06460 |

| Principal Occupation | Name of Employer |
|---|---|
| Client Advisor | Carlson & Csrlson |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/31/2026 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Warner | Stuart | | 2589 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 98 E Rock Rd | New Haven | CT | 06511 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/31/2026 | $150.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Saylor | Liz | | 2590 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 388 Fowler Ave | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Artist | Artist |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/31/2026 | $150.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Last69f32c4d | First27dcb627 | | 2591 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 41 Fairfield Ave | Norwalk | CT | 06854 |

| Principal Occupation | Name of Employer |
|---|---|
| College Professor | University of New Haven |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/31/2026 | $25.00 |

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| DeLucia | Christina | | 2592 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 48 Gordon St | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $60.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Stark | William | | 2593 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1315 Washington Blvd | Stamford | CT | 06902 |

| Principal Occupation | Name of Employer |
|---|---|
| Engineer | Metro-North Railroad |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Salsich | James | | 2594 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 43 Herrick Rd | Brooklyn | CT | 06234 |

| Principal Occupation | Name of Employer |
|---|---|
| Teacher | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Arpie | Charlotte | | 2595 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 113 Scotland Rd | Madison | CT | 06443 |

| Principal Occupation | Name of Employer |
|---|---|
| Marketing Strategist | Kaiser Permanente |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Burke~~ | ~~Adrienne~~ | | ~~2596~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~291 N Park Ave~~ | ~~Easton~~ | ~~CT~~ | ~~06612~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retail shop owner~~ | ~~Self~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| ~~03/31/2026~~ | ~~$150.00~~ | ~~$75.00~~ |

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Kelly | Duncan | | 2597 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 77 Temple St | Waterbury | CT | 06706 |

| Principal Occupation | Name of Employer |
|---|---|
| Administration | Webster Bank |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/31/2026 | $100.00 | $100.00 |

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Kelly | Robert | | 2598 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 71 Temple St | Waterbury | CT | 06706 |

| Principal Occupation | Name of Employer |
|---|---|
| Banking executive | Hudson Valley Credit Union |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/31/2026 | $100.00 | $100.00 |

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| York | Joe | | 2599 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 100 Mildred Ave | Waterbury | CT | 06708 |

| Principal Occupation | Name of Employer |
|---|---|
| Marketing | Walden Mutual Bank |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| 03/31/2026 | $50.00 | $50.00 |

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Levison | Ann | | 2600 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 24 Norris St | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Kelly | Moira | | 2601 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 71 Temple St | Waterbury | CT | 06706 |

| Principal Occupation | Name of Employer |
|---|---|
| Student | Student |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $100.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Rivera | Jennifer | | 2602 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 143 Colby St | Hartford | CT | 06106 |

| Principal Occupation | Name of Employer |
|---|---|
| Educator | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Wallace | Ronald | | 2603 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1323 Corbin Ave | New Britain | CT | 06053 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Boulrice | Jeff | | 2604 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 15 Hilltop Ave | Vernon | CT | 06066 |

| Principal Occupation | Name of Employer |
|---|---|
| Insurance Agent | Ferguson & McGuire |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Robersmith | Adam | | 2605 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 184 Great Pond Rd | Simsbury | CT | 06070 |

| Principal Occupation | Name of Employer |
|---|---|
| Clergy | Universalist Church of West Hartford |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $125.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Storck | Sandra | | 2606 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 231 Highland Ave | Wallingford | CT | 06492 |

| Principal Occupation | Name of Employer |
|---|---|
| Clinical Site Coordinator | Yale University |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Bennett | Stacy | | 2607 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 173 Coatney Hill Rd | Woodstock | CT | 06281 |

| Principal Occupation | Name of Employer |
|---|---|
| Health Coach | Unemployed |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~giordano~~ | ~~vincent~~ | | ~~2608~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~28 Fairview Ave~~ | ~~Ridgefield~~ | ~~CT~~ | ~~06877~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Retired~~ | ~~Retired~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/31/2026~~ | ~~$200.00~~ |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cracco | Celine | | 2609 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 50 Sarah Ln | Simsbury | CT | 06070 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/31/2026 | $100.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Franchini | Robert | | 2610 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 519 Wheelers Farms Rd | Milford | CT | 06461 |

| Principal Occupation | Name of Employer |
|---|---|
| Education Administrator | Milford Board of Education |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/31/2026 | $100.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Bessette | David | | 2611 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 111 Windsorville Rd . | Broad Brook | CT | 06016 |

| Principal Occupation | Name of Employer |
|---|---|
| retired | retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/31/2026 | $10.00 |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Martin | Lori | | 2612 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 24 Sherland Ave | New Haven | CT | 06513 |

| Principal Occupation | Name of Employer |
|---|---|
| Executive Director | Haven,Äôs Harvest |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $350.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Allik | Judith | | 2613 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 30 Russell Ave | Pawcatuck | CT | 06379 |

| Principal Occupation | Name of Employer |
|---|---|
| Clinical Child Psychologist | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Wilson | Timothy | | 2614 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 157 Harrison Rd | Cheshire | CT | 06410 |

| Principal Occupation | Name of Employer |
|---|---|
| Human resources | State of CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $5.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $5.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Shah | Alia | | 2392 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 40 Shamrock Hills Dr | Wappingers Falls | NY | 12590 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $100.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $100.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Coassin | Christian | | 2393 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 2039 Rittenhouse Sq | Philadelphia | PA | 19103 |

| Principal Occupation | Name of Employer |
|---|---|
| Data Analytics | Vertex, Inc. |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/31/2026 | $25.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Mucciolo | Aaron | | 2394 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 135 Johnson St | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Healthcate IT consultant | Nordic Global |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $150.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/31/2026 | $150.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Fallon | Frank | | 2395 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 224 Ridgewood Ave | Minneapolis | MN | 55403 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/31/2026 | $150.00 |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Easterly | Grace | | 2396 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 175 North St | Willimantic | CT | 06226 |

| Principal Occupation | Name of Employer |
|---|---|
| Graduate Assistant | University of Connecticut |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/31/2026 | $25.00 |

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Hanpeter | Benjamin | | 2397 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 14 Haviland St | Norwalk | CT | 06854 |

| Principal Occupation | Name of Employer |
|---|---|
| Engineer | ASML |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $150.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Fontaine~~ | ~~Debra~~ | | ~~2398~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~36 Maplewood Rd~~ | ~~Storrs~~ | ~~CT~~ | ~~06268~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Pastor~~ | ~~Second Church of Coventry, CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/31/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Messore | Angelo | | 2399 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 193 Haverford St | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Part time college teacher. | Ct State Community College |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Fields | Joe | | 2400 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 162 Daniel Rd | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Professor | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $50.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Weitzman~~ | ~~Amy~~ | | ~~2401~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~47 Maynard St~~ | ~~Arlington~~ | ~~MA~~ | ~~02474~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Real Estate Agent~~ | ~~Self Employed~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$250.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/31/2026~~ | ~~$500.00~~ |

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Schulz | Victoria | | 2402 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 159 Route 12 | Preston | CT | 06365 |

| Principal Occupation | Name of Employer |
|---|---|
| Process Consultant | RWS Life Sciences |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/31/2026 | $50.00 |

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Williams | Corey | | 2403 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 725 Governors Hwy | South Windsor | CT | 06074 |

| Principal Occupation | Name of Employer |
|---|---|
| Occupational Therapist | CT |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $75.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| 03/31/2026 | $75.00 |

---

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Pilaar~~ | ~~Jeremy~~ | | ~~2404~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~144 Hepburn Rd~~ | ~~Hamden~~ | ~~CT~~ | ~~06517~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~Associate research scholar~~ | ~~Yale Law School~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$100.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions |
|---|---|
| ~~03/31/2026~~ | ~~$450.00~~ |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| ~~Ritter~~ | ~~James and Carol~~ | | ~~2405~~ |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| ~~175 Pepper St~~ | ~~Monroe~~ | ~~CT~~ | ~~06468~~ |

| Principal Occupation | Name of Employer |
|---|---|
| ~~retired~~ | ~~CT~~ |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: ~~$25.00~~

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: ~~03/31/2026~~

Aggregate Contributions: ~~$50.00~~

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Despard** | **Matthew** | | **2474** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **3 Gordon Ln** | **Enfield** | **CT** | **06082** |

| Principal Occupation | Name of Employer |
|---|---|
| **Mental health counselor** | **Matthew Despard DBA** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$25.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/31/2026**

Aggregate Contributions: **$25.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Detmers** | **Mollie** | | **2484** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **25 Lynwood Pl Apt 4** | **New Haven** | **CT** | **06511** |

| Principal Occupation | Name of Employer |
|---|---|
| **Student** | **Student** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$150.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/31/2026**

Aggregate Contributions: **$250.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Burke** | **Adrienne** | | **2596** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **291 N Park Ave** | **Easton** | **CT** | **06612** |

| Principal Occupation | Name of Employer |
|---|---|
| **Retail shop owner** | **Greiser's Coffee & Market** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$75.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/31/2026**

Aggregate Contributions: **$75.00**

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Caskey** | **Joshua** | | **2413** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **1 Grooms Way** | **East Lyme** | **CT** | **06333** |

| Principal Occupation | Name of Employer |
|---|---|
| **Student** | **Student** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **03/31/2026** | **$10.00** | **$10.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Cordeira** | **Laura** | | **2459** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **12 Highview Ter** | **Bethel** | **CT** | **06801** |

| Principal Occupation | Name of Employer |
|---|---|
| **Director of Community Health** | **RVNAhealth** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **03/31/2026** | **$50.00** | **$50.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Weitzman** | **Amy** | | **2401** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **47 Maynard St** | **Arlington** | **MA** | **02474** |

| Principal Occupation | Name of Employer |
|---|---|
| **Real Estate Agent** | **Amy Loves Houses, LLC** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **03/31/2026** | **$250.00** | **$250.00** |

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **White** | **Marissa** | | **2508** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **19 Susan Ln** | **Southington** | **CT** | **06489** |

| Principal Occupation | Name of Employer |
|---|---|
| **Mental health consultant** | **Marissa Manzi, LCSW, LLC** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

| Date Received | Aggregate Contributions | Amount of Contribution |
|---|---|---|
| **03/31/2026** | **$375.00** | **$75.00** |

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| **Zammiello** | **Jason** | | **2463** |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| **24 Honeysuckle Ln** | **Milford** | **CT** | **06461** |

| Principal Occupation | Name of Employer |
|---|---|
| **DFO** | **GHS** |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: **$50.00**

Is this contribution associated with an event reported in Section J1? ☐ Yes ☒ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: **03/31/2026**

Aggregate Contributions: **$50.00**

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Bubriski | Wanda | | 2615 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1B Hughes Pl | New Haven | CT | 06511 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $140.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $140.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Stearns | Michelle | | 2616 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 12 Benson Pl | Fairfield | CT | 06824 |

| Principal Occupation | Name of Employer |
|---|---|
| Brand consultant | Indigo Brand Consulting |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $10.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $10.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Ryden | Barbara | | 2617 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 88 Notch Hill Rd Ste | North Branford | CT | 06471 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $25.00

## I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Josh for CT

TYPE OF REPORT: April 10 Filing - Amendment

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Doyle | Maeve | | 2618 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 103 Sand Hill Rd | Middletown | CT | 06457 |

| Principal Occupation | Name of Employer |
|---|---|
| Professor | Eastern Connecticut State University |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $50.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Cementina | Alan | | 2619 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 904 Flanders Rd | Coventry | CT | 06238 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $175.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Ridley | Marianna | | 2620 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 1220 Whitney Ave | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | None |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $25.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $75.00

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Brandis | Marie | | 2621 |

| Residential Street Address | City | State | Zip Code |
|---|---|---|---|
| 33 Central Aveh | Hamden | CT | 06517 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No

If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ☐ Yes ☒ No

Amount of Contribution: $50.00

Is this contribution associated with an event reported in Section J1? ☐ Yes ☐ No

If yes, list Event #:

Method of contribution: ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card

Date Received: 03/31/2026

Aggregate Contributions: $100.00

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### B. Itemized Contributions from Individuals

| Last Name | First | MI | Contribution ID # |
|---|---|---|---|
| Brown | Susan | | 2622 |
| **Residential Street Address** | **City** | **State** | **Zip Code** |
| 6 Hale Rd | Glastonbury | CT | 06033 |

| Principal Occupation | Name of Employer |
|---|---|
| Retired | Retired |

| Is contributor a principal of a state contractor or prospective state contractor? | Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | Amount of Contribution |
|---|---|---|
| ☐ Yes ☒ No | ☐ Yes ☒ No | |
| If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative | | |

| Is this contribution associated with an event reported in Section J1? | Method of contribution: | Date Received | Aggregate Contributions | |
|---|---|---|---|---|
| ☐ Yes ☐ No | ☐ Cash ☐ Personal Check ☐ Money Order ☒ Credit/Debit Card | 03/31/2026 | $50.00 | $5.00 |
| If yes, list Event # | | | | |

| | |
|---|---|
| **Total of Section B** | **$118,076.77** |
| **TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS** (Sections A + B) *(Total on Line 14, Column A of Summary Page)* | **$118,076.77** |

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### C1. Contributions from Other Committees

| Name of Committee | Name of Treasurer |
|---|---|
| | |

| Address | Is this contribution associated with an event reported in Section J1? Yes No<br>If yes, list Event # | Amount of Contribution |
|---|---|---|
| | | |

| City | State | Zip Code | Date Received | Aggregate Contributions |
|---|---|---|---|---|
| | | | | |

| | |
|---|---|
| **Total of Section C1** | |

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### C2. Reimbursements or Surplus Distributions from other Committees

| Name of Committee | | | Name of Treasurer | |
|---|---|---|---|---|
| Address | | | Date Received | Amount of Receipt |
| City | State | Zip Code | Payment Type<br>Reimbursement for shared expense<br>Surplus distribution from exploratory committee | |
| Expenditure # | Description | | | |
| | | | **Total of Section C2** | |

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### D. Loans Received this Period

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

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### E. 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 E** | |

## I. Monetary Receipts (Section A-I)

| NAME OF COMMITTEE | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### G. Interest from Deposits in Authorized Accounts

| Name of Institution | Date Received | Amount |
|---|---|---|
| | | |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| | | | |

| | |
|---|---|
| **Total of Section G** | |

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### H. Public Grant Funds Received from the Citizens' Election Fund

| Purpose of Grant: | Grant Cycle: | Date Received | Amount |
|---|---|---|---|
| Initial Grant Adjustment Supplemental/Post Election Deficit | Primary General Election Special Election | | |
| | **Total of Section H** | | |

## I. MONETARY RECEIPTS (Section A-I)

| NAME OF COMMITTEE | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### I. Miscellaneous Monetary Receipts not Considered Contributions

| Name | | | Date of Transaction | Amount Received |
|---|---|---|---|---|
| Street Address | City | State | Zip Code | |
| Description | | | | |

| | |
|---|---|
| **Total of Section I** | |

## II. EVENT ACTIVITY (Sections J1 - J4)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### J1. Event Information

| Event # / Date of Event | Letter | Description | Was this a fundraising event? |
|---|---|---|---|
| 02/08/2026 | D | Meet and Greet Event | ☐ Yes ☒ No |

| Location: Street Address | City | State | Zip Code |
|---|---|---|---|
| 202 Station Rd | Hampton | CT | 06257 |

| | | |
|---|---|---|
| Was this event hosted at a personal residence? | ☒ Yes ☐ No | if yes, go to Section J4 In-Kind Donations not Considered Contributions Associated with a House Party and complete required information for any puchases made by host(s) for food, beverage and invitations. |
| Did this fundraiser include items donated by a business entity of up to $200 or items donated by an individual of up to $100? | ☐ Yes ☒ No | If yes, to to Section J3 In-Kind Donations not Considered Contributions and complete required information. |
| **Subpart 1:** 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.) $0.00 |

| Event # / Date of Event | Letter | Description | Was this a fundraising event? |
|---|---|---|---|
| 02/08/2026 | E | Meet and Greet Event | ☐ Yes ☒ No |

| Location: Street Address | City | State | Zip Code |
|---|---|---|---|
| 323 CT Highway 87 | Columbia | CT | 06237 |

| | | |
|---|---|---|
| Was this event hosted at a personal residence? | ☐ Yes ☒ No | if yes, go to Section J4 In-Kind Donations not Considered Contributions Associated with a House Party and complete required information for any puchases made by host(s) for food, beverage and invitations. |
| Did this fundraiser include items donated by a business entity of up to $200 or items donated by an individual of up to $100? | ☐ Yes ☒ No | If yes, to to Section J3 In-Kind Donations not Considered Contributions and complete required information. |
| **Subpart 1:** 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.) $0.00 |

| Event # / Date of Event | Letter | Description | Was this a fundraising event? |
|---|---|---|---|
| 02/15/2026 | F | Meet and Greet Event | ☐ Yes ☒ No |

| Location: Street Address | City | State | Zip Code |
|---|---|---|---|
| 26 George St | Trumbull | CT | 06611 |

| | | |
|---|---|---|
| Was this event hosted at a personal residence? | ☒ Yes ☐ No | if yes, go to Section J4 In-Kind Donations not Considered Contributions Associated with a House Party and complete required information for any puchases made by host(s) for food, beverage and invitations. |
| Did this fundraiser include items donated by a business entity of up to $200 or items donated by an individual of up to $100? | ☐ Yes ☒ No | If yes, to to Section J3 In-Kind Donations not Considered Contributions and complete required information. |
| **Subpart 1:** 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.) $0.00 |

## II. EVENT ACTIVITY (Sections J1 - J4)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### J1. Event Information

| Event # / Date of Event | Letter | Description | Was this a fundraising event? |
|---|---|---|---|
| 02/15/2026 | G | Meet and Greet Event | ☐ Yes ☒ No |

| Location: Street Address | City | State | Zip Code |
|---|---|---|---|
| 47 Point Beach Rd | Milford | CT | 06611 |

| | | |
|---|---|---|
| Was this event hosted at a personal residence? | ☒ Yes ☐ No | if yes, go to Section J4 In-Kind Donations not Considered Contributions Associated with a House Party and complete required information for any puchases made by host(s) for food, beverage and invitations. |
| Did this fundraiser include items donated by a business entity of up to $200 or items donated by an individual of up to $100? | ☐ Yes ☒ No | If yes, to to Section J3 In-Kind Donations not Considered Contributions and complete required information. |
| **Subpart 1:** 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.) $0.00 |

| Event # / Date of Event | Letter | Description | Was this a fundraising event? |
|---|---|---|---|
| 03/21/2026 | I | Meet and Greet Event | ☐ Yes ☒ No |

| Location: Street Address | City | State | Zip Code |
|---|---|---|---|
| 484 Main St | Middletown | CT | 06457 |

| | | |
|---|---|---|
| Was this event hosted at a personal residence? | ☐ Yes ☒ No | if yes, go to Section J4 In-Kind Donations not Considered Contributions Associated with a House Party and complete required information for any puchases made by host(s) for food, beverage and invitations. |
| Did this fundraiser include items donated by a business entity of up to $200 or items donated by an individual of up to $100? | ☐ Yes ☒ No | If yes, to to Section J3 In-Kind Donations not Considered Contributions and complete required information. |
| **Subpart 1:** 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.) $0.00 |

| Event # / Date of Event | Letter | Description | Was this a fundraising event? |
|---|---|---|---|
| 03/22/2026 | H | Home Fundraiser | ☒ Yes ☐ No |

| Location: Street Address | City | State | Zip Code |
|---|---|---|---|
| 17 Pinnacle Ridge Rd | Farmington | CT | 06085 |

| | | |
|---|---|---|
| Was this event hosted at a personal residence? | ☒ Yes ☐ No | if yes, go to Section J4 In-Kind Donations not Considered Contributions Associated with a House Party and complete required information for any puchases made by host(s) for food, beverage and invitations. |
| Did this fundraiser include items donated by a business entity of up to $200 or items donated by an individual of up to $100? | ☐ Yes ☒ No | If yes, to to Section J3 In-Kind Donations not Considered Contributions and complete required information. |
| **Subpart 1:** 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.) $0.00 |

| | |
|---|---|
| **Total of Section J1** | $0.00 |

## II.EVENT ACTIVITY (Sections J1 - J4)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### J3. 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 |
|---|---|---|---|---|
| Individual | | | | |
| Business Entity | Date Received | Event # | Aggregate value for this event | |
| Sole Proprietorship | | | | |

| | |
|---|---|
| **Total of Section J3** | |

## II.EVENT ACTIVITY (Sections J1 - J4)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### J4. In-Kind Donations Not Considered Contributions Associated with a House Party

| Name of Host | Is this event supporting more than one candidate? | | | |
|---|---|---|---|---|
| Therese Eke | ☐ Yes ☒ No | If yes, complete Itemization in Addendum J4 | | |
| **Street Address** | **City** | | **State** | **Zip Code** |
| 47 Point Bch Raod | Milford | | CT | 06611 |
| **Description of Donation** | | | | **Fair Market Value of Donation** |
| Food & Beverage | | | | $226.46 |
| **Event #** | **Aggregate value of this Event - all hosts** | **Aggregate value of all Events - this host/candidate** | | |
| 02152026G | $226.46 | $226.46 | | |

| Name of Host | Is this event supporting more than one candidate? | | | |
|---|---|---|---|---|
| Michael Barker | ☐ Yes ☒ No | If yes, complete Itemization in Addendum J4 | | |
| **Street Address** | **City** | | **State** | **Zip Code** |
| 26 George St | Trumbull | | CT | 06611 |
| **Description of Donation** | | | | **Fair Market Value of Donation** |
| Food | | | | $43.61 |
| **Event #** | **Aggregate value of this Event - all hosts** | **Aggregate value of all Events - this host/candidate** | | |
| 02152026F | $43.61 | $43.61 | | |

| Name of Host | Is this event supporting more than one candidate? | | | |
|---|---|---|---|---|
| Kate Donnelly | ☐ Yes ☒ No | If yes, complete Itemization in Addendum J4 | | |
| **Street Address** | **City** | | **State** | **Zip Code** |
| 202 Station Rd | Hampton | | CT | 06257 |
| **Description of Donation** | | | | **Fair Market Value of Donation** |
| Food & Beverage | | | | $64.00 |
| **Event #** | **Aggregate value of this Event - all hosts** | **Aggregate value of all Events - this host/candidate** | | |
| 02082026D | $64.00 | $64.00 | | |

| Name of Host | Is this event supporting more than one candidate? |
|---|---|
| Patricia Reville | ☐ Yes ☒ No — If yes, complete Itemization in Addendum J4 |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 17 Pinnacle Ridge Rd | Farmington | CT | 06085 |

| Description of Donation | Fair Market Value of Donation |
|---|---|
| food & beverage | $289.35 |

| Event # | Aggregate value of this Event - all hosts | Aggregate value of all Events - this host/candidate |
|---|---|---|
| 03222026H | $289.35 | $289.35 |

| | |
|---|---|
| **Total of Section J4** | **$623.42** |

## III. NONMONETARY RECEIPTS (Sections K - L)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### K. In-Kind Contributions

| Name | | | |
|---|---|---|---|
| | | | |
| **Street Address** | **City** | **State** | **Zip Code** |
| | | | |

| Is this contribution associated with an event reported in Section J1? | Description of In-Kind Contribution |
|---|---|
| Yes / No | |
| If yes, list Event# | |

| Is Contributor a lobbyist, spouse, or dependent child of a lobbyist? | Is contributor a principal of a state contractor or prospective state contractor? | Fair Market Value of this Contribution |
|---|---|---|
| Yes / No | Yes / No | |
| | If yes, indicate which branch or branches of government the contract is with: Executive / Legislative | |

| Type of Contributor: | Date Received | Aggregate contributions |
|---|---|---|
| Individual / Committee / Sole Proprietorship | | |

| | |
|---|---|
| **Total of Section K** | |

## III. Non Monetary Receipts (Sections K - L)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### L. 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 L** | |

## IV. EXPENDITURES (Sections N - S)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### N. Expenses Paid By Committee

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Josh Elliott | 01/05/2026 | [X] Check # Mb61hkr1 [ ] Debit Card [ ] EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 28 Cobblestone Dr | Hamden | CT | 06518 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| RMB | Action Network | |

| Is this expenditure coordinated with another candidate for which reimbursement is sought? | Expenditure # (if applicable) | Event # | Amount |
|---|---|---|---|
| [ ] Yes [X] No<br>If yes, assign an Expenditure # and complete Itemization in Addendum N | | | $311.84 |

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Sophie Coassin | 01/06/2026 | [ ] Check # [ ] Debit Card [X] EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 33 Westerly Dr | Hamden | CT | 06518 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| CNSLT | | |

| Is this expenditure coordinated with another candidate for which reimbursement is sought? | Expenditure # (if applicable) | Event # | Amount |
|---|---|---|---|
| [ ] Yes [X] No<br>If yes, assign an Expenditure # and complete Itemization in Addendum N | | | $500.00 |

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Brendan Regan | 01/06/2026 | [ ] Check # [ ] Debit Card [X] EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 39 N Riverside Ave | Croton O N Hudson | NY | 10520 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| CNSLT | | |

| Is this expenditure coordinated with another candidate for which reimbursement is sought? | Expenditure # (if applicable) | Event # | Amount |
|---|---|---|---|
| [ ] Yes [X] No<br>If yes, assign an Expenditure # and complete Itemization in Addendum N | | | $1,500.00 |

## IV. EXPENDITURES (Sections N - S)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### N. Expenses Paid By Committee

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Key Bank Basic Business Checking | 01/09/2026 | ☐ Check # ☐ Debit Card ☒ EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 2856 Whitney Ave | Hamden | CT | 06518 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| BNK | ACH Fee | |

| Is this expenditure coordinated with another candidate for which reimbursement is sought? | Expenditure # (if applicable) | Event # | Amount |
|---|---|---|---|
| ☐ Yes ☒ No<br>If yes, assign an Expenditure # and complete Itemization in Addendum N | | | $3.00 |

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Key Bank Basic Business Checking | 01/09/2026 | ☐ Check # ☐ Debit Card ☒ EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 2856 Whitney Ave | Hamden | CT | 06518 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| BNK | Monthly Fee | |

| Is this expenditure coordinated with another candidate for which reimbursement is sought? | Expenditure # (if applicable) | Event # | Amount |
|---|---|---|---|
| ☐ Yes ☒ No<br>If yes, assign an Expenditure # and complete Itemization in Addendum N | | | $10.00 |

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Tax Bandits | 01/09/2026 | ☐ Check # ☒ Debit Card ☐ EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 2685 Celanese Rd Ste 100 | Rock Hill | SC | 29732 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| OVHD | Tax software (1099s) | |

| Is this expenditure coordinated with another candidate for which reimbursement is sought? | Expenditure # (if applicable) | Event # | Amount |
|---|---|---|---|
| ☐ Yes ☒ No<br>If yes, assign an Expenditure # and complete Itemization in Addendum N | | | $27.15 |

## IV. EXPENDITURES (Sections N - S)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### N. Expenses Paid By Committee

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Tax Bandits | 01/09/2026 | ☐ Check # ☒ Debit Card ☐ EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 2685 Celanese Rd Ste 100 | Rock Hill | SC | 29732 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| OVHD | tax software (1099s) | $1.85 |

| Is this expenditure coordinated with another candidate for which reimbursement is sought? | Expenditure # (if applicable) | Event # |
|---|---|---|
| ☐ Yes ☒ No<br>If yes, assign an Expenditure # and complete Itemization in Addendum N | | |

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Richard Suisman | 01/13/2026 | ☒ Check # 9B81RK25 ☐ Debit Card ☐ EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 2100 Massachussetts Ave NW | Washington | DC | 20008 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| REF | Excess contribution - replace check issued 09/29/2025 GBI1H8XG | $320.00 |

| Is this expenditure coordinated with another candidate for which reimbursement is sought? | Expenditure # (if applicable) | Event # |
|---|---|---|
| ☐ Yes ☒ No<br>If yes, assign an Expenditure # and complete Itemization in Addendum N | | |

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Switchboard | 01/13/2026 | ☐ Check # ☐ Debit Card ☒ EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| PO Box 33485 | Washington | DC | 20033 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| WEB | text platform | $649.49 |

| Is this expenditure coordinated with another candidate for which reimbursement is sought? | Expenditure # (if applicable) | Event # |
|---|---|---|
| ☐ Yes ☒ No<br>If yes, assign an Expenditure # and complete Itemization in Addendum N | | |

## IV. EXPENDITURES (Sections N - S)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### N. Expenses Paid By Committee

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Jayden Rameikas | 01/15/2026 | ☐ Check # ☐ Debit Card ☒ EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 186 Oxford St | Hartford | CT | 06105 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| CNSLT | | |

| Is this expenditure coordinated with another candidate for which reimbursement is sought? | Expenditure # (if applicable) | Event # | Amount |
|---|---|---|---|
| ☐ Yes ☒ No<br>If yes, assign an Expenditure # and complete Itemization in Addendum N | | | $3,000.00 |

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Sarah Hague | 01/15/2026 | ☐ Check # ☐ Debit Card ☒ EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 6 Old Canton Rd | Canton | CT | 06019 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| CNSLT | campaign oversight | |

| Is this expenditure coordinated with another candidate for which reimbursement is sought? | Expenditure # (if applicable) | Event # | Amount |
|---|---|---|---|
| ☐ Yes ☒ No<br>If yes, assign an Expenditure # and complete Itemization in Addendum N | | | $2,000.00 |

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Sophie Coassin | 02/03/2026 | ☐ Check # ☐ Debit Card ☒ EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 33 Westerly Dr | Hamden | CT | 06518 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| CNSLT | media | |

| Is this expenditure coordinated with another candidate for which reimbursement is sought? | Expenditure # (if applicable) | Event # | Amount |
|---|---|---|---|
| ☐ Yes ☒ No<br>If yes, assign an Expenditure # and complete Itemization in Addendum N | | | $500.00 |

## IV. EXPENDITURES (Sections N - S)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### N. Expenses Paid By Committee

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Jayden Rameikas | 02/03/2026 | ☐ Check # ☐ Debit Card ☒ EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 186 Oxford St | Hartford | CT | 06105 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| CNSLT | | |

| Is this expenditure coordinated with another candidate for which reimbursement is sought? | Expenditure # (if applicable) | Event # | Amount |
|---|---|---|---|
| ☐ Yes ☒ No<br>If yes, assign an Expenditure # and complete Itemization in Addendum N | | | $3,000.00 |

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Nineteen Sixty Campaigns, LLC | 02/04/2026 | ☐ Check # ☐ Debit Card ☒ EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 4540 N Ravenswood Ave Unit 7 | Chicago | IL | 60640 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| CNSLT | camapgin strategist and fundraising | |

| Is this expenditure coordinated with another candidate for which reimbursement is sought? | Expenditure # (if applicable) | Event # | Amount |
|---|---|---|---|
| ☐ Yes ☒ No<br>If yes, assign an Expenditure # and complete Itemization in Addendum N | | | $5,500.00 |

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Aidan Palmer | 02/05/2026 | ☐ Check # ☐ Debit Card ☒ EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 385 Mountain Rd | Cheshire | CT | 06410 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| CNSLT | Field organizer | |

| Is this expenditure coordinated with another candidate for which reimbursement is sought? | Expenditure # (if applicable) | Event # | Amount |
|---|---|---|---|
| ☐ Yes ☒ No<br>If yes, assign an Expenditure # and complete Itemization in Addendum N | | | $2,500.00 |

## IV. EXPENDITURES (Sections N - S)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### N. Expenses Paid By Committee

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Brendan Regan | 02/06/2026 | ☐ Check # ☐ Debit Card ☒ EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 39 N Riverside Ave | Croton O N Hudson | NY | 10520 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| CNSLT | Media | $500.00 |

Is this expenditure coordinated with another candidate for which reimbursement is sought? ☐ Yes ☒ No

If yes, assign an Expenditure # and complete Itemization in Addendum N

Expenditure # (if applicable):

Event #:

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Switchboard | 02/06/2026 | ☐ Check # ☐ Debit Card ☒ EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| PO Box 33485 | Washington | DC | 20033 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| WEB | text platform | $1,149.65 |

Is this expenditure coordinated with another candidate for which reimbursement is sought? ☐ Yes ☒ No

If yes, assign an Expenditure # and complete Itemization in Addendum N

Expenditure # (if applicable):

Event #:

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Key Bank Basic Business Checking | 02/09/2026 | ☐ Check # ☐ Debit Card ☒ EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 2856 Whitney Ave | Hamden | CT | 06518 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| BNK | ACH | $2.20 |

Is this expenditure coordinated with another candidate for which reimbursement is sought? ☐ Yes ☒ No

If yes, assign an Expenditure # and complete Itemization in Addendum N

Expenditure # (if applicable):

Event #:

## IV. EXPENDITURES (Sections N - S)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### N. Expenses Paid By Committee

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Key Bank Basic Business Checking | 02/09/2026 | ☐ Check # ☐ Debit Card ☒ EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 2856 Whitney Ave | Hamden | CT | 06518 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| BNK | Monthy Fee | |

| Is this expenditure coordinated with another candidate for which reimbursement is sought? | Expenditure # (if applicable) | Event # | Amount |
|---|---|---|---|
| ☐ Yes ☒ No<br>If yes, assign an Expenditure # and complete Itemization in Addendum N | | | $10.00 |

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Nordeast Digital, LLC | 02/10/2026 | ☐ Check # ☐ Debit Card ☒ EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 643 Quincy St NE | Minneapolis | MN | 55413 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| CNSLT | Data acquisition and list rentals | |

| Is this expenditure coordinated with another candidate for which reimbursement is sought? | Expenditure # (if applicable) | Event # | Amount |
|---|---|---|---|
| ☐ Yes ☒ No<br>If yes, assign an Expenditure # and complete Itemization in Addendum N | | | $5,000.00 |

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Jayden Rameikas | 02/20/2026 | ☐ Check # ☐ Debit Card ☒ EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 186 Oxford St | Hartford | CT | 06105 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| CNSLT | | |

| Is this expenditure coordinated with another candidate for which reimbursement is sought? | Expenditure # (if applicable) | Event # | Amount |
|---|---|---|---|
| ☐ Yes ☒ No<br>If yes, assign an Expenditure # and complete Itemization in Addendum N | | | $2,500.00 |

## IV. EXPENDITURES (Sections N - S)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### N. Expenses Paid By Committee

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Josh Elliott | 02/23/2026 | [X] Check # 50033239 [ ] Debit Card [ ] EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 28 Cobblestone Dr | Hamden | CT | 06518 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| RMB | Reimbursement to candidate Scale to Win | $132.60 |

Is this expenditure coordinated with another candidate for which reimbursement is sought? [ ] Yes [X] No

If yes, assign an Expenditure # and complete Itemization in Addendum N

Expenditure # (if applicable):

Event #:

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Josh Elliott | 02/23/2026 | [X] Check # 50033240 [ ] Debit Card [ ] EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 28 Cobblestone Dr | Hamden | CT | 06518 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| RMB | Action Network | $306.70 |

Is this expenditure coordinated with another candidate for which reimbursement is sought? [ ] Yes [X] No

If yes, assign an Expenditure # and complete Itemization in Addendum N

Expenditure # (if applicable):

Event #:

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Josh Elliott | 02/23/2026 | [X] Check # 50033241 [ ] Debit Card [ ] EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 28 Cobblestone Dr | Hamden | CT | 06518 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| RMB | Campaign Deputy | $575.00 |

Is this expenditure coordinated with another candidate for which reimbursement is sought? [ ] Yes [X] No

If yes, assign an Expenditure # and complete Itemization in Addendum N

Expenditure # (if applicable):

Event #:

## IV. EXPENDITURES (Sections N - S)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### N. Expenses Paid By Committee

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Aidan Palmer | 02/24/2026 | ☐ Check # ☐ Debit Card ☒ EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 385 Mountain Rd | Cheshire | CT | 06410 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| CNSLT | | |

| Is this expenditure coordinated with another candidate for which reimbursement is sought? | Expenditure # (if applicable) | Event # | Amount |
|---|---|---|---|
| ☐ Yes ☒ No<br>If yes, assign an Expenditure # and complete Itemization in Addendum N | | | $2,500.00 |

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Nineteen Sixty Campaigns, LLC | 03/03/2026 | ☐ Check # ☐ Debit Card ☒ EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 4540 N Ravenswood Ave Unit 7 | Chicago | IL | 60640 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| CNSLT | campaign strategist/fundraising | |

| Is this expenditure coordinated with another candidate for which reimbursement is sought? | Expenditure # (if applicable) | Event # | Amount |
|---|---|---|---|
| ☐ Yes ☒ No<br>If yes, assign an Expenditure # and complete Itemization in Addendum N | | | $5,000.00 |

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Sophie Coassin | 03/03/2026 | ☐ Check # ☐ Debit Card ☒ EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 33 Westerly Dr | Hamden | CT | 06518 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| CNSLT | media | |

| Is this expenditure coordinated with another candidate for which reimbursement is sought? | Expenditure # (if applicable) | Event # | Amount |
|---|---|---|---|
| ☐ Yes ☒ No<br>If yes, assign an Expenditure # and complete Itemization in Addendum N | | | $500.00 |

## IV. EXPENDITURES (Sections N - S)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### N. Expenses Paid By Committee

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Brendan Regan | 03/03/2026 | ☐ Check # ☐ Debit Card ☒ EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 39 N Riverside Ave | Croton O N Hudson | NY | 10520 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| CNSLT | | |

| Is this expenditure coordinated with another candidate for which reimbursement is sought? | Expenditure # (if applicable) | Event # | Amount |
|---|---|---|---|
| ☐ Yes ☒ No<br>If yes, assign an Expenditure # and complete Itemization in Addendum N | | | $500.00 |

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Colby Schultz | 03/03/2026 | ☐ Check # ☐ Debit Card ☒ EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 86 Buff Cap Rd | Tolland | CT | 06084 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| CNSLT | fundraising and field associate | |

| Is this expenditure coordinated with another candidate for which reimbursement is sought? | Expenditure # (if applicable) | Event # | Amount |
|---|---|---|---|
| ☐ Yes ☐ No<br>If yes, assign an Expenditure # and complete Itemization in Addendum N | | | $1,000.00 |

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Sarah Hague | 03/03/2026 | ☐ Check # ☐ Debit Card ☒ EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 6 Old Canton Rd | Canton | CT | 06019 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| CNSLT | campaign oversight | |

| Is this expenditure coordinated with another candidate for which reimbursement is sought? | Expenditure # (if applicable) | Event # | Amount |
|---|---|---|---|
| ☐ Yes ☒ No<br>If yes, assign an Expenditure # and complete Itemization in Addendum N | | | $3,000.00 |

## IV. EXPENDITURES (Sections N - S)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### N. Expenses Paid By Committee

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Scale to Win | 03/03/2026 | ☐ Check # ☒ Debit Card ☐ EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 455 Market St | San Francisco | CA | 94105-2448 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| WEB | | |

| Is this expenditure coordinated with another candidate for which reimbursement is sought? | Expenditure # (if applicable) | Event # | |
|---|---|---|---|
| ☐ Yes ☒ No<br>If yes, assign an Expenditure # and complete Itemization in Addendum N | | | $883.30 |

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Jayden Rameikas | 03/04/2026 | ☐ Check # ☐ Debit Card ☒ EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 186 Oxford St | Hartford | CT | 06105 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| CNSLT | | |

| Is this expenditure coordinated with another candidate for which reimbursement is sought? | Expenditure # (if applicable) | Event # | |
|---|---|---|---|
| ☐ Yes ☒ No<br>If yes, assign an Expenditure # and complete Itemization in Addendum N | | | $2,500.00 |

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Aidan Palmer | 03/09/2026 | ☐ Check # ☐ Debit Card ☒ EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 385 Mountain Rd | Cheshire | CT | 06410 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| CNSLT | | |

| Is this expenditure coordinated with another candidate for which reimbursement is sought? | Expenditure # (if applicable) | Event # | |
|---|---|---|---|
| ☐ Yes ☒ No<br>If yes, assign an Expenditure # and complete Itemization in Addendum N | | | $2,500.00 |

## IV. EXPENDITURES (Sections N - S)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### N. Expenses Paid By Committee

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Switchboard | 03/09/2026 | ☐ Check # ☒ Debit Card ☐ EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| PO Box 33485 | Washington | DC | 20033 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| WEB | | |

| Is this expenditure coordinated with another candidate for which reimbursement is sought? | Expenditure # (if applicable) | Event # | Amount |
|---|---|---|---|
| ☐ Yes ☒ No<br>If yes, assign an Expenditure # and complete Itemization in Addendum N | | | $1,602.68 |

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Switchboard | 03/09/2026 | ☐ Check # ☒ Debit Card ☐ EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| PO Box 33485 | Washington | DC | 20033 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| WEB | | |

| Is this expenditure coordinated with another candidate for which reimbursement is sought? | Expenditure # (if applicable) | Event # | Amount |
|---|---|---|---|
| ☐ Yes ☐ No<br>If yes, assign an Expenditure # and complete Itemization in Addendum N | | | $316.70 |

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Key Bank Basic Business Checking | 03/09/2026 | ☐ Check # ☐ Debit Card ☒ EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 2856 Whitney Ave | Hamden | CT | 06518 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| BNK | ACH Fee | |

| Is this expenditure coordinated with another candidate for which reimbursement is sought? | Expenditure # (if applicable) | Event # | Amount |
|---|---|---|---|
| ☐ Yes ☒ No<br>If yes, assign an Expenditure # and complete Itemization in Addendum N | | | $5.50 |

## IV. EXPENDITURES (Sections N - S)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### N. Expenses Paid By Committee

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Key Bank Basic Business Checking | 03/09/2026 | ☐ Check # ☐ Debit Card ☒ EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 2856 Whitney Ave | Hamden | CT | 06518 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| BNK | Monthly Fee | |

| Is this expenditure coordinated with another candidate for which reimbursement is sought? | Expenditure # (if applicable) | Event # | Amount |
|---|---|---|---|
| ☐ Yes ☒ No<br>If yes, assign an Expenditure # and complete Itemization in Addendum N | | | $10.00 |

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Key Bank Basic Business Checking | 03/09/2026 | ☐ Check # ☐ Debit Card ☒ EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 2856 Whitney Ave | Hamden | CT | 06518 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| BNK | | |

| Is this expenditure coordinated with another candidate for which reimbursement is sought? | Expenditure # (if applicable) | Event # | Amount |
|---|---|---|---|
| ☐ Yes ☒ No<br>If yes, assign an Expenditure # and complete Itemization in Addendum N | | | $5.00 |

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Organizing Empowerment | 03/12/2026 | ☐ Check # ☒ Debit Card ☐ EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 2800 Royal Ave | Monona | WI | 53716 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| OVHD | peer to peer app | |

| Is this expenditure coordinated with another candidate for which reimbursement is sought? | Expenditure # (if applicable) | Event # | Amount |
|---|---|---|---|
| ☐ Yes ☒ No<br>If yes, assign an Expenditure # and complete Itemization in Addendum N | | | $100.00 |

## IV. EXPENDITURES (Sections N - S)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### N. Expenses Paid By Committee

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Jayden Rameikas | 03/17/2026 | ☐ Check # ☐ Debit Card ☒ EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 186 Oxford St | Hartford | CT | 06105 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| CNSLT | | |

| Is this expenditure coordinated with another candidate for which reimbursement is sought? | Expenditure # (if applicable) | Event # | Amount |
|---|---|---|---|
| ☐ Yes ☒ No<br>If yes, assign an Expenditure # and complete Itemization in Addendum N | | | $2,500.00 |

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| USPS PO Boxes Online | 03/18/2026 | ☐ Check # ☒ Debit Card ☐ EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| n/a | Washington | DC | |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| OVHD | PO Box | |

| Is this expenditure coordinated with another candidate for which reimbursement is sought? | Expenditure # (if applicable) | Event # | Amount |
|---|---|---|---|
| ☐ Yes ☒ No<br>If yes, assign an Expenditure # and complete Itemization in Addendum N | | | $70.00 |

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Josh Elliott | 03/23/2026 | ☒ Check # 1BL1WLN4 ☐ Debit Card ☐ EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 28 Cobblestone Dr | Hamden | CT | 06518 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| RMB | REimbursement to candidate Campaign Deputy | |

| Is this expenditure coordinated with another candidate for which reimbursement is sought? | Expenditure # (if applicable) | Event # | Amount |
|---|---|---|---|
| ☐ Yes ☒ No<br>If yes, assign an Expenditure # and complete Itemization in Addendum N | | | $575.00 |

## IV. EXPENDITURES (Sections N - S)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### N. Expenses Paid By Committee

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Josh Elliott | 03/23/2026 | [X] Check # SBN1LLN4 [ ] Debit Card [ ] EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 28 Cobblestone Dr | Hamden | CT | 06518 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| RMB | Reimbursement to candidate Action Network | $664.08 |

Is this expenditure coordinated with another candidate for which reimbursement is sought? [ ] Yes [X] No
If yes, assign an Expenditure # and complete Itemization in Addendum N

Expenditure # (if applicable):
Event #:

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Aidan Palmer | 03/24/2026 | [ ] Check # [ ] Debit Card [X] EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 385 Mountain Rd | Cheshire | CT | 06410 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| CNSLT | | $2,500.00 |

Is this expenditure coordinated with another candidate for which reimbursement is sought? [ ] Yes [X] No
If yes, assign an Expenditure # and complete Itemization in Addendum N

Expenditure # (if applicable):
Event #:

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| James Ceronsky | 03/25/2026 | [X] Check # 4BS1DLGG [ ] Debit Card [ ] EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 219 E Grant St | Orlando | FL | 32806 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| RMB | campaign verify | $95.00 |

Is this expenditure coordinated with another candidate for which reimbursement is sought? [ ] Yes [ ] No
If yes, assign an Expenditure # and complete Itemization in Addendum N

Expenditure # (if applicable):
Event #:

## IV. EXPENDITURES (Sections N - S)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### N. Expenses Paid By Committee

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Carol Rizzolo | 03/25/2026 | [X] Check # WBC1TLG5 [ ] Debit Card [ ] EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 24 Long Hl Farm | Guilford | CT | 06437 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| REF | REfund to contributor for exceeding contribution limit | $100.00 |

Is this expenditure coordinated with another candidate for which reimbursement is sought? [ ] Yes [X] No

If yes, assign an Expenditure # and complete Itemization in Addendum N

Expenditure # (if applicable):

Event #:

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Josh Elliott | 03/30/2026 | [X] Check # KBR1FLJ7 [ ] Debit Card [ ] EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 28 Cobblestone Dr | Hamden | CT | 06518 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| RMB | Reimbursement to candidate - Staples printing expense | $143.60 |

Is this expenditure coordinated with another candidate for which reimbursement is sought? [ ] Yes [X] No

If yes, assign an Expenditure # and complete Itemization in Addendum N

Expenditure # (if applicable):

Event #:

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Karen Caffrey | 03/31/2026 | [X] Check # HBT1ALFJ [ ] Debit Card [ ] EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 30 Jenny Clfs | Manchester | CT | 06040 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| REF | Refund - excess contribution | $320.00 |

Is this expenditure coordinated with another candidate for which reimbursement is sought? [ ] Yes [X] No

If yes, assign an Expenditure # and complete Itemization in Addendum N

Expenditure # (if applicable):

Event #:

## IV. EXPENDITURES (Sections N - S)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### N. Expenses Paid By Committee

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| Anedot, Inc. | 03/31/2026 | [ ] Check # [ ] Debit Card [X] EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 3723 Greenville Ave Ste 41002 | Dallas | TX | 75206-5311 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| BNK | contributions platform fees | $5,299.17 |

Is this expenditure coordinated with another candidate for which reimbursement is sought? [ ] Yes [X] No

If yes, assign an Expenditure # and complete Itemization in Addendum N

Expenditure # (if applicable):

Event #:

| Name of Payee | Date of Payment | Method of Payment |
|---|---|---|
| James Ceronsky | 03/31/2026 | [X] Check # 4BS1DLGG [ ] Debit Card [ ] EFT |

| Street Address | City | State | Zip Code |
|---|---|---|---|
| 219 E Grant St | Orlando | FL | 32806 |

| Purpose of Expendit | Description | Amount |
|---|---|---|
| RMB | Reimbursement to consultant Campaign Verify | $95.00 |

Is this expenditure coordinated with another candidate for which reimbursement is sought? [ ] Yes [X] No

If yes, assign an Expenditure # and complete Itemization in Addendum N

Expenditure # (if applicable):

Event #:

| Total of Section N | $62,784.51 |
|---|---|

## IV. EXPENDITURES (Sections N - S)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### O. Expenses Paid By Candidate

| Name of Payee (Name of vendor who candidate paid directly) | Date of Payment | Is Reimbursement Claimed? |
|---|---|---|
| Action Network | 01/04/2026 | [X] Yes [ ] No |

| Street Address | City | State | Zip Code | Amount |
|---|---|---|---|---|
| 1310 L St NW Ste 500 | Washington | DC | 20005 | |

| Purpose of Expenditure (by code) | Description | Event # | Amount |
|---|---|---|---|
| WEB | | | $311.84 |

| Name of Payee (Name of vendor who candidate paid directly) | Date of Payment | Is Reimbursement Claimed? |
|---|---|---|
| Scale to Win | 02/02/2026 | [X] Yes [ ] No |

| Street Address | City | State | Zip Code | Amount |
|---|---|---|---|---|
| 455 Market St | San Francisco | CA | 94105-2448 | |

| Purpose of Expenditure (by code) | Description | Event # | Amount |
|---|---|---|---|
| Misc * | online texting tool | | $132.62 |

| Name of Payee (Name of vendor who candidate paid directly) | Date of Payment | Is Reimbursement Claimed? |
|---|---|---|
| Action Network | 02/23/2026 | [X] Yes [ ] No |

| Street Address | City | State | Zip Code | Amount |
|---|---|---|---|---|
| 1310 L St NW Ste 500 | Washington | DC | 20005 | |

| Purpose of Expenditure (by code) | Description | Event # | Amount |
|---|---|---|---|
| WEB | Action Network | | $306.79 |

| Name of Payee (Name of vendor who candidate paid directly) | Date of Payment | Is Reimbursement Claimed? |
|---|---|---|
| Campaign Deputy | 02/23/2026 | [X] Yes [ ] No |

| Street Address | City | State | Zip Code | Amount |
|---|---|---|---|---|
| 445 Baxter Ave | Louisville | KY | 40204 | |

| Purpose of Expenditure (by code) | Description | Event # | Amount |
|---|---|---|---|
| OVHD | Call time manager | | $575.00 |

## IV. EXPENDITURES (Sections N - S)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### O. Expenses Paid By Candidate

| Name of Payee (Name of vendor who candidate paid directly) | Date of Payment | Is Reimbursement Claimed? | Street Address | City | State | Zip Code | Amount | Purpose of Expenditure (by code) | Description | Event # |
|---|---|---|---|---|---|---|---|---|---|---|
| Action Network | 02/23/2026 | [X] Yes [ ] No | 1310 L St NW Ste 500 | Washington | DC | 20005 | $664.08 | WEB | | |
| Staples | 03/19/2026 | [X] Yes [ ] No | 2335 Dixwell Ave | Hamden | CT | 06514 | $143.56 | PRNT | | |
| Campaign Deputy | 03/23/2026 | [X] Yes [ ] No | 445 Baxter Ave | Louisville | KY | 40204 | $575.00 | OVHD | Call time manager | |

| Total of Section O | $2,708.89 |
|---|---|

## IV. EXPENDITURES (Sections N - S)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### P. Expenses Incurred on Committee Credit Card

| Name of Issuing Institution | Type of Credit Card: Visa Master Card Discover American Express Other |
|---|---|

| Name of Vendor | Date of Transaction |
|---|---|

| Street Address | City | State | Zip Code |
|---|---|---|---|

| Purpose of Expenditure (by code) | Description | Amount |
|---|---|---|

| Is this expenditure coordinated with another candidate for which reimbursement is sought? Yes / No<br>If yes, assign an Expenditure # and complete Itemization in Addendum P | Expenditure # (if applicable) | Event # |
|---|---|---|

| Total of Section P | |
|---|---|

## IV. EXPENDITURES (Sections N - S)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### Q. 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 | Amount Incurred (Estimate or Actual) |
|---|---|---|

| Is this expenditure coordinated with another candidate for which reimbursement is sought? Yes / No<br>If yes, assign an Expenditure # and completes Itemization in Addendum Q | Expenditure # (if applicable) | Event # |
|---|---|---|

| Total of Section Q | |
|---|---|

## IV. EXPENDITURES (Sections N - S)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### R. Itemization of Reimbursements and Secondary Payees

| Last Name of Worker/Consultant | First | MI | Date of Payment to Vendor | Payment to Reimburse Committee Worker/Consultant as reported in Section N: |
|---|---|---|---|---|
| Ceronsky | James | | 03/20/2026 | [X] Check # 4BS1DLGG<br>[ ] Debit Card<br>[ ] EFT |

Name of Vendor Paid by Committee Worker/Consultant: Campaign Verify

| Street Address of Vendor | City | State | Zip Code |
|---|---|---|---|
| 1215 31st St | Washington | DC | 20007 |

| Purpose of Expenditure (by code) | Description |
|---|---|
| OVHD | campaign verification |

| Is this expenditure coordinated with another candidate for which reimbursement is sought? | Expenditure # (if applicable) | Event # | Amount |
|---|---|---|---|
| [ ] Yes [X] No<br>If yes, assign an Expenditure # and completes Itemization in Addendum R | | | $95.00 |

| | |
|---|---|
| **Total of Section R** | **$95.00** |

## IV. EXPENDITURES (Sectuibs N - S)

| NAME OF COMMITTEE (Provide Complete Name as Registered with Commission) | TYPE OF REPORT |
|---|---|
| Josh for CT | April 10 Filing - Amendment |

### S. Surplus Distribution of Equipment and Furniture

Name of Recipient

| Street Address | City | State | Zip Code | Original Purchase Amount of Item |
|---|---|---|---|---|
| | | | | |

Description of Item

| | |
|---|---|
| **Total of Section S** | |

| Section J4. ADDENDUM | |
|---|---|
| NAME OF COMMITTEE | TYPE OF REPORT |
| | |

**J4. In - Kind Donations Not Considered Contribution Associated with a House Party - Addendum**

| | |
|---|---|
| **Event #** | |
| Name of Candidate | |

| Section N. ADDENDUM | |
|---|---|
| NAME OF COMMITTEE | TYPE OF REPORT |
| | |

**N. Expenses Paid By Committee - Addendum**

| **Expenditure #** | **Amount of Expenditure** |
|---|---|
| Name of Candidate | Office Sought |

| Section P. ADDENDUM | |
|---|---|
| NAME OF COMMITTEE | TYPE OF REPORT |
| | |

**P. Expenses Incurred on Committee Credit Card - Addendum**

| **Expenditure #** | **Amount of Expenditure** |
|---|---|
| Name of Candidate | Office Sought |

| Section Q. ADDENDUM | |
|---|---|
| NAME OF COMMITTEE | TYPE OF REPORT |
| | |

| Q. Expenses Incurred by Committee but Not Paid During this Period - Addendum | |
|---|---|
| **Expenditure #** | **Amount of Expenditure** |
| | |

| Name of Candidate | Office Sought |
|---|---|
| | |

| Section R. ADDENDUM | |
|---|---|
| NAME OF COMMITTEE | TYPE OF REPORT |
| | |

| R. Itemization of Reimbursements and Secondary Payees - Addendum | |
|---|---|
| **Expenditure #** | **Amount of Expenditure** |
| | |

| Name of Candidate | Office Sought |
|---|---|
| | |