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

Electronic Filing

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COVER PAGE

1.NAME OF COMMITTEE	2. TYPE OF COMMITTEE
Butler 2026	[x] Candidate Committee [ ] Exploratory Committee

3. TREASURER NAME

First	MI	Last	Suffix
Alberto		**Negron**	

4. TREASURER ADDRESS

Street Address	City	State	Zip Code
27 Red Maple Ln	**Waterbury**	**CT**	**06704**

5. ELECTION DATE	6. OFFICE SOUGHT *(Complete only if Candidate Committee)*	7. DISTRICT NUMBER *(if applicable)*
11/03/2026	**State Representative**	**R072**

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

First	MI	Last	Suffix
Larry	**B**	**Butler**	

9. TYPE OF REPORT

July 10 Filing - Original

10. PERIOD COVERED

Beginning Date		Ending Date
04/01/2026	thru	**06/30/2026**

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	**Alberto Negron**	**07/10/2026 8:21:38AM**
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	
Butler 2026	July 10 Filing - Original	
	COLUMN A This Period	COLUMN B Aggregate
12. Balance on hand from day Committee was formed		**$0.00**
13. Balance on hand at the beginning of Reporting Period	**$3,443.74**	
14. Contributions received from Individuals (Section A and B)	**$4,474.00**	**$7,854.00**
15. Receipts from Other Committees (Sections C1 and C2)	**$0.00**	**$0.00**
16. Other Monetary Receipts (Section D through I)	**$0.00**	**$200.04**
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)	**$4,474.00**	**$8,054.04**
19. Subtotals (add totals in Line 13 + 18 in Column A and in lines 12 + 18 in Column B)	**$7,917.74**	**$8,054.04**
20. Expenses Paid by Committee (Section N)	**$950.59**	**$1,086.89**
21. Balance on hand at close of Reporting Period (Subtract line 20 from line 19 in both columns)	**$6,967.15**	**$6,967.15**
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)	**$0.00**	**$0.00**
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)	**$0.00**	**$0.00**
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
Butler 2026	July 10 Filing - Original

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 #
Scott	Charles		0038

Residential Street Address	City	State	Zip Code
5 Williamson Dr	Waterbury	CT	06710

Principal Occupation	Name of Employer
Sales	Tri-State 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: $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: 04/02/2026

Aggregate Contributions: $100.00

Last Name	First	MI	Contribution ID #
Glanzer	Theodore		0039

Residential Street Address	City	State	Zip Code
22A Mohawk Dr	Unionville	CT	06805

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: 04/08/2026

Aggregate Contributions: $25.00

Last Name	First	MI	Contribution ID #
Craft	Marci		0041

Residential Street Address	City	State	Zip Code
60 Evergreen St	Waterbury	CT	06708

Principal Occupation	Name of Employer
Special Education Teacher	Naugatuck 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: 04/09/2026

Aggregate Contributions: $5.00

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Butler 2026

TYPE OF REPORT: July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name	First	MI	Contribution ID #
Napoli	Susan		0040

Residential Street Address	City	State	Zip Code
70 Trumpet Brook Rd	Waterbury	CT	06708

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: 04/09/2026

Aggregate Contributions: $5.00

$5.00

Last Name	First	MI	Contribution ID #
Green	Charles		0044

Residential Street Address	City	State	Zip Code
196 De Fashion St	Plantsville	CT	06479

Principal Occupation: Attorney

Name of Employer: Division of Public Defenders

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

If yes, indicate which branch or branches 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: 04/09/2026

Aggregate Contributions: $50.00

$50.00

Last Name	First	MI	Contribution ID #
Tyson-Wood	Wendy		0043

Residential Street Address	City	State	Zip Code
124 Meriden Rd Apt B	Waterbury	CT	06705

Principal Occupation: Analyst

Name of Employer: 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:

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

If yes, list Event #:

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

Date Received: 04/09/2026

Aggregate Contributions: $5.00

$5.00

Last Name	First	MI	Contribution ID #
Gines	Daniel		0042

Residential Street Address	City	State	Zip Code
511 Scott Rd # 39	Waterbury	CT	06705

Principal Occupation: Union Carpenter

Name of Employer: Dominio 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:

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

If yes, list Event #:

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

Date Received: 04/09/2026

Aggregate Contributions: $5.00

$5.00

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Butler 2026

TYPE OF REPORT: July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name	First	MI	Contribution ID #
Brown	Elizabeth		0045

Residential Street Address	City	State	Zip Code
225 Alexander Ave	Waterbury	CT	06705

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: 04/10/2026

Aggregate Contributions: $25.00

Last Name	First	MI	Contribution ID #
DiTillo	Lori		0047

Residential Street Address	City	State	Zip Code
25 Shelter St # 1	Waterbury	CT	06705

Principal Occupation	Name of Employer
Teacher	City of Waterbury, 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: $5.00

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

If yes, list Event #:

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

Date Received: 04/11/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Pagano	Charles		0046

Residential Street Address	City	State	Zip Code
76 Santa Maria Dr	Waterbury	CT	06704

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: 04/11/2026

Aggregate Contributions: $340.00

Last Name	First	MI	Contribution ID #
DeCosmo	Carmine		0049

Residential Street Address	City	State	Zip Code
141 Greenmount Ter	Waterbury	CT	06708

Principal Occupation	Name of Employer
Manager	Tenanttracks

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

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

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

Amount of Contribution: $5.00

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

If yes, list Event #:

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

Date Received: 04/17/2026

Aggregate Contributions: $5.00

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Butler 2026

TYPE OF REPORT: July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name	First	MI	Contribution ID #
DeCosmo	AnnaMarie		0048

Residential Street Address	City	State	Zip Code
141 Greenmount Ter	Waterbury	CT	06708

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: 04/17/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Judquin	Levi		0050

Residential Street Address	City	State	Zip Code
199 Euclid Ave	Waterbury	CT	06710

Principal Occupation	Name of Employer
Real Estate	Brass Moon 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: $5.00

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

If yes, list Event #:

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

Date Received: 04/22/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Lamountain	Amanda	L	0113

Residential Street Address	City	State	Zip Code
776 Walnut Hill Rd	Thomaston	CT	06787

Principal Occupation	Name of Employer
Bartender	Winn Dixies Cafe

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

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

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

Amount of Contribution: $5.00

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

If yes, list Event #:

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

Date Received: 04/28/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Couture	Stephen		0112

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: $5.00

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

If yes, list Event #:

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

Date Received: 05/04/2026

Aggregate Contributions: $5.00

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Butler 2026

TYPE OF REPORT: July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name	First	MI	Contribution ID #
Sharkey	Brendan		0051

Residential Street Address	City	State	Zip Code
158 State St	Guilford	CT	06437

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: $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: 05/19/2026

Aggregate Contributions: $100.00

Last Name	First	MI	Contribution ID #
Del Bianco	Doreen		0053

Residential Street Address	City	State	Zip Code
36 Buckland St	Plantsville	CT	06479

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: 05/20/2026

Aggregate Contributions: $50.00

Last Name	First	MI	Contribution ID #
Johnson	Michael		0052

Residential Street Address	City	State	Zip Code
1418 Boulevard	West Hartford	CT	06119

Principal Occupation	Name of Employer
Lobbyist	Sullivan & Leshane

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

If yes, indicate which branch or branches 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: 05/20/2026

Aggregate Contributions: $100.00

Last Name	First	MI	Contribution ID #
Knight	Sherman	L	0105

Residential Street Address	City	State	Zip Code
163 Mark Ln	Waterbury	CT	06704

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: 05/20/2026

Aggregate Contributions: $5.00

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Butler 2026

TYPE OF REPORT: July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name	First	MI	Contribution ID #
Jones	Tamika	Y	0104

Residential Street Address	City	State	Zip Code
187 Capewell Ave	Waterbury	CT	06708

Principal Occupation	Name of Employer
PT Secretary	Zion Baptist Church

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

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

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

Amount of Contribution: $5.00

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

If yes, list Event #:

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

Date Received: 05/20/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Martinez	Denise		0102

Residential Street Address	City	State	Zip Code
925 Oronoke Rd	Waterbury	CT	06708

Principal Occupation	Name of Employer
Outreach	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: $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: 05/21/2026

Aggregate Contributions: $20.00

Last Name	First	MI	Contribution ID #
Brand	Katherine	V	0108

Residential Street Address	City	State	Zip Code
5 Middleway E	Waterbury	CT	06708

Principal Occupation	Name of Employer
Traveler	Medical 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: $5.00

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

If yes, list Event #:

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

Date Received: 05/21/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Drewry	Seth	J	0107

Residential Street Address	City	State	Zip Code
60 Evergreen St	Waterbury	CT	06708

Principal Occupation	Name of Employer
Program Specialist	City of Waterbury

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

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

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

Amount of Contribution: $5.00

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

If yes, list Event #:

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

Date Received: 05/21/2026

Aggregate Contributions: $5.00

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission)	TYPE OF REPORT
Butler 2026	July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name	First	MI	Contribution ID #
Ramos	Francisco	E	0106

Residential Street Address	City	State	Zip Code
92 Stiles St	Waterbury	CT	

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: $5.00

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

If yes, list Event #

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

Date Received: 05/21/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Amann	Jim		0054

Residential Street Address	City	State	Zip Code
515 Popes Island Rd	Milford	CT	06461

Principal Occupation	Name of Employer
Lobbyist	International Government 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: $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: 05/21/2026

Aggregate Contributions: $100.00

Last Name	First	MI	Contribution ID #
Couture	Brianna		0110

Residential Street Address	City	State	Zip Code
3 Lynns Corner Rd	Woodbury	CT	06798

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: $5.00

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

If yes, list Event #

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

Date Received: 05/22/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Couture	Edward	J	0109

Residential Street Address	City	State	Zip Code
175 Perkins Ave	Waterbury	CT	06704

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: 05/22/2026

Aggregate Contributions: $5.00

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Butler 2026

TYPE OF REPORT: July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name	First	MI	Contribution ID #
Harvey	Karen		0103

Residential Street Address	City	State	Zip Code
181 Atwood Ave	Waterbury	CT	06705

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: 05/23/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Hirst	Toni		0055

Residential Street Address	City	State	Zip Code
31 McDonald Ave	Waterbury	CT	06710

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 ☒ Credit/Debit Card ☐ Money Order

Date Received: 05/23/2026

Aggregate Contributions: $25.00

Last Name	First	MI	Contribution ID #
Couture	Alan	J	0111

Residential Street Address	City	State	Zip Code
175 Perkins Ave	Waterbury	CT	06704

Principal Occupation: Learning Ambassador

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: $5.00

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

If yes, list Event #:

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

Date Received: 05/23/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Ramlal	Banmatie		0057

Residential Street Address	City	State	Zip Code
42 Merry St # 1	Waterbury	CT	06706

Principal Occupation: Clinical Social Worker

Name of Employer: Wellmore Behavioral 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 ☒ Credit/Debit Card ☐ Money Order

Date Received: 05/26/2026

Aggregate Contributions: $5.00

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Butler 2026

TYPE OF REPORT: July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name	First	MI	Contribution ID #
Robinson	Catherine		0056

Residential Street Address	City	State	Zip Code
47 Four Mile Rd	West Hartford	CT	06107

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: $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: 05/26/2026

Aggregate Contributions: $100.00

Last Name	First	MI	Contribution ID #
Bonoff	Adam		0058

Residential Street Address	City	State	Zip Code
19 Gregory Farm Rd	Easton	CT	06612

Principal Occupation	Name of Employer
Investor	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: $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: 05/26/2026

Aggregate Contributions: $100.00

Last Name	First	MI	Contribution ID #
Pernerewski	Paul		0062

Residential Street Address	City	State	Zip Code
98 Stoddard Rd	Waterbury	CT	06708

Principal Occupation	Name of Employer
Mayor	City of Waterbury

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

If yes, indicate which branch or branches 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: 05/27/2026

Aggregate Contributions: $100.00

Last Name	First	MI	Contribution ID #
Pernerewski	Kim		0061

Residential Street Address	City	State	Zip Code
98 Stoddard Rd	Waterbury	CT	06708

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: 05/27/2026

Aggregate Contributions: $5.00

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Butler 2026

TYPE OF REPORT: July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name	First	MI	Contribution ID #
Cimini	Jacqueline		0060

Residential Street Address	City	State	Zip Code
71 Hunters Rdg	Rocky Hill	CT	06067

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: 05/27/2026

Aggregate Contributions: $100.00

Last Name	First	MI	Contribution ID #
Cimini	PJ		0059

Residential Street Address	City	State	Zip Code
71 Hunters Rdg	Rocky Hill	CT	06067

Principal Occupation	Name of Employer
Attorney/Lobbyist	Capitol Strategies 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: $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: 05/27/2026

Aggregate Contributions: $100.00

Last Name	First	MI	Contribution ID #
Gui	Geremia	H	0071

Residential Street Address	City	State	Zip Code
8 Ironwood Ln	West Hartford	CT	06117

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: $40.00

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

If yes, list Event #: 05282026P

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

Date Received: 05/28/2026

Aggregate Contributions: $40.00

Last Name	First	MI	Contribution ID #
Clary	James	F	0072

Residential Street Address	City	State	Zip Code
62 Woodland Ave	Waterbury	CT	06705

Principal Occupation	Name of Employer
Law Enforcement	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 #: 05282026P

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

Date Received: 05/28/2026

Aggregate Contributions: $100.00

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Butler 2026

TYPE OF REPORT: July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name	First	MI	Contribution ID #
Hadley	Karen A		0073

Residential Street Address	City	State	Zip Code
61 Ives St	Waterbury	CT	06704

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: $40.00

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

If yes, list Event # 05282026P

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

Date Received: 05/28/2026

Aggregate Contributions: $40.00

Last Name	First	MI	Contribution ID #
Bartkus	Erik	P	0074

Residential Street Address	City	State	Zip Code
243 Wilson St	Waterbury	CT	06708

Principal Occupation: Real Estate Investor

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: $5.00

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

If yes, list Event # 05282026P

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

Date Received: 05/28/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Napoli	Ronald		0075

Residential Street Address	City	State	Zip Code
70 Trumpet Brook Rd	Waterbury	CT	06708

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 # 05282026P

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

Date Received: 05/28/2026

Aggregate Contributions: $50.00

Last Name	First	MI	Contribution ID #
Door	Robert	G	0076

Residential Street Address	City	State	Zip Code
96 Windsor St	Waterbury	CT	06708

Principal Occupation: Clerk

Name of Employer: Credo HOC, 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 # 05282026P

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

Date Received: 05/28/2026

Aggregate Contributions: $25.00

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Butler 2026

TYPE OF REPORT: July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name	First	MI	Contribution ID #
Gottesdiener	Marc		0091

Residential Street Address	City	State	Zip Code
28 Ironwood Rd	West Hartford	CT	06117

Principal Occupation	Name of Employer
Real Estate Appraiser/Real Estate Investor	Marc Gottesdiener & Co, 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: $30.00

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

If yes, list Event # 05282026P

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

Date Received: 05/28/2026

Aggregate Contributions: $30.00

Last Name	First	MI	Contribution ID #
Bond	Joyce	E	0092

Residential Street Address	City	State	Zip Code
31 Idlewood Rd	Wolcott	CT	06716

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: $40.00

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

If yes, list Event # 05282026P

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

Date Received: 05/28/2026

Aggregate Contributions: $40.00

Last Name	First	MI	Contribution ID #
Coleman	Eugene		0093

Residential Street Address	City	State	Zip Code
43 Stonefield Dr	Waterbury	CT	06705

Principal Occupation	Name of Employer
Human Service Worker	Community Partners in 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: $40.00

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

If yes, list Event # 05282026P

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

Date Received: 05/28/2026

Aggregate Contributions: $40.00

Last Name	First	MI	Contribution ID #
Eason	Shirley	I	0118

Residential Street Address	City	State	Zip Code
23 Harris Cir Apt 1A	Waterbury	CT	06704

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: 05/28/2026

Aggregate Contributions: $10.00

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Butler 2026

TYPE OF REPORT: July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name	First	MI	Contribution ID #
Skabardonis	Christos		0131

Residential Street Address	City	State	Zip Code
578 South St	Middlebury	CT	06762

Principal Occupation	Name of Employer
General Manager	Pizza Castle

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

If yes, indicate which branch or branches 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: 05/28/2026

Aggregate Contributions: $340.00

Last Name	First	MI	Contribution ID #
Skabardonis	Panagiotis		0130

Residential Street Address	City	State	Zip Code
58 Marney Dr	Middlebury	CT	06762

Principal Occupation	Name of Employer
Owner	Pizza Castle

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

If yes, indicate which branch or branches 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: 05/28/2026

Aggregate Contributions: $340.00

Last Name	First	MI	Contribution ID #
Mucciacciaro	Michael		0173

Residential Street Address	City	State	Zip Code
8 Cornelius Ave	Waterbury	CT	06706

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: 05/28/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Gardino	Jerry	P	0172

Residential Street Address	City	State	Zip Code
1940 E Main St	Waterbury	CT	06705

Principal Occupation	Name of Employer
Estimater	Garmac

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

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

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

Amount of Contribution: $25.00

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

If yes, list Event #:

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

Date Received: 05/28/2026

Aggregate Contributions: $25.00

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Butler 2026

TYPE OF REPORT: July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name	First	MI	Contribution ID #
Diaz	Trayvon	A	0083

Residential Street Address	City	State	Zip Code
42 Linwood St	Waterbury	CT	06704

Principal Occupation: Mayoral Aide

Name of Employer: City of Waterbury

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

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

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

Amount of Contribution: $5.00

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

If yes, list Event # 05282026P

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

Date Received: 05/28/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Pierce	Diane	S	0081

Residential Street Address	City	State	Zip Code
95 Irene Ave	Waterbury	CT	06705

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: $40.00

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

If yes, list Event # 05282026P

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

Date Received: 05/28/2026

Aggregate Contributions: $40.00

Last Name	First	MI	Contribution ID #
Cook	Ryan		0082

Residential Street Address	City	State	Zip Code
26 Faragut St Apt 5	Waterbury	CT	06705

Principal Occupation: Caregiver

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: $5.00

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

If yes, list Event # 05282026P

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

Date Received: 05/28/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Traver	Rose	M	0078

Residential Street Address	City	State	Zip Code
1521 Hamilton Ave	Waterbury	CT	06706

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 # 05282026P

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

Date Received: 05/28/2026

Aggregate Contributions: $100.00

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Butler 2026

TYPE OF REPORT: July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name	First	MI	Contribution ID #
Souza	John	P	0077

Residential Street Address	City	State	Zip Code
8 Ironwood Ln	West Hartford	CT	06117

Principal Occupation: Property Management
Name of Employer: Souza and Sons

Is contributor a principal of a state contractor or prospective state contractor? ☐ Yes ☒ No
If yes, indicate which branch or branches 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 # 05282026P

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

Date Received: 05/28/2026

Aggregate Contributions: $100.00

Last Name	First	MI	Contribution ID #
Ramlal	Tara		0101

Residential Street Address	City	State	Zip Code
209 Forest Ave	Waterbury	CT	06708

Principal Occupation: Realtor
Name of Employer: Oxford 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: $100.00

Is this contribution associated with an event reported in Section J1? ☒ Yes ☐ No
If yes, list Event # 05282026P

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

Date Received: 05/28/2026

Aggregate Contributions: $100.00

Last Name	First	MI	Contribution ID #
Haberfeld	David	J	0100

Residential Street Address	City	State	Zip Code
110 Divinity St	Bristol	CT	06010

Principal Occupation: Real Estate
Name of Employer: Landlord 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 # 05282026P

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

Date Received: 05/28/2026

Aggregate Contributions: $100.00

Last Name	First	MI	Contribution ID #
Monroe	Webster	P	0099

Residential Street Address	City	State	Zip Code
9 Crown St	Waterbury	CT	06704

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 # 05282026P

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

Date Received: 05/28/2026

Aggregate Contributions: $50.00

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Butler 2026

TYPE OF REPORT: July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name	First	MI	Contribution ID #
Canady	Louis		0098

Residential Street Address	City	State	Zip Code
619 Cook St	Waterbury	CT	06710

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 # 05282026P

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

Date Received: 05/28/2026

Aggregate Contributions: $50.00

Last Name	First	MI	Contribution ID #
Trent	Craig	F	0097

Residential Street Address	City	State	Zip Code
183 Tudor St	Waterbury	CT	06704

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 # 05282026P

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

Date Received: 05/28/2026

Aggregate Contributions: $50.00

Last Name	First	MI	Contribution ID #
McInvale	Houston	H	0096

Residential Street Address	City	State	Zip Code
186 Oxford Dr	Middlefield	CT	06455

Principal Occupation: Propery 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 # 05282026P

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

Date Received: 05/28/2026

Aggregate Contributions: $50.00

Last Name	First	MI	Contribution ID #
Trawick	Susan		0095

Residential Street Address	City	State	Zip Code
12 Mountail Laurel Dr	Waterbury	CT	06704

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: $40.00

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

If yes, list Event # 05282026P

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

Date Received: 05/28/2026

Aggregate Contributions: $40.00

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Butler 2026

TYPE OF REPORT: July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name	First	MI	Contribution ID #
Haberfeld	Ciera	R	0094

Residential Street Address	City	State	Zip Code
110 Divinity St	Bristol	CT	06010

Principal Occupation	Name of Employer
Personal Assistant	David Haberfeld

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

If yes, indicate which branch or branches 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 # 05282026P

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

Date Received: 05/28/2026

Aggregate Contributions: $40.00

Last Name	First	MI	Contribution ID #
Pittman	Dwayne	M	0079

Residential Street Address	City	State	Zip Code
78 Beech St	Waterbury	CT	06704

Principal Occupation	Name of Employer
Assistant Financial Director	Hart United, 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 # 05282026P

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

Date Received: 05/28/2026

Aggregate Contributions: $50.00

Last Name	First	MI	Contribution ID #
Pierce	Terrance	L	0080

Residential Street Address	City	State	Zip Code
95 Irene Ave	Waterbury	CT	06705

Principal Occupation	Name of Employer
Bus Operator	CT 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: $40.00

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

If yes, list Event # 05282026P

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

Date Received: 05/28/2026

Aggregate Contributions: $40.00

Last Name	First	MI	Contribution ID #
Riddick Barron	Linda	D	0084

Residential Street Address	City	State	Zip Code
195 Beecher Ave	Waterbury	CT	06705

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 # 05282026P

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

Date Received: 05/28/2026

Aggregate Contributions: $5.00

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Butler 2026

TYPE OF REPORT: July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name	First	MI	Contribution ID #
Martinez-McCarthy	Sandra		0085

Residential Street Address	City	State	Zip Code
29 E Liberty St	Waterbury	CT	06706

Principal Occupation: Paralegal

Name of Employer: Law Office of Brian J. Mongelluzzo

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

If yes, indicate which branch or branches 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 # 05282026P

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

Date Received: 05/28/2026

Aggregate Contributions: $6.00

Last Name	First	MI	Contribution ID #
Taylor	Saquon		0086

Residential Street Address	City	State	Zip Code
71 Short St	Waterbury	CT	06704

Principal Occupation:

Name of Employer: Bantam

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

If yes, indicate which branch or branches 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 # 05282026P

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

Date Received: 05/28/2026

Aggregate Contributions: $10.00

Last Name	First	MI	Contribution ID #
Radden	Tracy		0087

Residential Street Address	City	State	Zip Code
85 Forest Ridge Rd	Waterbury	CT	06708

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 # 05282026P

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

Date Received: 05/28/2026

Aggregate Contributions: $15.00

Last Name	First	MI	Contribution ID #
Roman	Rafael Feliciano		0090

Residential Street Address	City	State	Zip Code
15 Mortin St	Waterbury	CT	06706

Principal Occupation:

Name of Employer: Tempus AI

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

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

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

Amount of Contribution: $23.00

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

If yes, list Event # 05282026P

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

Date Received: 05/28/2026

Aggregate Contributions: $23.00

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Butler 2026

TYPE OF REPORT: July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name	First	MI	Contribution ID #
Highsmith	Carolyn	A	0088

Residential Street Address	City	State	Zip Code
222 Judith Ln # 1	Waterbury	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 # 05282026P

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

Date Received: 05/28/2026

Aggregate Contributions: $20.00

Last Name	First	MI	Contribution ID #
Pierce	Oscar		0089

Residential Street Address	City	State	Zip Code
312 Hillandale Blvd	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: $20.00

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

If yes, list Event # 05282026P

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

Date Received: 05/28/2026

Aggregate Contributions: $20.00

Last Name	First	MI	Contribution ID #
Mosley	Maurice	B	0127

Residential Street Address	City	State	Zip Code
66 Redcoat Rd	Waterbury	CT	06704

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: 05/29/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Hartley	James	E	0135

Residential Street Address	City	State	Zip Code
206 Columbia Blvd	Waterbury	CT	06708

Principal Occupation: Attorney

Name of Employer: Drubner Hartley

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

If yes, indicate which branch or branches 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: 05/30/2026

Aggregate Contributions: $100.00

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Butler 2026

TYPE OF REPORT: July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name	First	MI	Contribution ID #
Davis Jr	John	W	0125

Residential Street Address	City	State	Zip Code
690 Willow St	Waterbury	CT	06710

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: 05/30/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Davis	Ada	M	0124

Residential Street Address	City	State	Zip Code
690 Willow St	Waterbury	CT	06710

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: 05/30/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Petteway	Joyce		0132

Residential Street Address	City	State	Zip Code
1680 Meriden Rd Apt 18	Waterbury	CT	06705

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: 05/30/2026

Aggregate Contributions: $75.00

Last Name	First	MI	Contribution ID #
Munoz	Karelys	J	0171

Residential Street Address	City	State	Zip Code
52 Deerwood Ln Unit 10	Waterbury	CT	06704

Principal Occupation:

Name of Employer: The Health Collective

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

If yes, indicate which branch or branches 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: 05/30/2026

Aggregate Contributions: $10.00

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Butler 2026

TYPE OF REPORT: July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name	First	MI	Contribution ID #
Blake	Ian		0063

Residential Street Address	City	State	Zip Code
92 Birch St	Waterbury	CT	06704

Principal Occupation	Name of Employer
Project Manager	Nest

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

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

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

Amount of Contribution: $50.00

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

If yes, list Event #:

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

Date Received: 05/30/2026

Aggregate Contributions: $50.00

Last Name	First	MI	Contribution ID #
Reeder	Amy	K	0123

Residential Street Address	City	State	Zip Code
91 Sumac St	Waterbury	CT	06704

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: 05/31/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Nesta	Lex	R	0134

Residential Street Address	City	State	Zip Code
124 Maybrook Rd	Waterbury	CT	06708

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: 06/01/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Nesta	Laura	J	0133

Residential Street Address	City	State	Zip Code
124 Maybrook Rd	Waterbury	CT	06708

Principal Occupation	Name of Employer
Therapist	Self Employed Bluebird Counseling, 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: 06/01/2026

Aggregate Contributions: $5.00

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Butler 2026

TYPE OF REPORT: July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name	First	MI	Contribution ID #
Coleman	Eugene		0126

Residential Street Address	City	State	Zip Code
43 Stonefield Dr	Waterbury	CT	06705

Principal Occupation	Name of Employer
Human Service Worker	Community Partners in 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: $5.00

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

If yes, list Event #:

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

Date Received: 06/01/2026

Aggregate Contributions: $45.00

Last Name	First	MI	Contribution ID #
Chapman	Linda	A	0122

Residential Street Address	City	State	Zip Code
46 Stonehollow Rd	Waterbury	CT	06704

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: 06/01/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Chapman	Troy	E	0121

Residential Street Address	City	State	Zip Code
46 Stonehollow Rd	Waterbury	CT	06704

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: 06/01/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Perez	Krystal		0067

Residential Street Address	City	State	Zip Code
92 Woodlawn Ter	Waterbury	CT	06710

Principal Occupation	Name of Employer
Data 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: $5.00

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

If yes, list Event #:

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

Date Received: 06/01/2026

Aggregate Contributions: $5.00

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Butler 2026

TYPE OF REPORT: July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name	First	MI	Contribution ID #
Batista	Hitomi		0066

Residential Street Address	City	State	Zip Code
54 Hillside Ave	Waterbury	CT	06710

Principal Occupation	Name of Employer
Owner	Titanium Real Estate 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: 06/01/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
DeCosmo	Jonathan		0065

Residential Street Address	City	State	Zip Code
141 Greenmount Ter	Waterbury	CT	06708

Principal Occupation	Name of Employer
Energy Accessor	EMA

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

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

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

Amount of Contribution: $5.00

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

If yes, list Event #:

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

Date Received: 06/01/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Batista	Michael		0064

Residential Street Address	City	State	Zip Code
54 Hillside Ave	Waterbury	CT	06710

Principal Occupation	Name of Employer
Developer	Elite Realty 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: 06/01/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Blash	Winnona		0120

Residential Street Address	City	State	Zip Code
366 Beth Ln	Waterbury	CT	06705

Principal Occupation	Name of Employer
	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: 06/01/2026

Aggregate Contributions: $5.00

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Butler 2026

TYPE OF REPORT: July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name	First	MI	Contribution ID #
Elliot	Robert	L	0119

Residential Street Address	City	State	Zip Code
366 Beth Ln	Waterbury	CT	06705

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
06/01/2026	$5.00	$5.00

Last Name	First	MI	Contribution ID #
Green	Charles	E	0129

Residential Street Address	City	State	Zip Code
196 De Fashion St	Plantsville	CT	06479

Principal Occupation	Name of Employer
Attorney	Division of Public Defenders

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

If yes, indicate which branch or branches 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
06/02/2026	$90.00	$40.00

Last Name	First	MI	Contribution ID #
Conway	Stephen		0068

Residential Street Address	City	State	Zip Code
1136 Hamilton Ave	Waterbury	CT	06706

Principal Occupation	Name of Employer
Maintainer	State of CT DOT

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

If yes, indicate which branch or branches 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
06/04/2026	$5.00	$5.00

Last Name	First	MI	Contribution ID #
Schwartz	Darren		0069

Residential Street Address	City	State	Zip Code
530 Country Club Rd	Waterbury	CT	06708

Principal Occupation	Name of Employer
Educator	City of Waterbury

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

If yes, indicate which branch or branches 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
06/05/2026	$50.00	$50.00

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Butler 2026

TYPE OF REPORT: July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name	First	MI	Contribution ID #
Rucker	Pamela	S	0170

Residential Street Address	City	State	Zip Code
64 Hidden Pond Dr	Waterbury	CT	06704

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: $5.00

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

If yes, list Event #:

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

Date Received: 06/05/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Rucker	Anthony	S	0169

Residential Street Address	City	State	Zip Code
64 Hidden Pond Dr	Waterbury	CT	06704

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: 06/05/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Rascoe	Bertha	S	0168

Residential Street Address	City	State	Zip Code
12 Putnman St	Waterbury	CT	06704

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: 06/06/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Ellis	Charlotte	J	0167

Residential Street Address	City	State	Zip Code
100 Jefferson Sq # 2H	Waterbury	CT	06706

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: 06/06/2026

Aggregate Contributions: $5.00

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Butler 2026

TYPE OF REPORT: July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name	First	MI	Contribution ID #
Hemley	Gloria		0117

Residential Street Address	City	State	Zip Code
6 Fulton St Fl 2	Waterbury	CT	06708

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: 06/07/2026

Aggregate Contributions: $15.00

Last Name	First	MI	Contribution ID #
Williams	Loretta		0114

Residential Street Address	City	State	Zip Code
45 Normandy Dr	Waterbury	CT	06705

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: 06/09/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Alves	Julio		0070

Residential Street Address	City	State	Zip Code
83 Mildred Ave	Waterbury	CT	06708

Principal Occupation	Name of Employer
Solar	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: 06/09/2026

Aggregate Contributions: $50.00

Last Name	First	MI	Contribution ID #
Velez	Rosa	H	0116

Residential Street Address	City	State	Zip Code
27 Myrtle Ave	Waterbury	CT	06708

Principal Occupation	Name of Employer
Coordinator	Willo Plaza

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

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

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

Amount of Contribution: $5.00

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

If yes, list Event #:

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

Date Received: 06/10/2026

Aggregate Contributions: $5.00

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Butler 2026

TYPE OF REPORT: July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name	First	MI	Contribution ID #
Pierce	Melvin		0115

Residential Street Address	City	State	Zip Code
29 Wayridge Cir	Waterbury	CT	06708

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: 06/11/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Dalton	Michael	J	0128

Residential Street Address	City	State	Zip Code
29 Preston Ter Apt 4	Waterbury	CT	06705

Principal Occupation	Name of Employer
City Clerk	City of Waterbury

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

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

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

Amount of Contribution: $50.00

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

If yes, list Event #:

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

Date Received: 06/12/2026

Aggregate Contributions: $50.00

Last Name	First	MI	Contribution ID #
Williams	Monica		0166

Residential Street Address	City	State	Zip Code
56 Whitewood Rd	Waterbury	CT	06708

Principal Occupation	Name of Employer
Paraprofessional	City of Waterbury

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

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

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

Amount of Contribution: $5.00

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

If yes, list Event #:

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

Date Received: 06/13/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Beamon	Paul	W	0165

Residential Street Address	City	State	Zip Code
35 Calumet St	Waterbury	CT	06710

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: 06/13/2026

Aggregate Contributions: $5.00

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Butler 2026

TYPE OF REPORT: July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name	First	MI	Contribution ID #
Hepburn	Barbara		0164

Residential Street Address	City	State	Zip Code
22 Violet St	Waterbury	CT	06704

Principal Occupation:

Name of Employer: Mattatuck 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: $5.00

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

If yes, list Event #:

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

Date Received: 06/13/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Hadley	Gaylynn	L	0163

Residential Street Address	City	State	Zip Code
48 Ives St	Waterbury	CT	06704

Principal Occupation: Behavior Tech

Name of Employer: City of Waterbury

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

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

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

Amount of Contribution: $5.00

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

If yes, list Event #:

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

Date Received: 06/13/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Hadley	Geoffrey	A	0162

Residential Street Address	City	State	Zip Code
61 Ives St	Waterbury	CT	06704

Principal Occupation: Executive Chef

Name of Employer: Marriott Hotels

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

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

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

Amount of Contribution: $5.00

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

If yes, list Event #:

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

Date Received: 06/17/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Overton	Margaret	E	0161

Residential Street Address	City	State	Zip Code
59 Ives St	Waterbury	CT	06704

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: 06/17/2026

Aggregate Contributions: $5.00

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Butler 2026

TYPE OF REPORT: July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name	First	MI	Contribution ID #
Overton	Lavera	q	0160

Residential Street Address	City	State	Zip Code
59 Ives St	Waterbury	CT	06704

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: 06/17/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Chaim	Golish		0145

Residential Street Address	City	State	Zip Code
157 Blue Ride Drive Ext Unit A	Waterbury	CT	06704

Principal Occupation	Name of Employer
Contractor	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: 06/19/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Aponte	Josephine		0144

Residential Street Address	City	State	Zip Code
140 Fulkerson Dr	Waterbury	CT	06708

Principal Occupation	Name of Employer
Property Manager	Genesis Management

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

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

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

Amount of Contribution: $5.00

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

If yes, list Event #:

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

Date Received: 06/19/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Behrend	Esther		0143

Residential Street Address	City	State	Zip Code
139 Columbia Blvd	Waterbury	CT	06710

Principal Occupation	Name of Employer
School Teacher	Congregation K'tana of Waterbury

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

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

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

Amount of Contribution: $5.00

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

If yes, list Event #:

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

Date Received: 06/19/2026

Aggregate Contributions: $5.00

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Butler 2026

TYPE OF REPORT: July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name	First	MI	Contribution ID #
Friedman	Jeffrey		0142

Residential Street Address	City	State	Zip Code
1589 Hamilton Ave	Waterbury	CT	06706

Principal Occupation	Name of Employer
Property Management	Jeffrey Friedman

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

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

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

Amount of Contribution: $5.00

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

If yes, list Event #:

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

Date Received: 06/19/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Fisch	Isaac		0141

Residential Street Address	City	State	Zip Code
104 Norben Rd	Monsey	NY	10952

Principal Occupation	Name of Employer
Salesman	Ike's

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

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

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

Amount of Contribution: $25.00

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

If yes, list Event #:

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

Date Received: 06/19/2026

Aggregate Contributions: $25.00

Last Name	First	MI	Contribution ID #
Lieber	Bracha		0140

Residential Street Address	City	State	Zip Code
62 Columbia Blvd	Waterbury	CT	06710

Principal Occupation	Name of Employer
Interior Designer	Belso Design and Build

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

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

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

Amount of Contribution: $5.00

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

If yes, list Event #:

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

Date Received: 06/19/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Behrend	Mayer		0139

Residential Street Address	City	State	Zip Code
139 Columbia Blvd	Waterbury	CT	06710

Principal Occupation	Name of Employer
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: $5.00

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

If yes, list Event #:

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

Date Received: 06/19/2026

Aggregate Contributions: $5.00

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Butler 2026

TYPE OF REPORT: July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name	First	MI	Contribution ID #
Netkin	Ronit		0138

Residential Street Address	City	State	Zip Code
168 Blueridge Drive Ext	Waterbury	CT	06704

Principal Occupation	Name of Employer
Accountant	RES

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

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

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

Amount of Contribution: $5.00

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

If yes, list Event #:

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

Date Received: 06/19/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Shapiro	Yaakov		0137

Residential Street Address	City	State	Zip Code
111 Euclid Ave	Waterbury	CT	06710

Principal Occupation	Name of Employer
Property Manager	CK Management, 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: 06/19/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Netkin	Eran		0136

Residential Street Address	City	State	Zip Code
168 Blueridge Drive Ext	Waterbury	CT	06704

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: 06/19/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Brecher	Simon		0151

Residential Street Address	City	State	Zip Code
58 Columbia Blvd	Waterbury	CT	06710

Principal Occupation	Name of Employer
Member	Skyline Property Management

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

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

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

Amount of Contribution: $5.00

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

If yes, list Event #:

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

Date Received: 06/19/2026

Aggregate Contributions: $5.00

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Butler 2026

TYPE OF REPORT: July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name	First	MI	Contribution ID #
Batsheva Gross	Rivka		0150

Residential Street Address	City	State	Zip Code
39 Roseland Ave	Waterbury	CT	06710

Principal Occupation	Name of Employer
Teacher	Metzuyan Daycare

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

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

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

Amount of Contribution: $5.00

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

If yes, list Event #:

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

Date Received	Aggregate Contributions
06/19/2026	$5.00

Last Name	First	MI	Contribution ID #
Gross	Shay		0149

Residential Street Address	City	State	Zip Code
32 Roseland Ave	Waterbury	CT	06710

Principal Occupation	Name of Employer
Sales	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	Aggregate Contributions
06/19/2026	$5.00

Last Name	First	MI	Contribution ID #
Mosley	Sean		0148

Residential Street Address	City	State	Zip Code
134 Haddad Rd	Waterbury	CT	06708

Principal Occupation	Name of Employer
Educator	City of Waterbury

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

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

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

Amount of Contribution: $5.00

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

If yes, list Event #:

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

Date Received	Aggregate Contributions
06/19/2026	$5.00

Last Name	First	MI	Contribution ID #
Glazer	Menachem		0147

Residential Street Address	City	State	Zip Code
27 McDonald Ave	Waterbury	CT	06710

Principal Occupation	Name of Employer
CEO	Glazer 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: $5.00

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

If yes, list Event #:

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

Date Received	Aggregate Contributions
06/19/2026	$5.00

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Butler 2026

TYPE OF REPORT: July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name	First	MI	Contribution ID #
Levenberg	Mosh		0146

Residential Street Address	City	State	Zip Code
48 Olympia Ln	Waterbury	CT	06704

Principal Occupation	Name of Employer
Real Estate	Euro Estates, 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: 06/19/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Weisz	Israel		0152

Residential Street Address	City	State	Zip Code
52 Tower Rd	Waterbury	CT	06710

Principal Occupation	Name of Employer
Real Estate	PropertyWise

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

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

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

Amount of Contribution: $5.00

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

If yes, list Event #:

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

Date Received: 06/21/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Lawrence	Earl	W	0156

Residential Street Address	City	State	Zip Code
148 Tudor St	Waterbury	CT	06704

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: 06/22/2026

Aggregate Contributions: $10.00

Last Name	First	MI	Contribution ID #
Vickman	Reuven		0153

Residential Street Address	City	State	Zip Code
24 Cables Ave	Waterbury	CT	06710

Principal Occupation	Name of Employer
Construction	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: 06/22/2026

Aggregate Contributions: $5.00

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission): Butler 2026

TYPE OF REPORT: July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name	First	MI	Contribution ID #
Thompson	Chanita		0159

Residential Street Address	City	State	Zip Code
40 Maple St	Waterbury	CT	06702

Principal Occupation	Name of Employer
Clergy	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: 06/22/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Thompson	Frank	D	0157

Residential Street Address	City	State	Zip Code
596 Woodtick Rd # 2	Waterbury	CT	06705

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: 06/23/2026

Aggregate Contributions: $5.00

Last Name	First	MI	Contribution ID #
Summa	Joseph		0154

Residential Street Address	City	State	Zip Code
14 Morris Rd	Prospect	CT	06712

Principal Occupation	Name of Employer
Attorney	Summa & Ryan, 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: $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: 06/24/2026

Aggregate Contributions: $100.00

Last Name	First	MI	Contribution ID #
Curry	Eva		0158

Residential Street Address	City	State	Zip Code
26 Hidden Pond Dr	Waterbury	CT	06704

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: 06/25/2026

Aggregate Contributions: $5.00

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission)	TYPE OF REPORT
Butler 2026	July 10 Filing - Original

B. Itemized Contributions from Individuals

Last Name	First	MI	Contribution ID #
Morris	Bruce		0155

Residential Street Address	City	State	Zip Code
315 Ely Ave	Norwalk	CT	06854

Principal Occupation	Name of Employer
Lobbyist	Ticketnetwork

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

If yes, indicate which branch or branches 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: 06/30/2026

Aggregate Contributions: $100.00

Total of Section B	**$4,474.00**
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) *(Total on Line 14, Column A of Summary Page)*	**$4,474.00**

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission)	TYPE OF REPORT
Butler 2026	July 10 Filing - Original

C1. Contributions from Other Committees

Name of Committee	Name of Treasurer

Address	Is this contribution associated with an event reported in Section J1? Yes No 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
Butler 2026	July 10 Filing - Original

C2. Reimbursements or Surplus Distributions from other Committees

Name of Committee			Name of Treasurer	
Address			Date Received	Amount of Receipt
City	State	Zip Code	Payment Type Reimbursement for shared expense Surplus distribution from exploratory committee	
Expenditure #	Description			
			Total of Section C2	

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE	TYPE OF REPORT
Butler 2026	July 10 Filing - Original

D. Loans Received this Period

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

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE	TYPE OF REPORT
Butler 2026	July 10 Filing - Original

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
Butler 2026	July 10 Filing - Original

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
Butler 2026	July 10 Filing - Original

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
Butler 2026	July 10 Filing - Original

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
Butler 2026	July 10 Filing - Original

J1. Event Information

Event # / Date of Event	Letter	Description	Was this a fundraising event?
05/28/2026	P	Dinner Event	[X] Yes [ ] No

Location: Street Address	City	State	Zip Code
143 Chase Ave	Waterbury	CT	06704

Was this event hosted at a personal residence?	[ ] Yes [X] 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 [X] 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 [X] 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
Butler 2026	July 10 Filing - Original

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
Butler 2026	July 10 Filing - Original

J4. In-Kind Donations Not Considered Contributions Associated with a House Party

Name of Host	Is this event supporting more than one candidate? Yes No If yes, complete Itemization in Addendum J4

Street Address	City	State	Zip Code

Description of Donation			Fair Market Value of Donation
Event #	Aggregate value of this Event - all hosts	Aggregate value of all Events - this host/candidate	

Total of Section J4	

III. NONMONETARY RECEIPTS (Sections K - L)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission)	TYPE OF REPORT
Butler 2026	July 10 Filing - Original

K. In-Kind Contributions

Name

Street Address | City | State | Zip Code

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

If yes, list Event#

Description of In-Kind Contribution

Is Contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes / 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

Fair Market Value of this Contribution

Type of Contributor: Individual / Committee / Sole Proprietorship

Date Received

Aggregate contributions

Total of Section K

III. Non Monetary Receipts (Sections K - L)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission)	TYPE OF REPORT
Butler 2026	July 10 Filing - Original

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
Butler 2026	July 10 Filing - Original

N. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
Webster Bank	04/30/2026	☐ Check # ☐ Debit Card ☒ EFT

Street Address	City	State	Zip Code
5 Wigwam Ave	Waterbury	CT	06704

Purpose of Expendit	Description	Amount
BNK	Maintenance Fee	

Is this expenditure coordinated with another candidate for which reimbursement is sought?	Expenditure # (if applicable)	Event #	Amount
☐ Yes ☐ No If yes, assign an Expenditure # and complete Itemization in Addendum N			$25.00

Name of Payee	Date of Payment	Method of Payment
USPS	05/11/2026	☒ Check # 102 ☐ Debit Card ☐ EFT

Street Address	City	State	Zip Code
41 Wigwam Ave	Waterbury	CT	06704

Purpose of Expendit	Description	Amount
POST	400 Stamps	

Is this expenditure coordinated with another candidate for which reimbursement is sought?	Expenditure # (if applicable)	Event #	Amount
☐ Yes ☐ No If yes, assign an Expenditure # and complete Itemization in Addendum N			$312.00

Name of Payee	Date of Payment	Method of Payment
Dora Bennett	05/28/2026	☒ Check # 103 ☐ Debit Card ☐ EFT

Street Address	City	State	Zip Code
140 Citizens Ave	Waterbury	CT	06704

Purpose of Expendit	Description	Amount
WAGE	Graphic Design	

Is this expenditure coordinated with another candidate for which reimbursement is sought?	Expenditure # (if applicable)	Event #	Amount
☐ Yes ☐ No 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
Butler 2026	July 10 Filing - Original

N. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
Pizza Castle	05/28/2026	[X] Check # 104 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
143 Chase Ave	Waterbury	CT	06704

Purpose of Expendit	Description	Amount
FNDR *	Food	

Is this expenditure coordinated with another candidate for which reimbursement is sought?	Expenditure # (if applicable)	Event #	Amount
[ ] Yes [ ] No If yes, assign an Expenditure # and complete Itemization in Addendum N		05282026P	$394.69

Name of Payee	Date of Payment	Method of Payment
Anedot	05/28/2026	[ ] Check # [ ] Debit Card [X] EFT

Street Address	City	State	Zip Code
1201 W Peachtree St NW Ste 2625	Atlanta	GA	

Purpose of Expendit	Description	Amount
WEB	Anedot Fees	

Is this expenditure coordinated with another candidate for which reimbursement is sought?	Expenditure # (if applicable)	Event #	Amount
[ ] Yes [ ] No If yes, assign an Expenditure # and complete Itemization in Addendum N			$118.90

Total of Section N	**$950.59**

IV. EXPENDITURES (Sections N - S)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission)	TYPE OF REPORT
	July 10 Filing - Original

O. Expenses Paid By Candidate

Name of Payee (Name of vendor who candidate paid directly)			Date of Payment	Is Reimbursement Claimed? Yes No
Street Address	City	State	Zip Code	**Amount**
Purpose of Expenditure (by code)	Description		Event #	

Total of Section O

IV. EXPENDITURES (Sections N - S)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission)	TYPE OF REPORT
Butler 2026	July 10 Filing - Original

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 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
Butler 2026	July 10 Filing - Original

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 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
Butler 2026	July 10 Filing - Original

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: Check # Debit Card EFT

Name of Vendor Paid by Committee Worker/Consultant

Street Address of Vendor	City	State	Zip Code

Purpose of Expenditure (by code)	Description

Is this expenditure coordinated with another candidate for which reimbursement is sought? Yes No If yes, assign an Expenditure # and completes Itemization in Addendum R	Expenditure # (if applicable)	Event #	Amount

Total of Section R	

IV. EXPENDITURES (Sectuibs N - S)

NAME OF COMMITTEE (Provide Complete Name as Registered with Commission)	TYPE OF REPORT
Butler 2026	July 10 Filing - Original

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