



COVER PAGE

1. NAME OF COMMITTEE		2. ELECTION/REFERENDUM DATE	
Connecticut for the Future			
3. TREASURER NAME			
First Andrew	MI I	Last Grossman	Suffix
4. TREASURER ADDRESS			
Street Address 17 Hop Holw	City Simsbury	State CT	Zip Code 06070
5. TYPE OF REPORT			
24 Hour Independent Expenditure - Primary - Original			
6. PERIOD COVERED			
Beginning Date 07/12/2026		Ending Date thru 07/30/2026	
7. CERTIFICATION			
☒ I hereby certify and state, under penalties of false statement, that all of the information set forth on this Itemized Campaign Finance Disclosure Statement for the period covered is true, accurate and complete, and further that any expenditures and obligations disclosed were made independent of any other individual, political committee, party committee, or candidate committee, or agent thereof. Furthermore, no contribution or covered transfer disclosed herein was solicited, accepted, or received from a foreign national. Electronic Filing TREASURER OR DEPUTY TREASURER (SIGNATURE) Andrew Grossman PRINT NAME OF SIGNER 07/31/2026 6:08:26PM DATE CERTIFIED (mm/dd/yyyy)			
A Person who is found to have knowingly and willfully violated any provisions of the campaign finance statutes faces a civil penalty or imprisonment or both.			

SEEC FORM 40

Itemized Campaign Finance Disclosure Statement
 For Independent Expenditure Political Committees
 CONNECTICUT STATE ELECTIONS ENFORCEMENT COMMISSION
 Revised May 2016

SUMMARY PAGE TOTALS

NAME OF COMMITTEE (As reported on Page 1, Line 1)	TYPE OF REPORT	
Connecticut for the Future	24 Hour Independent Expenditure - Primary - Original	
	COLUMN A This Period	COLUMN B Aggregate
8. Balance on hand January 1 of current year for Ongoing and Party Committees OR Balance on hand from day Committee was formed for all other Committees		\$0.00
9. Balance on hand at the beginning of Reporting Period	\$0.00	
10. Monetary Receipts (Section A and B)	\$150,000.00	\$150,000.00
11. Loans (Section C)	\$5.00	\$5.00
12. Total Monetary Receipts (add totals for lines 10 through 11)	\$150,005.00	\$150,005.00
13. Subtotals (add totals in Line 9 + 12 in Column A and in Line 8 + 12 in Column B)	\$150,005.00	\$150,005.00
14. Expenses Paid by Committee (Section G)	\$40,996.26	\$40,996.26
15. Balance on hand at close of Reporting Period (Subtract line 14 from line 13 in both columns)	\$109,008.74	\$109,008.74
16. In-Kind Contributions Received (Section D)	\$0.00	\$0.00
17. Refundable Deposit to Telephone Company (Section E)	\$0.00	\$0.00
18. Beginning Loan Balance	\$0.00	
18a. + Loans Received (Section C)	\$5.00	\$5.00
18b. + Interest and Penalties on Loan	\$0.00	\$0.00
18c. - Payments on Loan	\$0.00	\$0.00
18d. Total Outstanding Loan Amount	\$5.00	
19. Expenses Incurred on Committee Credit Card (Section H)	\$0.00	\$0.00
20. Expenses Incurred by Committee During this Period but Not Paid (Section I)	\$0.00	
20a. Total Outstanding Expenses Incurred by Committee still Unpaid (Section I)	\$0.00	

I. RECEIPTS (Section A-E)

NAME OF COMMITTEE (As reported on Page 1, Line 1)	TYPE OF REPORT
Connecticut for the Future	24 Hour Independent Expenditure - Primary - Origin

A. Total Contributions from Small Individual Contributors-Received this Period ONLY (See instructions for definition of Small Individual Contributor)	Subtotal Section A	\$0.00
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B. Itemized Monetary Receipts

Name Government That Works PAC				
Street Address 611 Pennsylvania Ave SE Ste 143		City Washington	State DC	Zip Code 20003
Principal Occupation (if applicable)		Name of Employer (if applicable)		
Source Type : ☐ Individual/Sole Proprietorship ☐ Committee ☒ Other ☐ Bank ☐ Affiliated Business Entity ☐ Affiliated Organization		Type of Receipt : ☒ Contribution ☐ Reimbursement for Shared Expense ☐ Bank Interest ☐ Surplus Distribution ☐ Contribution from Affiliated Treasury ☐ Miscellaneous		
Is this receipt associated with an event reported in Section F?	☐ Yes ☒ No	Method of Receipt ☐ Cash ☐ Check ☒ EFT ☐ Credit/Debit Card ☐ Payroll Deduction ☐ Money Order		Aggregate Receipts \$150,000.00
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	☐ Yes ☒ No	Is contributor a state contractor, prospective state contractor or principal thereof? ☐ Yes ☒ No If yes, indicate which branch or branches of government the contract is with: ☐ Executive ☐ Legislative		Amount Received
Description (if applicable)		Date Received 07/30/2026		\$150,000.00
Total of Section B				\$150,000.00
TOTAL OF ALL RECEIPTS (Sections A & B) (Total on Line 10 of Summary Page)				\$150,000.00

I. RECEIPTS (Section A-E)

NAME OF COMMITTEE (As reported on Page 1, Line 1)	TYPE OF REPORT
Connecticut for the Future	24 Hour Independent Expenditure - Primary - Original

C. Loans Received this Period

Name of Lender Andrew Grossman		Source of Loan: ☐ Bank ☒ Individual ☐ Committee ☐ Other		Date of Receipt 07/30/2026
Street Address 17 Hop Holw		City Simsbury	State CT	Zip Code 06070
Is there a cosigner or Guarantor of this loan?				☐ Yes ☒ No
Name of Cosigner/Guarantor (if applicable)				Amount Received
Street Address		City	State	Zip Code
				\$5.00
Total of Section C				\$5.00

I. RECEIPTS (Sections A-E)

NAME OF COMMITTEE (As reported on Page 1, Line 1)

TYPE OF REPORT

Connecticut for the Future

24 Hour Independent Expenditure - Primary - Original

D. In-Kind Contributions

Name

Street Address

City

State

Zip Code

Type of Contributor:

Individual / Sole Proprietorship

Committee

Date Received

Aggregate Receipts

Other

Affiliated Business Entity

Affiliated Organization

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

Yes

No

Is contributor a state contractor, prospective state contractor or principal thereof?

Yes

No

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

Executive

Legislative

Fair Market Value of this Contribution

Is this contribution associated with an event reported in Section F?

Yes

No

Description of In-Kind Contribution

If yes, list Event#

Total of Section D**I. Receipts (Sections A - E)**

NAME OF COMMITTEE

TYPE OF REPORT

Connecticut for the Future

24 Hour Independent Expenditure - Primary - Original

E. 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 E

II. EVENT ACTIVITY (Sections F)

NAME OF COMMITTEE (As reported on Page 1, Line 1)

TYPE OF REPORT

Connecticut for the Future

24 Hour Independent Expenditure - Primary - Original

F. Event Information

Event # Date of Event	Letter	Description	Was this a fundraising event? Yes No	
Location: Street Address		City	State	Zip Code

III. EXPENDITURES (Sections G - J)

NAME OF COMMITTEE (As reported on Page 1, Line 1)	TYPE OF REPORT
Connecticut for the Future	24 Hour Independent Expenditure - Primary - Original
G. Expenses Paid By Committee	

Name of Payee FOGLAMP		Date of Payment 07/30/2026		Method of Payment ☐ Check # ☐ Debit Card ☒ EFT	
Street Address 650 Massachusetts Ave .		City Washington		State DC Zip Code 20002	
If an Independent Expenditure, is it on behalf of more than one candidate? ☐ Yes ☒ No If yes, complete Section G. Addendum		Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum) Digital Ad Buy (paid for using contribution on Sch. B)			Event #
Name of Candidate (only complete if Independent Expenditure is on behalf of ONE candidate - if more than one, Complete Section G. Addendum) Eli Sabin				Office Sought State Representative ☒ Supported ☐ Opposed	
Does Expenditure have more than one expenditure code? IF yes, complete Section G. Addendum ☐ Yes ☒ No	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code) A-OTH	Expenditure Number Section Number G	Associated with Referendum? ☐ Yes ☒ No	Amount \$20,000.00	
Is this expenditure payment for an expense previously reported as an expense incurred in Section I ☐ Yes ☒ No	Expenditure Number Section Number I	If yes, what is the expenditure number of the expense previously incurred?	☐ Final or Full Payment ☐ Partial with Balance Owing		

Name of Payee FOGLAMP		Date of Payment 07/30/2026		Method of Payment ☐ Check # ☐ Debit Card ☒ EFT	
Street Address 650 Massachusetts Ave .		City Washington		State DC Zip Code 20002	
If an Independent Expenditure, is it on behalf of more than one candidate? ☒ Yes ☐ No If yes, complete Section G. Addendum		Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum) Ad Production (paid for using contribution on Sch. B)			Event #
Name of Candidate (only complete if Independent Expenditure is on behalf of ONE candidate - if more than one, Complete Section G. Addendum)				Office Sought ☐ Supported ☐ Opposed	
Does Expenditure have more than one expenditure code? IF yes, complete Section G. Addendum ☐ Yes ☒ No	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code) A-OTH	Expenditure Number Section Number G 630029	Associated with Referendum? ☐ Yes ☒ No	Amount \$5,000.00	
Is this expenditure payment for an expense previously reported as an expense incurred in Section I ☐ Yes ☒ No	Expenditure Number Section Number I	If yes, what is the expenditure number of the expense previously incurred?	☐ Final or Full Payment ☐ Partial with Balance Owing		

III. EXPENDITURES (Sections G - J)

NAME OF COMMITTEE (As reported on Page 1, Line 1)	TYPE OF REPORT
Connecticut for the Future	24 Hour Independent Expenditure - Primary - Original
G. Expenses Paid By Committee	

Name of Payee Resonance Campaigns		Date of Payment 07/30/2026		Method of Payment ☐ Check # ☐ Debit Card ☒ EFT	
Street Address 1319 F St NW Ste 301 PMB 220		City Washington		State DC	Zip Code 20004
If an Independent Expenditure, is it on behalf of more than one candidate? ☐ Yes ☒ No If yes, complete Section G. Addendum		Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum) Direct Mail Ad (paid for using contribution on Sch. B)			Event #
Name of Candidate (only complete if Independent Expenditure is on behalf of ONE candidate - if more than one, Complete Section G. Addendum) Toni Lombardi				Office Sought State Representative	☒ Supported ☐ Opposed
Does Expenditure have more than one expenditure code? IF yes, complete Section G. Addendum ☐ Yes ☒ No	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code) A-DM	Expenditure Number Section G Number	Associated with Referendum? ☐ Yes ☒ No	Amount \$2,055.60	
Is this expenditure payment for an expense previously reported as an expense incurred in Section I ☐ Yes ☒ No	Expenditure Number If yes, what is the expenditure number of the expense previously incurred? Section I Number	☐ Final or Full Payment ☐ Partial with Balance Owing			

Name of Payee Resonance Campaigns		Date of Payment 07/30/2026		Method of Payment ☐ Check # ☐ Debit Card ☒ EFT	
Street Address 1319 F St NW Ste 301 PMB 220		City Washington		State DC	Zip Code 20004
If an Independent Expenditure, is it on behalf of more than one candidate? ☐ Yes ☒ No If yes, complete Section G. Addendum		Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum) Direct Mail Ad (paid for using contribution on Sch. B)			Event #
Name of Candidate (only complete if Independent Expenditure is on behalf of ONE candidate - if more than one, Complete Section G. Addendum) Toni Lombardi				Office Sought State Representative	☒ Supported ☐ Opposed
Does Expenditure have more than one expenditure code? IF yes, complete Section G. Addendum ☐ Yes ☒ No	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code) A-DM	Expenditure Number Section G Number	Associated with Referendum? ☐ Yes ☒ No	Amount \$1,609.82	
Is this expenditure payment for an expense previously reported as an expense incurred in Section I ☐ Yes ☒ No	Expenditure Number If yes, what is the expenditure number of the expense previously incurred? Section I Number	☐ Final or Full Payment ☐ Partial with Balance Owing			

III. EXPENDITURES (Sections G - J)

NAME OF COMMITTEE (As reported on Page 1, Line 1)	TYPE OF REPORT
Connecticut for the Future	24 Hour Independent Expenditure - Primary - Original
G. Expenses Paid By Committee	

Name of Payee Resonance Campaigns		Date of Payment 07/30/2026	Method of Payment ☐ Check # ☐ Debit Card ☒ EFT	
Street Address 1319 F St NW Ste 301 PMB 220		City Washington		State DC
Zip Code 20004				
If an Independent Expenditure, is it on behalf of more than one candidate? ☐ Yes ☒ No If yes, complete Section G. Addendum		Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum) Direct Mail Ad (paid for using contribution on Sch. B)		Event #
Name of Candidate (only complete if Independent Expenditure is on behalf of ONE candidate - if more than one, Complete Section G. Addendum) Maryam Khan			Office Sought State Senator ☒ Supported ☐ Opposed	
Does Expenditure have more than one expenditure code? IF yes, complete Section G. Addendum ☐ Yes ☒ No	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code) A-DM	Expenditure Number Section G Number	Associated with Referendum? ☐ Yes ☒ No	
Amount \$2,055.60				
Is this expenditure payment for an expense previously reported as an expense incurred in Section I ☐ Yes ☒ No		Expenditure Number If yes, what is the expenditure number of the expense previously incurred? Section I Number		☐ Final or Full Payment ☐ Partial with Balance Owing

Name of Payee Resonance Campaigns		Date of Payment 07/30/2026	Method of Payment ☐ Check # ☐ Debit Card ☒ EFT	
Street Address 1319 F St NW Ste 301 PMB 220		City Washington		State DC
Zip Code 20004				
If an Independent Expenditure, is it on behalf of more than one candidate? ☐ Yes ☒ No If yes, complete Section G. Addendum		Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum) Direct Mail Ad (paid for using contribution on Sch. B)		Event #
Name of Candidate (only complete if Independent Expenditure is on behalf of ONE candidate - if more than one, Complete Section G. Addendum) Maryam Khan			Office Sought State Senator ☒ Supported ☐ Opposed	
Does Expenditure have more than one expenditure code? IF yes, complete Section G. Addendum ☐ Yes ☒ No	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code) A-DM	Expenditure Number Section G Number	Associated with Referendum? ☐ Yes ☒ No	
Amount \$1,609.82				
Is this expenditure payment for an expense previously reported as an expense incurred in Section I ☐ Yes ☒ No		Expenditure Number If yes, what is the expenditure number of the expense previously incurred? Section I Number		☐ Final or Full Payment ☐ Partial with Balance Owing

III. EXPENDITURES (Sections G - J)

NAME OF COMMITTEE (As reported on Page 1, Line 1)	TYPE OF REPORT
Connecticut for the Future	24 Hour Independent Expenditure - Primary - Original
G. Expenses Paid By Committee	

Name of Payee Resonance Campaigns		Date of Payment 07/30/2026	Method of Payment ☐ Check # ☐ Debit Card ☒ EFT	
Street Address 1319 F St NW Ste 301 PMB 220		City Washington		State DC
Zip Code 20004				
If an Independent Expenditure, is it on behalf of more than one candidate? ☐ Yes ☒ No If yes, complete Section G. Addendum		Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum) Direct Mail Ad (paid for using contribution on Sch. B)		Event #
Name of Candidate (only complete if Independent Expenditure is on behalf of ONE candidate - if more than one, Complete Section G. Addendum) Jack Fazzino			Office Sought State Senator ☒ Supported ☐ Opposed	
Does Expenditure have more than one expenditure code? IF yes, complete Section G. Addendum ☐ Yes ☒ No	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code) A-DM	Expenditure Number Section G Number	Associated with Referendum? ☐ Yes ☒ No	
Amount \$2,055.60				
Is this expenditure payment for an expense previously reported as an expense incurred in Section I ☐ Yes ☒ No		Expenditure Number Section I Number		☐ Final or Full Payment ☐ Partial with Balance Owing

Name of Payee Resonance Campaigns		Date of Payment 07/30/2026	Method of Payment ☐ Check # ☐ Debit Card ☒ EFT	
Street Address 1319 F St NW Ste 301 PMB 220		City Washington		State DC
Zip Code 20004				
If an Independent Expenditure, is it on behalf of more than one candidate? ☐ Yes ☒ No If yes, complete Section G. Addendum		Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum) Direct Mail Ad (paid for using contribution on Sch. B)		Event #
Name of Candidate (only complete if Independent Expenditure is on behalf of ONE candidate - if more than one, Complete Section G. Addendum) Jack Fazzino			Office Sought State Senator ☒ Supported ☐ Opposed	
Does Expenditure have more than one expenditure code? IF yes, complete Section G. Addendum ☐ Yes ☒ No	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code) A-DM	Expenditure Number Section G Number	Associated with Referendum? ☐ Yes ☒ No	
Amount \$1,609.82				
Is this expenditure payment for an expense previously reported as an expense incurred in Section I ☐ Yes ☒ No		Expenditure Number Section I Number		☐ Final or Full Payment ☐ Partial with Balance Owing

III. EXPENDITURES (Sections G - J)

NAME OF COMMITTEE (As reported on Page 1, Line 1)

TYPE OF REPORT

Connecticut for the Future

24 Hour Independent Expenditure - Primary - Original

G. Expenses Paid By Committee

Name of Payee

FOGLAMP

Date of Payment

07/30/2026

Method of Payment

☐

Check #

☐

Debit Card

☒

EFT

Street Address

650 Massachusetts Ave .

City

Washington

State

DC

Zip Code

20002

If an Independent Expenditure, is it on behalf of more than one candidate?

☒

Yes

☐

No

If yes, complete Section G. Addendum

Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)

Digital Ad Buy (paid for using contribution on Sch. B)

Event #

Name of Candidate (only complete if Independent Expenditure is on behalf of ONE candidate - if more than one, Complete Section G. Addendum)

Office Sought

☐

Supported

☐

Opposed

Does Expenditure have more than one expenditure code? IF yes, complete Section G. Addendum

☐

Yes

☒

No

Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)

A-OTH

Expenditure Number

Section

Number

G

630036

Associated with Referendum?

☐

Yes

☒

No

Amount

\$5,000.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I

☐

Yes

☒

No

Expenditure Number

If yes, what is the expenditure number of the expense previously incurred?

Section

Number

I

☐

Final or Full Payment

☐

Partial with Balance Owing

Total of Section G**\$40,996.26**

III. EXPENDITURES (Sections G - J)

NAME OF COMMITTEE (As reported on Page 1, Line 1)				TYPE OF REPORT	
Connecticut for the Future				24 Hour Independent Expenditure - Primary - Original	
H. Expenses Incurred on Committee Credit Card					
Name of Issuing Institution			Type of Credit Card:		
			☐ Visa ☐ Master Card ☐ Discover ☐ American Express ☐ Other		
Name of Vendor, Person or Entity				Date of Transaction	
Street Address		City		State	Zip Code
If an Independent Expenditure, is it on behalf of more than one candidate? Yes No If yes, complete Section H. Addendum		Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section H. Addendum)		Event #	
Name of Candidate (only complete if Independent Expenditure is on behalf of ONE candidate - if more than one, Complete Section H. Addendum)			Office Sought		Supported
					Opposed
Does Expenditure have more than one expenditure code? IF yes, complete Section H. Addendum	Purpose of Expenditure (by code)	Expenditure Number		Associated with Referendum?	Amount
Yes No		Section	Number	Yes No	
		H			
Total of Section H					

III. EXPENDITURES (Sections G - J)

NAME OF COMMITTEE (As reported on Page 1, Line 1)				TYPE OF REPORT	
Connecticut for the Future				24 Hour Independent Expenditure - Primary - Original	
I. Expenses Incurred By Committee but Not Paid During this Period					
Name of Creditor				Date Incurred	
Street Address			City		State
					Zip Code
If an Independent Expenditure, is it on behalf of more than one candidate? Yes No If yes, complete Section I. Addendum		Description			Event #
Name of Candidate (only complete if Independent Expenditure is on behalf of ONE candidate - if more than one, Complete Section I. Addendum)			Office Sought		Supported Opposed
Does Expenditure have more than one expenditure code? IF yes, complete Section I. Addendum Yes No	Purpose of Expenditure (by code)	Expenditure Number Section Number I		Associated with Referendum? Yes No	Amount
Total of Section I					

III. EXPENDITURES (Sections G - J)

NAME OF COMMITTEE (As reported on Page 1, Line 1)				TYPE OF REPORT	
Connecticut for the Future				24 Hour Independent Expenditure - Primary - Original	
J. Itemization of Reimbursements and Secondary Payees					
Last Name of Worker/Consultant		First	MI	Date of Payment to Vendor, Person or Entity	
Name of Vendor, Person or Entity Paid by Committee Worker/Consultant			Payment to Reimburse Committee Worker/Consultant as reported in Section G		
			Check #	Debit Card	EFT
Street Address of Vendor, Person or Entity Paid by Committee Worker/Consultant		City		State	Zip Code
If an Independent Expenditure, is it on behalf of more than one Candidate? Yes No If yes, complete Section J. Addendum		Description		Event #	
Name of Candidate (only complete if Independent Expenditure is on behalf of ONE candidate - if more than one, Complete Section J. Addendum)			Office Sought		Supported Opposed
Does Expenditure have more than one expenditure code? IF yes, complete Section J. Addendum Yes No	Purpose of Expenditure (by code)	Expenditure Number Section Number J		Associated with Referendum? Yes No	Amount
Total of Section J					

IV. DISCLOSURE IN COMMUNICATIONS (Sections K - L)

NAME OF COMMITTEE (As reported on Page 1, Line 1)				TYPE OF REPORT	
Connecticut for the Future				24 Hour Independent Expenditure - Primary - Original	
K. Five Largest Contributions Disclosed in Communication					
Source of Contribution - Name of Person Making Contribution Government That Works PAC				Expenditure Number Section Number G	
Address of Person Making Contribution - City 611 Pennsylvania Ave SE Ste 143 Washington				State DC	Zip Code 20003
Source of Contribution - Name of Individual who Signed Check or Authorized Contribution Chris Koob, Treasurer				Amount \$150,000.00	

IV. DISCLOSURE IN COMMUNICATIONS (Sections K - L)

NAME OF COMMITTEE (As reported on Page 1, Line 1)

TYPE OF REPORT

Connecticut for the Future

24 Hour Independent Expenditure -
Primary - Original**L. "Nesting Dolls" Provision for Top 5 Contributions Disclosed in Communication**

Name of Person Receiving Covered Transfer as Reported in Section K

Government That Works PAC

Expenditure Number

Section

Number

G

Name of Person Making Covered Transfer to Person Reported in Section K

Civitech, PBC

Address of Person Making Covered Transfer - City (if known)

2105 E Mlk Jr Blvd Ste 359

Austin

State

TX

Zip Code

78702

Name of Person Receiving Covered Transfer as Reported in Section K

Government That Works PAC

Expenditure Number

Section

Number

G

Name of Person Making Covered Transfer to Person Reported in Section K

America Votes

Address of Person Making Covered Transfer - City (if known)

1155 Connecticut Ave NW Ste 600

Washington

State

DC

Zip Code

20036

Name of Person Receiving Covered Transfer as Reported in Section K

Government That Works PAC

Expenditure Number

Section

Number

G

Name of Person Making Covered Transfer to Person Reported in Section K

Institute for Responsive Government

Address of Person Making Covered Transfer - City (if known)

1440 W Taylor St Ste 950

Chicago

State

IL

Zip Code

60607

Name of Person Receiving Covered Transfer as Reported in Section K		Expenditure Number	
Government That Works PAC		Section	Number
		G	
Name of Person Making Covered Transfer to Person Reported in Section K			
Sixteen Thirty Fund			
Address of Person Making Covered Transfer - City (if known)		State	Zip Code
1828 L St NW Ste 400-B		Washington	DC 20036

Name of Person Receiving Covered Transfer as Reported in Section K		Expenditure Number	
Government That Works PAC		Section	Number
		G	
Name of Person Making Covered Transfer to Person Reported in Section K			
Contours Inc.			
Address of Person Making Covered Transfer - City (if known)		State	Zip Code
1151 Walker Rd # 596		Dover	DE 19904

Section G. ADDENDUM

NAME OF COMMITTEE (As reported on Page 1, Line 1)	TYPE OF REPORT
Connecticut for the Future	24 Hour Independent Expenditure - Primary - Original

G. Expenses Paid By Committee - Addendum

Expenditure Number as reported in Section G	Total Amount of the Expenditure
G 630029	\$5,000.00

Description Ad Production			Expenditure Code A-OTH
Name of Candidate Toni Lombardi	Office Sought (if applicable) State Representative	☒ Supported ☐ Opposed	Amount Allocated \$75.00

Description Ad Production			Expenditure Code A-OTH
Name of Candidate Jack Fazzino	Office Sought (if applicable) State Senator	☒ Supported ☐ Opposed	Amount Allocated \$375.00

Description Ad Production			Expenditure Code A-OTH
Name of Candidate Maryam Khan	Office Sought (if applicable) State Senator	☒ Supported ☐ Opposed	Amount Allocated \$475.00

Description Ad Production			Expenditure Code A-OTH
Name of Candidate Eli Sabin	Office Sought (if applicable) State Representative	☒ Supported ☐ Opposed	Amount Allocated \$3,975.00

Description Ad Production			Expenditure Code A-OTH
Name of Candidate Olaleye Onikuyide	Office Sought (if applicable) State Representative	☒ Supported ☐ Opposed	Amount Allocated \$50.00

Description			Expenditure Code
Ad Production			A-OTH
Name of Candidate	Office Sought (if applicable)	☒ Supported	Amount Allocated
Ethan Werstler	State Senator	☐ Opposed	
			\$50.00

Expenditure Number as reported in Section G	Total Amount of the Expenditure
G 630036	\$5,000.00

Description			Expenditure Code
Digital Ad Buy			A-OTH
Name of Candidate	Office Sought (if applicable)	☒ Supported	Amount Allocated
Toni Lombardi	State Representative	☐ Opposed	
			\$500.00

Description			Expenditure Code
Digital Ad Buy			A-OTH
Name of Candidate	Office Sought (if applicable)	☒ Supported	Amount Allocated
Jack Fazzino	State Senator	☐ Opposed	\$2,000.00

Description			Expenditure Code
Digital Ad Buy			A-OTH
Name of Candidate	Office Sought (if applicable)	☒ Supported	Amount Allocated
Maryam Khan	State Senator	☐ Opposed	\$2,500.00

Section H. ADDENDUM

NAME OF COMMITTEE (As reported on Page 1, Line 1)	TYPE OF REPORT

H. Expenses Incurred on Committee Credit Card - Addendum

Expenditure Number as reported in Section H	Total Amount of Expenditure
H	

Description	Expenditure Code		
Name of Candidate	Office Sought (if applicable)	Supported Opposed	Amount Allocated

Section I. ADDENDUM

NAME OF COMMITTEE (As reported on Page 1, Line 1)	TYPE OF REPORT

I. Expenses Incurred by Committee but Not Paid During this Period - Addendum

Expenditure Number as reported in Section I	Total Amount of the Expenditure
I	

Description	Expenditure Code		
Name of Candidate	Office Sought (if applicable)	Supported Opposed	Amount Allocated

Section J. ADDENDUM

NAME OF COMMITTEE (As reported on Page 1, Line 1)	TYPE OF REPORT

J. Itemization of Reimbursements and Secondary Payees - Addendum

Expenditure Number as reported in Section J J	Total Amount of the Expenditure

Description		Expenditure Code	
Name of Candidate	Office Sought (if applicable)	Supported Opposed	Amount Allocated