SEEC FORM 40

Itemized Campaign Finance Disclosure Statement

For Independent Expenditure Political Committees

CONNECTICUT STATE ELECTIONS ENFORCEMENT COMMISSION

Revised 2024

Electronic Filing

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COVER PAGE

1. NAME OF COMMITTEE	2. ELECTION/REFERENDUM DATE
Impact CT, Inc.	

3. TREASURER NAME

First	MI	Last	Suffix
John		**Motley**	

4. TREASURER ADDRESS

Street Address	City	State	Zip Code
39 Canterbury Rd	**Hamden**	**CT**	**06514-2016**

5. TYPE OF REPORT

July 10 Filing - Original

6. PERIOD COVERED

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

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	**Eric Duey**	**07/10/2026 4:25:58PM**
TREASURER OR DEPUTY TREASURER (SIGNATURE)	PRINT NAME OF SIGNER	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	
Impact CT, Inc.	**July 10 Filing - 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		**$239,589.13**
9. Balance on hand at the beginning of Reporting Period	**$339,596.09**	
10. Monetary Receipts (Section A and B)	**$400,000.00**	**$875,000.00**
11. Loans (Section C)	**$0.00**	**$0.00**
12. Total Monetary Receipts (add totals for lines 10 through 11)	**$400,000.00**	**$875,000.00**
13. Subtotals (add totals in Line 9 + 12 in Column A and in Line 8 + 12 in Column B)	**$739,596.09**	**$1,114,589.13**
14. Expenses Paid by Committee (Section G)	**$348,850.23**	**$723,843.27**
15. Balance on hand at close of Reporting Period (Subtract line 14 from line 13 in both columns)	**$390,745.86**	**$390,745.86**
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)	**$0.00**	**$0.00**
18b. + Interest and Penalties on Loan	**$0.00**	**$0.00**
18c. - Payments on Loan	**$0.00**	**$0.00**
18d. Total Outstanding Loan Amount	**$0.00**	
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)	**$16,530.71**	
20a. Total Outstanding Expenses Incurred by Committee still Unpaid (Section I)	**$17,030.71**	

I. RECEIPTS (Section A-E)

NAME OF COMMITTEE (As reported on Page 1, Line 1)	TYPE OF REPORT
Impact CT, Inc.	July 10 Filing - Original

A. Total Contributions from Small Individual Contributors-Received this Period ONLY — **Subtotal Section A** **$0.00**

(See instructions for definition of Small Individual Contributor)

B. Itemized Monetary Receipts

Name: Stephen Mandel Jr.

Street Address: PO Box 4298 | City: Greenwich | State: CT | Zip Code: 06830

Principal Occupation (if applicable): Founder | Name of Employer (if applicable): Lone Pine Capital

Source Type : [X] Individual/Sole Proprietorship [ ] Committee [ ] Other [ ] Bank [ ] Affiliated Business Entity [ ] Affiliated Organization

Type of Receipt : [X] 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 [X] No — If yes, list Event #

Method of Receipt: [ ] Cash [ ] Check [X] EFT [ ] Credit/Debit Card [ ] Payroll Deduction [ ] Money Order

Aggregate Receipts: $3,943,005.00

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? [ ] Yes [X] No

Is contributor a state contractor, prospective state contractor or principal thereof ? [ ] Yes [X] No

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

Description (if applicable):

Date Received: 04/09/2026

Amount Received: $400,000.00

Total of Section B	**$400,000.00**
TOTAL OF ALL RECEIPTS (Sections A & B) *(Total on Line 10 of Summary Page)*	**$400,000.00**

I. RECEIPTS (Section A-E)

NAME OF COMMITTEE (As reported on Page 1, Line 1)	TYPE OF REPORT
Impact CT, Inc.	July 10 Filing - Original

C. Loans Received this Period

Name of Lender | Source of Loan: Bank Individual Committee Other | Date of Receipt

Street Address | City | State | Zip Code | Is there a cosigner or Guarantor of this loan? Yes No

Name of Cosigner/Guarantor (if applicable) | **Amount Received**

Street Address | City | State | Zip Code

Total of Section C	

I. RECEIPTS (Sections A-E)

NAME OF COMMITTEE (As reported on Page 1, Line 1)	TYPE OF REPORT
Impact CT, Inc.	July 10 Filing - Original

D. In-Kind Contributions

Name

Street Address	City	State	Zip Code

Type of Contributor: Individual / Sole Proprietorship Committee Other Affiliated Business Entity Affiliated Organization

Date Received

Aggregate Receipts

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

If yes, list Event#

Description of In-Kind Contribution

Total of Section D

I. Receipts (Sections A - E

NAME OF COMMITTEE	TYPE OF REPORT
Impact CT, Inc.	July 10 Filing - 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
Impact CT, Inc.	July 10 Filing - 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
Impact CT, Inc.	July 10 Filing - Original

G. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
Google LLC	04/02/2026	[ ] Check # [X] Debit Card [ ] EFT

Street Address	City	State	Zip Code
1600 Amphitheatre Pkwy	Mountain View	CA	94043

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Software	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Number	Associated with Referendum?	Amount
[ ] Yes [X] No	Misc *	G		[ ] Yes [X] No	$140.38

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Number	
[ ] Yes [X] No		I		[ ] Final or Full Payment [ ] Partial with Balance Owing

Name of Payee	Date of Payment	Method of Payment
Roy Occhiogrosso LLC	04/07/2026	[ ] Check # [ ] Debit Card [X] EFT

Street Address	City	State	Zip Code
25 Park Rd	Simsbury	CT	06070

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$7,976.25

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Number	
[ ] Yes [X] No		I		[ ] 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
Impact CT, Inc.	July 10 Filing - Original

G. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
Roy Occhiogrosso LLC	04/07/2026	☐ Check # ☐ Debit Card ☒ EFT

Street Address	City	State	Zip Code
25 Park Rd	Simsbury	CT	06070

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
☐ Yes ☐ No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Number	Associated with Referendum?	Amount
☐ Yes ☒ No	CNSLT	G		☐ Yes ☒ No	$7,500.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Number	
☐ Yes ☒ No		I		☐ Final or Full Payment ☐ Partial with Balance Owing

Name of Payee	Date of Payment	Method of Payment
Windsor Federal Savings	04/09/2026	☐ Check # ☐ Debit Card ☒ EFT

Street Address	City	State	Zip Code
250 Broad St	Windsor	CT	06095

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
☐ Yes ☐ No If yes, complete Section G. Addendum	Wire Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Number	Associated with Referendum?	Amount
☐ Yes ☒ No	BNK	G		☐ Yes ☒ No	$15.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Number	
☐ Yes ☒ No		I		☐ 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
Impact CT, Inc.	July 10 Filing - Original

G. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
Peralta Design	04/10/2026	[ ] Check # [X] Debit Card [ ] EFT

Street Address	City	State	Zip Code
2 Enterprise Dr Ste 418	Shelton	CT	06484

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$499.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred? Expenditure Number Section	Expenditure Number Number	[ ] Final or Full Payment [ ] Partial with Balance Owing
[ ] Yes [X] No	I		

Name of Payee	Date of Payment	Method of Payment
Campos Hampton LLC	04/14/2026	[X] Check # 1304 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
71 Tavern Rock Rd	Stratford	CT	06614

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$30,000.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred? Expenditure Number Section	Expenditure Number Number	[ ] Final or Full Payment [ ] Partial with Balance Owing
[ ] Yes [X] No	I		

III. EXPENDITURES (Sections G - J)

NAME OF COMMITTEE (As reported on Page 1, Line 1)	TYPE OF REPORT
Impact CT, Inc.	July 10 Filing - Original

G. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
Campos Hampton LLC	04/14/2026	[X] Check # 1335 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
71 Tavern Rock Rd	Stratford	CT	06614

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$25,000.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Expenditure Number Number	[ ] Final or Full Payment [ ] Partial with Balance Owing
[ ] Yes [X] No		I		

Name of Payee	Date of Payment	Method of Payment
Zoom	04/14/2026	[ ] Check # [X] Debit Card [ ] EFT

Street Address	City	State	Zip Code
55 Almaden Blvd Fl 6	San Jose	CA	95113

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Software	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
[ ] Yes [X] No	Misc *	G		[ ] Yes [X] No	$33.98

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Expenditure Number Number	[ ] Final or Full Payment [ ] Partial with Balance Owing
[ ] Yes [X] No		I		

III. EXPENDITURES (Sections G - J)

NAME OF COMMITTEE (As reported on Page 1, Line 1)	TYPE OF REPORT
Impact CT, Inc.	July 10 Filing - Original

G. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
Hardt Consulting, LLC	04/16/2026	[X] Check # 1346 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
405 Robin Ct	Cheshire	CT	06410

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$8,276.25

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Expenditure Number Number	
[ ] Yes [X] No		I		[ ] Final or Full Payment [ ] Partial with Balance Owing

Name of Payee	Date of Payment	Method of Payment
Hardt Consulting, LLC	04/16/2026	[X] Check # 1347 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
405 Robin Ct	Cheshire	CT	06410

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$8,276.25

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Expenditure Number Number	
[ ] Yes [X] No		I		[ ] 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
Impact CT, Inc.	July 10 Filing - Original

G. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
Jesse Phillips	04/16/2026	[X] Check # 1339 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
517 Shelton Ave Fl 2	Hamden	CT	

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$5,000.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Number	
[ ] Yes [X] No		I		[ ] Final or Full Payment [ ] Partial with Balance Owing

Name of Payee	Date of Payment	Method of Payment
PromoSuns Inc.	04/16/2026	[X] Check # 1344 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
28-14 31st St # 603	Astoria	NY	11102

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Campaign Paraphernalia	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Number	Associated with Referendum?	Amount
[ ] Yes [X] No	Gift *	G		[ ] Yes [X] No	$1,199.25

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Number	
[ ] Yes [X] No		I		[ ] 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
Impact CT, Inc.	July 10 Filing - Original

G. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
Blackburn & Donnelly LLC	04/16/2026	[X] Check # 1352 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
2 Concorde Way # 3C	Windsor Locks	CT	06096

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Legal	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$6,596.95

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Number	
[ ] Yes [X] No		I		[ ] Final or Full Payment [ ] Partial with Balance Owing

Name of Payee	Date of Payment	Method of Payment
Canva.com	04/16/2026	[ ] Check # [X] Debit Card [ ] EFT

Street Address	City	State	Zip Code
3212 E Cesar Chavez St	Austin	TX	78702

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Software	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Number	Associated with Referendum?	Amount
[ ] Yes [X] No	Misc *	G		[ ] Yes [X] No	$85.08

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Number	
[ ] Yes [X] No		I		[ ] 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
Impact CT, Inc.	July 10 Filing - Original

G. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
GODADDY.COM	04/16/2026	[ ] Check # [X] Debit Card [ ] EFT

Street Address	City	State	Zip Code
2155 E Godaddy Way	Tempe	AZ	

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Web Hosting Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
[ ] Yes [X] No	WEB	G		[ ] Yes [X] No	$46.38

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Expenditure Number Number	[ ] Final or Full Payment [ ] Partial with Balance Owing
[ ] Yes [X] No		I		

Name of Payee	Date of Payment	Method of Payment
OpenAI, LLC	04/16/2026	[ ] Check # [X] Debit Card [ ] EFT

Street Address	City	State	Zip Code
1455 3rd St	San Francisco	CA	94158

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Software	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
[ ] Yes [X] No	Misc *	G		[ ] Yes [X] No	$72.90

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Expenditure Number Number	[ ] Final or Full Payment [ ] Partial with Balance Owing
[ ] Yes [X] No		I		

III. EXPENDITURES (Sections G - J)

NAME OF COMMITTEE (As reported on Page 1, Line 1)	TYPE OF REPORT
Impact CT, Inc.	July 10 Filing - Original

G. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
Wolters Kluwer	04/17/2026	[X] Check # 1342 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
28 Liberty St	New York	NY	10005

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Registration for Service Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
[ ] Yes [X] No	Misc *	G		[ ] Yes [X] No	$152.48

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Expenditure Number Number	
[ ] Yes [X] No		I		[ ] Final or Full Payment [ ] Partial with Balance Owing

Name of Payee	Date of Payment	Method of Payment
The Field LLC	04/20/2026	[X] Check # 1351 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
517 Shelton Ave Fl 2	Hamden	CT	

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$6,000.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Expenditure Number Number	
[ ] Yes [X] No		I		[ ] 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
Impact CT, Inc.	July 10 Filing - Original

G. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
Ojakian Consulting LLC	04/20/2026	[X] Check # 1350 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
7 Buckingham Way	Rancho Mirage	CA	92270

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$5,000.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Expenditure Number Number	[ ] Final or Full Payment [ ] Partial with Balance Owing
[ ] Yes [X] No		I		

Name of Payee	Date of Payment	Method of Payment
Spanish American Merchants Association, Inc.	04/23/2026	[X] Check # 1343 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
95 Park St Fl 3	Hartford	CT	06106

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Advertisement	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
[ ] Yes [X] No	A-MAG	G		[ ] Yes [X] No	$800.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Expenditure Number Number	[ ] Final or Full Payment [ ] Partial with Balance Owing
[ ] Yes [X] No		I		

III. EXPENDITURES (Sections G - J)

NAME OF COMMITTEE (As reported on Page 1, Line 1)	TYPE OF REPORT
Impact CT, Inc.	July 10 Filing - Original

G. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
MailChimp	04/27/2026	[ ] Check # [X] Debit Card [ ] EFT

Street Address	City	State	Zip Code
675 Ponce De Leon Ave NE	Atlanta	GA	30308

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Web Hosting Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
[ ] Yes [X] No	WEB	G		[ ] Yes [X] No	$20.20

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Expenditure Number Number	[ ] Final or Full Payment [ ] Partial with Balance Owing
[ ] Yes [X] No		I		

Name of Payee	Date of Payment	Method of Payment
Elias Law Group	04/29/2026	[X] Check # 1357 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
250 Massachusetts Ave NW	Washington	DC	20001

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Legal	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$3,016.80

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Expenditure Number Number	[ ] Final or Full Payment [ ] Partial with Balance Owing
[ ] Yes [X] No		I		

III. EXPENDITURES (Sections G - J)

NAME OF COMMITTEE (As reported on Page 1, Line 1)	TYPE OF REPORT
Impact CT, Inc.	July 10 Filing - Original

G. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
Windsor Federal Savings	04/30/2026	☐ Check # ☐ Debit Card ☒ EFT

Street Address	City	State	Zip Code
250 Broad St	Windsor	CT	06095

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
☐ Yes ☐ No If yes, complete Section G. Addendum	Bank Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Number	Associated with Referendum?	Amount
☐ Yes ☒ No	BNK	G		☐ Yes ☒ No	$30.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Number	
☐ Yes ☒ No		I		☐ Final or Full Payment ☐ Partial with Balance Owing

Name of Payee	Date of Payment	Method of Payment
Campos Hampton LLC	04/30/2026	☒ Check # 1349 ☐ Debit Card ☐ EFT

Street Address	City	State	Zip Code
71 Tavern Rock Rd	Stratford	CT	06614

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
☐ Yes ☐ No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Number	Associated with Referendum?	Amount
☐ Yes ☒ No	CNSLT	G		☐ Yes ☒ No	$25,000.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Number	
☐ Yes ☒ No		I		☐ 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
Impact CT, Inc.	July 10 Filing - Original

G. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
Conti Associates, LLC	04/30/2026	[X] Check # 1356 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
415 Howe Ave Ste 101	Shelton	CT	06484

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Venue Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
[ ] Yes [X] No	TRAIN	G		[ ] Yes [X] No	$400.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Expenditure Number Number	[ ] Final or Full Payment [ ] Partial with Balance Owing
[ ] Yes [X] No		I		

Name of Payee	Date of Payment	Method of Payment
Google LLC	05/01/2026	[ ] Check # [X] Debit Card [ ] EFT

Street Address	City	State	Zip Code
1600 Amphitheatre Pkwy	Mountain View	CA	94043

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Software	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
[ ] Yes [X] No	Misc *	G		[ ] Yes [X] No	$140.38

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Expenditure Number Number	[ ] Final or Full Payment [ ] Partial with Balance Owing
[ ] Yes [X] No		I		

III. EXPENDITURES (Sections G - J)

NAME OF COMMITTEE (As reported on Page 1, Line 1)	TYPE OF REPORT
Impact CT, Inc.	July 10 Filing - Original

G. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
Bar Rosso	05/08/2026	[X] Check # 1358 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
28 Spring St	Stamford	CT	06901

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Food	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Number	Associated with Referendum?	Amount
[ ] Yes [X] No	FOOD	G		[ ] Yes [X] No	$1,294.80

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Number	
[ ] Yes [X] No		I		[ ] Final or Full Payment [ ] Partial with Balance Owing

Name of Payee	Date of Payment	Method of Payment
Zoom	05/14/2026	[ ] Check # [X] Debit Card [ ] EFT

Street Address	City	State	Zip Code
55 Almaden Blvd Fl 6	San Jose	CA	95113

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Software	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Number	Associated with Referendum?	Amount
[ ] Yes [X] No	Misc *	G		[ ] Yes [X] No	$33.98

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Number	
[ ] Yes [X] No		I		[ ] 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
Impact CT, Inc.	July 10 Filing - Original

G. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
Roy Occhiogrosso LLC	05/18/2026	☐ Check # ☐ Debit Card ☒ EFT

Street Address	City	State	Zip Code
25 Park Rd	Simsbury	CT	06070

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
☐ Yes ☐ No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Number	Associated with Referendum?	Amount
☐ Yes ☒ No	CNSLT	G		☐ Yes ☒ No	$7,976.25

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Number	
☐ Yes ☒ No		I		☐ Final or Full Payment ☐ Partial with Balance Owing

Name of Payee	Date of Payment	Method of Payment
Canva.com	05/18/2026	☐ Check # ☒ Debit Card ☐ EFT

Street Address	City	State	Zip Code
3212 E Cesar Chavez St	Austin	TX	78702

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
☐ Yes ☐ No If yes, complete Section G. Addendum	Software	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Number	Associated with Referendum?	Amount
☐ Yes ☒ No	Misc *	G		☐ Yes ☒ No	$85.08

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Number	
☐ Yes ☒ No		I		☐ 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
Impact CT, Inc.	July 10 Filing - Original

G. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
The Field LLC	05/19/2026	[X] Check # 1360 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
517 Shelton Ave Fl 2	Hamden	CT	

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$6,000.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Number	
[ ] Yes [X] No		I		[ ] Final or Full Payment [ ] Partial with Balance Owing

Name of Payee	Date of Payment	Method of Payment
Ojakian Consulting LLC	05/19/2026	[X] Check # 1359 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
7 Buckingham Way	Rancho Mirage	CA	92270

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$5,000.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Number	
[ ] Yes [X] No		I		[ ] 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
Impact CT, Inc.	July 10 Filing - Original

G. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
Jesse Phillips	05/19/2026	[X] Check # 1361 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
517 Shelton Ave Fl 2	Hamden	CT	

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$5,000.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Number	
[ ] Yes [X] No		I		[ ] Final or Full Payment [ ] Partial with Balance Owing

Name of Payee	Date of Payment	Method of Payment
Two-Seventy Strategies	05/20/2026	[X] Check # 1362 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
207 E Ohio St # 379	Chicago	IL	60611

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$6,564.93

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Number	
[ ] Yes [X] No		I		[ ] 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
Impact CT, Inc.	July 10 Filing - Original

G. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
Change Research	05/21/2026	☐ Check # ☐ Debit Card ☒ EFT

Street Address	City	State	Zip Code
PO Box 10193	Berkeley	CA	94709

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
☐ Yes ☐ No If yes, complete Section G. Addendum	Polling	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Number	Associated with Referendum?	Amount
☐ Yes ☒ No	POLLS	G		☐ Yes ☒ No	$16,500.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Number	
☐ Yes ☒ No		I		☐ Final or Full Payment ☐ Partial with Balance Owing

Name of Payee	Date of Payment	Method of Payment
Hardt Consulting, LLC	05/22/2026	☐ Check # ☐ Debit Card ☒ EFT

Street Address	City	State	Zip Code
405 Robin Ct	Cheshire	CT	06410

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
☐ Yes ☐ No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Number	Associated with Referendum?	Amount
☐ Yes ☒ No	CNSLT	G		☐ Yes ☒ No	$8,320.30

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Number	
☐ Yes ☒ No		I		☐ 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
Impact CT, Inc.	July 10 Filing - Original

G. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
Blackburn & Donnelly LLC	05/22/2026	[X] Check # 1388 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
2 Concorde Way # 3C	Windsor Locks	CT	06096

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Legal	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$4,722.18

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Expenditure Number Number	
[ ] Yes [X] No		I		[ ] Final or Full Payment [ ] Partial with Balance Owing

Name of Payee	Date of Payment	Method of Payment
Campos Hampton LLC	05/26/2026	[X] Check # 1369 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
71 Tavern Rock Rd	Stratford	CT	06614

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$25,000.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Expenditure Number Number	
[ ] Yes [X] No		I		[ ] 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
Impact CT, Inc.	July 10 Filing - Original

G. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
Jazmine Inoa	05/26/2026	[X] Check # 1381 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
115 Holly St	Bridgeport	CT	06607

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$1,500.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Number	
[ ] Yes [X] No		I		[ ] Final or Full Payment [ ] Partial with Balance Owing

Name of Payee	Date of Payment	Method of Payment
Susana Franco	05/26/2026	[X] Check # 1382 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
98 Lakeview Ave	Bridgeport	CT	06606

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$1,500.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Number	
[ ] Yes [X] No		I		[ ] 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
Impact CT, Inc.	July 10 Filing - Original

G. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
Two-Seventy Strategies	05/27/2026	[X] Check # 1366 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
207 E Ohio St # 379	Chicago	IL	60611

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$13,209.47

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Expenditure Number Number	[ ] Final or Full Payment [ ] Partial with Balance Owing
[ ] Yes [X] No		I		

Name of Payee	Date of Payment	Method of Payment
Elias Law Group	05/27/2026	[X] Check # 1367 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
250 Massachusetts Ave NW	Washington	DC	20001

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Legla	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$2,664.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Expenditure Number Number	[ ] Final or Full Payment [ ] Partial with Balance Owing
[ ] Yes [X] No		I		

III. EXPENDITURES (Sections G - J)

NAME OF COMMITTEE (As reported on Page 1, Line 1)	TYPE OF REPORT
Impact CT, Inc.	July 10 Filing - Original

G. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
Sofia Franco	05/27/2026	[X] Check # 1377 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
98 Lakeview Ave	Bridgeport	CT	06606

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$1,500.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Number	
[ ] Yes [X] No		I		[ ] Final or Full Payment [ ] Partial with Balance Owing

Name of Payee	Date of Payment	Method of Payment
Jesse Campbell	05/27/2026	[X] Check # 1376 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
304 Goffe St Unit 3	New Haven	CT	06511

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$1,500.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Number	
[ ] Yes [X] No		I		[ ] 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
Impact CT, Inc.	July 10 Filing - Original

G. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
Francisca Laguerre	05/27/2026	[X] Check # 1383 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
9 Hawkins Rd	Ansonia	CT	

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$1,500.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Expenditure Number Number	[ ] Final or Full Payment [ ] Partial with Balance Owing
[ ] Yes [X] No		I		

Name of Payee	Date of Payment	Method of Payment
MailChimp	05/27/2026	[ ] Check # [X] Debit Card [ ] EFT

Street Address	City	State	Zip Code
675 Ponce De Leon Ave NE	Atlanta	GA	30308

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Web Hosting	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
[ ] Yes [X] No	WEB	G		[ ] Yes [X] No	$20.20

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Expenditure Number Number	[ ] Final or Full Payment [ ] Partial with Balance Owing
[ ] Yes [X] No		I		

III. EXPENDITURES (Sections G - J)

NAME OF COMMITTEE (As reported on Page 1, Line 1)	TYPE OF REPORT
Impact CT, Inc.	July 10 Filing - Original

G. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
Lisa Del Sesto	05/28/2026	[X] Check # 1373 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
10 South St Unit 90	Danbury	CT	06810

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$1,500.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Number	
[ ] Yes [X] No		I		[ ] Final or Full Payment [ ] Partial with Balance Owing

Name of Payee	Date of Payment	Method of Payment
Anthony Fiore	05/28/2026	[X] Check # 1374 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
66 Central Ave	Hamden	CT	06517

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$1,500.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Number	
[ ] Yes [X] No		I		[ ] 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
Impact CT, Inc.	July 10 Filing - Original

G. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
Jessica Ervin	05/28/2026	[X] Check # 1372 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
850 Cooke St	Waterbury	CT	06710

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$1,500.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Number	
[ ] Yes [X] No		I		[ ] Final or Full Payment [ ] Partial with Balance Owing

Name of Payee	Date of Payment	Method of Payment
Melanie Cruz	05/28/2026	[X] Check # 1379 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
106 West St Apt A7	Rocky Hill	CT	

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$1,500.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Number	
[ ] Yes [X] No		I		[ ] 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
Impact CT, Inc.	July 10 Filing - Original

G. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
Windsor Federal Savings	05/29/2026	☐ Check # ☐ Debit Card ☒ EFT

Street Address	City	State	Zip Code
250 Broad St	Windsor	CT	06095

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
☐ Yes ☐ No If yes, complete Section G. Addendum	Bank Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Number	Associated with Referendum?	Amount
☐ Yes ☒ No	BNK	G		☐ Yes ☒ No	$30.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Number	☐ Final or Full Payment ☐ Partial with Balance Owing
☐ Yes ☒ No		I		

Name of Payee	Date of Payment	Method of Payment
Lillie Ennis	05/29/2026	☒ Check # 1370 ☐ Debit Card ☐ EFT

Street Address	City	State	Zip Code
9303 Avalon Gates	Trumbull	CT	06611

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
☐ Yes ☐ No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Number	Associated with Referendum?	Amount
☐ Yes ☒ No	CNSLT	G		☐ Yes ☒ No	$1,500.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Number	☐ Final or Full Payment ☐ Partial with Balance Owing
☐ Yes ☒ No		I		

III. EXPENDITURES (Sections G - J)

NAME OF COMMITTEE (As reported on Page 1, Line 1)	TYPE OF REPORT
Impact CT, Inc.	July 10 Filing - Original

G. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
Kebra Smith-Bolden	05/29/2026	[X] Check # 1387 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
255 Pine Rock Ave Unit 12	Hamden	CT	06514

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$1,500.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred? Section	Number	[ ] Final or Full Payment [ ] Partial with Balance Owing
[ ] Yes [X] No	I		

Name of Payee	Date of Payment	Method of Payment
Hudson Partners LLC	06/01/2026	[X] Check # 1368 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
345 Barnum Ave Ste 9	Stratford	CT	06614

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$25,000.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred? Section	Number	[ ] Final or Full Payment [ ] Partial with Balance Owing
[ ] Yes [X] No	I		

III. EXPENDITURES (Sections G - J)

NAME OF COMMITTEE (As reported on Page 1, Line 1)	TYPE OF REPORT
Impact CT, Inc.	July 10 Filing - Original

G. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
Blackburn & Donnelly LLC	06/01/2026	[X] Check # 1363 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
2 Concorde Way # 3C	Windsor Locks	CT	06096

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Legal	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$2,800.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Number	
[ ] Yes [X] No		I		[ ] Final or Full Payment [ ] Partial with Balance Owing

Name of Payee	Date of Payment	Method of Payment
Google LLC	06/01/2026	[ ] Check # [X] Debit Card [ ] EFT

Street Address	City	State	Zip Code
1600 Amphitheatre Pkwy	Mountain View	CA	94043

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Software	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Number	Associated with Referendum?	Amount
[ ] Yes [X] No	Misc *	G		[ ] Yes [X] No	$133.32

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Number	
[ ] Yes [X] No		I		[ ] 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
Impact CT, Inc.	July 10 Filing - Original

G. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
Pastor Iona Smith Nze	06/04/2026	[X] Check # 1380 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
53 Exchange St	New Haven	CT	06513

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$1,500.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred? Section	Number	[ ] Final or Full Payment [ ] Partial with Balance Owing
[ ] Yes [X] No	I		

Name of Payee	Date of Payment	Method of Payment
Saray Figueroa Chappell	06/05/2026	[X] Check # 1375 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
65 Victory Way Unit H	Newington	CT	06111

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$1,500.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred? Section	Number	[ ] Final or Full Payment [ ] Partial with Balance Owing
[ ] Yes [X] No	I		

III. EXPENDITURES (Sections G - J)

NAME OF COMMITTEE (As reported on Page 1, Line 1)	TYPE OF REPORT
Impact CT, Inc.	July 10 Filing - Original

G. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
Audrey E. Trace, Esq.	06/05/2026	[X] Check # 1371 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
343 Beach St Apt 602	West Haven	CT	06516

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$1,500.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred? Section	Number	[ ] Final or Full Payment [ ] Partial with Balance Owing
[ ] Yes [X] No	I		

Name of Payee	Date of Payment	Method of Payment
Amazon Marketplace	06/05/2026	[ ] Check # [X] Debit Card [ ] EFT

Street Address	City	State	Zip Code
410 Terry Ave N	Seattle	WA	98109

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Gifts	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
[ ] Yes [X] No	Gift *	G		[ ] Yes [X] No	$135.95

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred? Section	Number	[ ] Final or Full Payment [ ] Partial with Balance Owing
[ ] Yes [X] No	I		

III. EXPENDITURES (Sections G - J)

NAME OF COMMITTEE (As reported on Page 1, Line 1)	TYPE OF REPORT
Impact CT, Inc.	July 10 Filing - Original

G. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
LS Kickback	06/08/2026	[ ] Check # [X] Debit Card [ ] EFT

Street Address	City	State	Zip Code
415 Howe Ave	Shelton	CT	06484

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Food	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
[ ] Yes [X] No	FOOD	G		[ ] Yes [X] No	$702.14

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Expenditure Number Number	[ ] Final or Full Payment [ ] Partial with Balance Owing
[ ] Yes [X] No		I		

Name of Payee	Date of Payment	Method of Payment
Staples	06/08/2026	[ ] Check # [X] Debit Card [ ] EFT

Street Address	City	State	Zip Code
500 Staples Dr	Framingham	MA	01702

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Printing Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
[ ] Yes [X] No	PRNT	G		[ ] Yes [X] No	$109.97

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Expenditure Number Number	[ ] Final or Full Payment [ ] Partial with Balance Owing
[ ] Yes [X] No		I		

III. EXPENDITURES (Sections G - J)

NAME OF COMMITTEE (As reported on Page 1, Line 1)	TYPE OF REPORT
Impact CT, Inc.	July 10 Filing - Original

G. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
Walmart	06/08/2026	[ ] Check # [X] Debit Card [ ] EFT

Street Address	City	State	Zip Code
702 SW 8th St	Bentonville	AR	72716

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Supplies	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
[ ] Yes [X] No	OFFICE	G		[ ] Yes [X] No	$194.14

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Expenditure Number Number		
[ ] Yes [X] No		I		[ ] Final or Full Payment [ ] Partial with Balance Owing	

Name of Payee	Date of Payment	Method of Payment
Dr. Erika K. Stanley Wesley	06/09/2026	[X] Check # 1378 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
185 Canal St Unit 4006	Shelton	CT	06484

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$1,500.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Expenditure Number Number		
[ ] Yes [X] No		I		[ ] 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
Impact CT, Inc.	July 10 Filing - Original

G. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
Campos Hampton LLC	06/11/2026	[X] Check # 1389 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
71 Tavern Rock Rd	Stratford	CT	06614

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$25,000.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Number	
[ ] Yes [X] No		I		[ ] Final or Full Payment [ ] Partial with Balance Owing

Name of Payee	Date of Payment	Method of Payment
Jesse Phillips	06/11/2026	[X] Check # 1364 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
517 Shelton Ave Fl 2	Hamden	CT	

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$5,000.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Number	
[ ] Yes [X] No		I		[ ] 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
Impact CT, Inc.	July 10 Filing - Original

G. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
Hardt Consulting, LLC	06/15/2026	☐ Check # ☐ Debit Card ☒ EFT

Street Address	City	State	Zip Code
405 Robin Ct	Cheshire	CT	06410

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
☐ Yes ☐ No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Number	Associated with Referendum?	Amount
☐ Yes ☒ No	CNSLT	G		☐ Yes ☒ No	$8,320.30

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Number	
☐ Yes ☒ No		I		☐ Final or Full Payment ☐ Partial with Balance Owing

Name of Payee	Date of Payment	Method of Payment
Zoom	06/15/2026	☐ Check # ☒ Debit Card ☐ EFT

Street Address	City	State	Zip Code
55 Almaden Blvd Fl 6	San Jose	CA	95113

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
☐ Yes ☐ No If yes, complete Section G. Addendum	Software	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Number	Associated with Referendum?	Amount
☐ Yes ☒ No	Misc *	G		☐ Yes ☒ No	$33.98

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Number	
☐ Yes ☒ No		I		☐ 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
Impact CT, Inc.	July 10 Filing - Original

G. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
Canva.com	06/16/2026	[ ] Check # [X] Debit Card [ ] EFT

Street Address	City	State	Zip Code
3212 E Cesar Chavez St	Austin	TX	78702

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Software	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
[ ] Yes [X] No	Misc *	G		[ ] Yes [X] No	$85.08

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Expenditure Number Number	[ ] Final or Full Payment [ ] Partial with Balance Owing
[ ] Yes [X] No		I		

Name of Payee	Date of Payment	Method of Payment
Blackburn & Donnelly LLC	06/18/2026	[X] Check # 1393 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
2 Concorde Way # 3C	Windsor Locks	CT	06096

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Legal	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$797.22

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Expenditure Number Number	[ ] Final or Full Payment [ ] Partial with Balance Owing
[ ] Yes [X] No		I		

III. EXPENDITURES (Sections G - J)

NAME OF COMMITTEE (As reported on Page 1, Line 1)	TYPE OF REPORT
Impact CT, Inc.	July 10 Filing - Original

G. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
PromoSuns Inc.	06/22/2026	[X] Check # 1390 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
28-14 31st St # 603	Astoria	NY	11102

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Campaign Paraphernalia	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Number	Associated with Referendum?	Amount
[ ] Yes [X] No	Gift *	G		[ ] Yes [X] No	$2,807.90

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Number	
[ ] Yes [X] No		I		[ ] Final or Full Payment [ ] Partial with Balance Owing

Name of Payee	Date of Payment	Method of Payment
The Field LLC	06/23/2026	[X] Check # 1392 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
517 Shelton Ave Fl 2	Hamden	CT	

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$6,322.48

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Number	
[ ] Yes [X] No		I		[ ] 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
Impact CT, Inc.	July 10 Filing - Original

G. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
Ojakian Consulting LLC	06/24/2026	[X] Check # 1391 [ ] Debit Card [ ] EFT

Street Address	City	State	Zip Code
7 Buckingham Way	Rancho Mirage	CA	92270

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
[ ] Yes [X] No	CNSLT	G		[ ] Yes [X] No	$5,000.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Expenditure Number Number	[ ] Final or Full Payment [ ] Partial with Balance Owing
[ ] Yes [X] No		I		

Name of Payee	Date of Payment	Method of Payment
Staples	06/29/2026	[ ] Check # [X] Debit Card [ ] EFT

Street Address	City	State	Zip Code
500 Staples Dr	Framingham	MA	01702

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Printing Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
[ ] Yes [X] No	PRNT	G		[ ] Yes [X] No	$51.54

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Expenditure Number Number	[ ] Final or Full Payment [ ] Partial with Balance Owing
[ ] Yes [X] No		I		

III. EXPENDITURES (Sections G - J)

NAME OF COMMITTEE (As reported on Page 1, Line 1)	TYPE OF REPORT
Impact CT, Inc.	July 10 Filing - Original

G. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
Target.com	06/29/2026	[ ] Check # [X] Debit Card [ ] EFT

Street Address	City	State	Zip Code
7000 Target Pkwy	Brooklyn Park	MN	55445

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Office Snacks and Supplies	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
[ ] Yes [X] No	OFFICE	G		[ ] Yes [X] No	$107.29

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Expenditure Number Number	[ ] Final or Full Payment [ ] Partial with Balance Owing
[ ] Yes [X] No		I		

Name of Payee	Date of Payment	Method of Payment
MailChimp	06/29/2026	[ ] Check # [X] Debit Card [ ] EFT

Street Address	City	State	Zip Code
675 Ponce De Leon Ave NE	Atlanta	GA	30308

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
[ ] Yes [ ] No If yes, complete Section G. Addendum	Web hosting fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
[ ] Yes [X] No	WEB	G		[ ] Yes [X] No	$20.20

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred?	Expenditure Number Section	Expenditure Number Number	[ ] Final or Full Payment [ ] Partial with Balance Owing
[ ] Yes [X] No		I		

III. EXPENDITURES (Sections G - J)

NAME OF COMMITTEE (As reported on Page 1, Line 1)	TYPE OF REPORT
Impact CT, Inc.	July 10 Filing - Original

G. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment
Windsor Federal Savings	06/30/2026	☐ Check # ☐ Debit Card ☒ EFT

Street Address	City	State	Zip Code
250 Broad St	Windsor	CT	06095

If an Independent Expenditure, is it on behalf of more than one candidate?	Description (only complete if Independent Expenditure has ONE Expenditure Code - if more than one, Complete Section G. Addendum)	Event #
☐ Yes ☐ No If yes, complete Section G. Addendum	Bank Fee	

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	Purpose of Expenditure (by code) (only complete if Independent Expenditure has ONE Expenditure Code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
☐ Yes ☒ No	BNK	G		☐ Yes ☒ No	$30.00

Is this expenditure payment for an expense previously reported as an expense incurred in Section I	If yes, what is the expenditure number of the expense previously incurred? Section	Number	
☐ Yes ☒ No	I		☐ Final or Full Payment ☐ Partial with Balance Owing

Total of Section G	$348,850.23

III. EXPENDITURES (Sections G - J)

NAME OF COMMITTEE (As reported on Page 1, Line 1)	TYPE OF REPORT
Impact CT, Inc.	July 10 Filing - 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 Yes No	Purpose of Expenditure (by code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum? Yes No	Amount
		H			

Total of Section H	

III. EXPENDITURES (Sections G - J)

NAME OF COMMITTEE (As reported on Page 1, Line 1)	TYPE OF REPORT
Impact CT, Inc.	July 10 Filing - Original

I. Expenses Incurred By Committee but Not Paid During this Period

Name of Creditor	Date Incurred
Underdog Strategies	06/25/2026

Street Address	City	State	Zip Code
26 Hunns Lack Pl	Stanfordville	NY	12581-5622

If an Independent Expenditure, is it on behalf of more than one candidate?	Description	Event #
☐ Yes ☐ No If yes, complete Section I. Addendum	Consultant Fee	

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	Purpose of Expenditure (by code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
☐ Yes ☒ No	CNSLT	I		☐ Yes ☒ No	$500.00

Name of Creditor	Date Incurred
Water’s Edge Resort and S	06/28/2026

Street Address	City	State	Zip Code
1525 Boston Post Rd	Westbrook	CT	06498

If an Independent Expenditure, is it on behalf of more than one candidate?	Description	Event #
☐ Yes ☐ No If yes, complete Section I. Addendum	Food	

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	Purpose of Expenditure (by code)	Expenditure Number Section	Expenditure Number Number	Associated with Referendum?	Amount
☐ Yes ☒ No	FOOD	I		☐ Yes ☒ No	$1,647.66

III. EXPENDITURES (Sections G - J)

NAME OF COMMITTEE (As reported on Page 1, Line 1)	TYPE OF REPORT
Impact CT, Inc.	July 10 Filing - Original

I. Expenses Incurred By Committee but Not Paid During this Period

Name of Creditor	Date Incurred
Water's Edge Resort and S	06/30/2026

Street Address	City	State	Zip Code
1525 Boston Post Rd	Westbrook	CT	06498

If an Independent Expenditure, is it on behalf of more than one candidate?	Description	Event #
☐ Yes ☐ No If yes, complete Section I. Addendum	Venue Fee	

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	Purpose of Expenditure (by code)	Expenditure Number: Section	Expenditure Number: Number	Associated with Referendum?	Amount
☐ Yes ☒ No	PBA-TRVL *	I		☐ Yes ☒ No	$8,754.06

Name of Creditor	Date Incurred
Water's Edge Resort and S	06/30/2026

Street Address	City	State	Zip Code
1525 Boston Post Rd	Westbrook	CT	06498

If an Independent Expenditure, is it on behalf of more than one candidate?	Description	Event #
☐ Yes ☐ No If yes, complete Section I. Addendum	Food	

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	Purpose of Expenditure (by code)	Expenditure Number: Section	Expenditure Number: Number	Associated with Referendum?	Amount
☐ Yes ☒ No	FOOD	I		☐ Yes ☒ No	$5,628.99

Total of Section I	**$16,530.71**

III. EXPENDITURES (Sections G - J)

NAME OF COMMITTEE (As reported on Page 1, Line 1)	TYPE OF REPORT
Impact CT, Inc.	July 10 Filing - 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	Associated with Referendum? Yes No	Amount
		J		

Total of Section J	

IV. DISCLOSURE IN COMMUNICATIONS (Sections K - L)

NAME OF COMMITTEE (As reported on Page 1, Line 1)	TYPE OF REPORT
Impact CT, Inc.	July 10 Filing - Original

K. Five Largest Contributions Disclosed in Communication

Source of Contribution - Name of Person Making Contribution	Expenditure Number Section / Number

Address of Person Making Contribution - City	State	Zip Code

Source of Contribution - Name of Individual who Signed Check or Authorized Contribution	Amount

IV. DISCLOSURE IN COMMUNICATIONS (Sections K - L)

NAME OF COMMITTEE (As reported on Page 1, Line 1)	TYPE OF REPORT
Impact CT, Inc.	July 10 Filing - Original

L. "Nesting Dolls" Provision for Top 5 Contributions Disclosed in Communication

Name of Person Receiving Covered Transfer as Reported in Section K	Expenditure Number Section	Number

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

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

Section G. ADDENDUM

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

G. Expenses Paid By Committee - Addendum

Expenditure Number as reported in Section G	**Total Amount of the Expenditure**
G	

Description	Expenditure Code

Name of Candidate	Office Sought (if applicable)	Supported / Opposed	Amount Allocated

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	Total Amount of the Expenditure
J	

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