SEEC FORM 30

Itemized Campaign Finance Disclosure Statement
Candidates for Statewide Offices and General Assembly
CONNECTICUT STATE ELECTIONS ENFORCEMENT COMMISSION
Rev. 1/08



Electronic Filing

Page 1 of 176

SUMMARY PAGE

				11/1/1/11/1							
1.NAME OF COMMITTEE							2. TYPE OF COMMITTEE				
Dan Malloy For Connec	ticut (CT)						x	Candidate Committee Exploratory Committee			
3. TREASURER NAME								_			
Title	First Len			MI S	Last Miller			Suffix			
4. TREASURER ADDRESS											
Street Address			City			State	2	Zip Code			
8 Kings Ln	Essex							06426			
5. ELECTION DATE	ELECTION DATE 6. OFFICE SOUGHT (if applicable)							ICT CODE (if applicable)			
11/02/2010								1,			
8. CANDIDATE NAME											
Title First MI Last P. Malloy								Suffix			
9. TYPE OF REPORT											
9. 1 YPE OF REPORT April 10 Filing - Original											
10. PERIOD COVERED											
		Beginning Date			Ending Date						
		01/01/2009	thru	и	03/31/2009						
			11. CER	RTIFICATION							
I hereby certify and state, under penalties of false statement, that all of the information set forth on this Itemized Campaign Finance Disclosure Statement for the period covered is true, accurate and complete.											
Electronic FilingLen Miller04/13/2009SIGNATUREPRINT NAME OF THE SIGNERDATE CERTIFIED											
PENALTY FOR FALSE STATEMENT IS PUNISHABLE BY FINE NOT TO EXCEED \$1,000, OR IMPRISONMENT FOR NOT MORE THAN ONE YEAR, OR BOTH.											

SEEC FORM 30 Itemized Campaign Finance Disclosure Statement Candidates for Statewide Offices and General Assembly CONNECTICUT STATE ELECTIONS ENFORCEMENT COMMISSION Rev. 1/08

SUMMARY PAGE TOTALS

NAME OF COMMITTEE	FILING DUE DATE	FILING DUE DATE						
Dan Malloy For Connecticut (CT)	Original 04/13/2009							
	COLUMN A This Period	COLUMN B Aggregate						
12. Balance on hand from day Committee was formed		\$0.00						
13. Balance on hand at the beginning of Reporting Period	\$0.00							
14. Contributions received from Individuals (Section A and B)	\$129,675.00	\$129,675.00						
15. Receipts from Other Committees (Sections C1 + C2)	\$0.00	\$0.00						
16. Other Monetary Receipts (Section D-I)	\$0.00	\$0.00						
17. Total Proceeds from Tag Sales, Auctions or Other Sales (Section J2)	\$0.00	\$0.00						
18. Total Monetary Receipts (add totals for lines 14-17)	\$129,675.00	\$129,675.00						
19. Subtotals (add totals in line 13 + line 18 in Column A and in lines 12 + 18 in Column B)	\$129,675.00	\$129,675.00						
20. Expenses Paid by Committee (Section N)	\$24,377.88	\$24,377.88						
21. Balance on hand at close of Reporting Period (Subtract line 20 from line 19)	\$105,297.12	\$105,297.12						
22. In-Kind Donations not Considered Contributions Received (Section J3)	\$45.00	\$45.00						
23. In-Kind Contributions Received (Section K)	\$0.00	\$0.00						
24. Refundable Deposit to Telephone Company (Section L)	\$0.00	\$0.00						
25. Receipts of Organization Expenditures (Section M)	\$0.00	\$0.00						
26. Beginning Loan Balance	\$0.00	\$0.00						
26a. + Loans Received (Section D)	\$0.00	\$0.00						
26b. + Interest and Penalties on Loan(s)	\$0.00	\$0.00						
26c Payments on Loan(s)	\$0.00	\$0.00						
26d. Total Outstanding Loan Amount	\$0.00	\$0.00						
27. Campaign Expenses Paid By Candidate (Section O)	\$189.00	\$189.00						
28. Expenses Incurred on Committee Credit Card (Section P)	\$0.00	\$0.00						
29. Expenses Incurred by Committee During this Period but Not Paid (Section Q)	\$0.00							
29a. Total Outstanding Expenses Incurred by Committee still Unpaid (Section Q)	\$0.00							

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE								FILING	DUE DATE	
Dan Malloy For Connecticut (C	CT)							Origina	al 04/13/2009	
A. Total Contributions from	m Small (Contributors-Received th	is Perio	d ONLX	7					
(See instructions for definition of Small			115 1 0110		total Section A	\$0.00				
		B. Itemized Contributi	ons fron	ı Individu	ıals					
Last Name	First Name		MI	Method of	contribution:		Contribution	ı ID#	Amount of	
Vogel	Susan		М	Cash Money	y Order X Personal Credit/D	Check ebit Card	0067		Contribution	
Residential Street Address	-	City	-	State	Zip Code	D	ate Received			
10 Linda Ln		Darien		СТ	06820-2508	0	1/30/2009			
Principal Occupation		Name of Employer			Is this contribution asso			Yes		
consultant		self			fundraising event listed If yes, list Event #	in Section J	x	No		
Is contributor a principal of a state contractor	or prospective	Yes X No	Is contrib	utor a lobbyis	t spouse or	Agara	egate Contributi	iona		
state contractor? Is yes, indicate which branch or branches of	_	i i es i i i i i i i i i i i i i i i i i		child of a lob	byist?	Aggie	-	75.00	\$375.00	
government the contract is with:	Ш	Executive Legislative	Y	res X	No					
Last Name	First Name		MI		contribution:		Contribution	ı ID#	Amount of	
Vogel	Roger			Cash Money	X Personal y Order Credit/D	Check ebit Card	0068		Contribution	
Residential Street Address	!	City		State	Zip Code	D	ate Received			
10 Linda Ln		Darien		CT	06820-2508	0	1/30/2009			
Principal Occupation	Name of Employer			Is this contribution associated	ciated with	а П	Yes			
Portfolio Manager		Silvercrest Asset Managemer	nt Group		fundraising event listed If yes, list Event #	in Section J				
Is contributor a principal of a state contractor	or prospective	Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	gate Contributi	ions	İ	
state contractor? Is yes, indicate which branch or branches of				child of a lob	•		-	75.00	\$375.00	
government the contract is with:	<u> </u>	Executive Legislative	L Y	res X	No		1			
Last Name	First Name		MI		contribution:	Check	Contribution	n ID#	Amount of	
Cooney	Christoph	er		Cash Money		ebit Card	0065		Contribution	
Residential Street Address	•	City	•	State	Zip Code	D	ate Received			
145 Ocean Dr W		Stamford		СТ	06902	0	2/02/2009			
Principal Occupation		Name of Employer			Is this contribution asso			Yes		
Consultant		Wilmark Group LLC			fundraising event listed If yes, list Event #	in Section J	x	No		
Is contributor a principal of a state contractor	or prospective	Yes X No	Is contrib	utor a lobbyis	t spouse or	Agara	egate Contributi	iona		
state contractor? Is yes, indicate which branch or branches of	_	i i es i i i i i i i i i i i i i i i i i		child of a lob	byist?	Aggie	-	75.00	\$375.00	
government the contract is with:	Ц	Executive Legislative	Y	res x	No					
Last Name	First Name		MI		contribution:		Contribution	ı ID#	Amount of	
Blumenfeld	James			Cash Money	x Personal y Order Credit/D	Check ebit Card	0066		Contribution	
Residential Street Address	!	City		State	Zip Code		ate Received			
145 Ocean Dr W		Stamford		СТ	06902		2/02/2009			
Principal Occupation		Name of Employer			Is this contribution associated	ciated with	а П	Yes	j	
Marketing Consultant		The Wilmark Group			fundraising event listed If yes, list Event #	in Section J	J1? X			
			1							
Is contributor a principal of a state contractor state contractor?	or prospective	Yes X No		utor a lobbyis child of a lob		Aggre	egate Contributi		#37F 00	
Is yes, indicate which branch or branches of government the contract is with:		Executive Legislative		res X	-		\$ 3,	75.00	\$375.00	

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILING	G DUE DATE		
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009		
		B. Itemized Contribu	tions fron	n Individu	ıals		•			
Last Name Urbank	First Name Katharine	2	MI S	Cash	contribution:	heck 0001	ntion ID#	Amount of Contribution		
Residential Street Address 227 Brookdale Rd		City Stamford		State CT	y Order	Date Receive				
Principal Occupation none		Name of Employer none		1	Is this contribution associa fundraising event listed in If yes, list Event #	ted with a Section J1?	Yes X No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	butor a lobbyis at child of a lob Yes	byist?	Aggregate Contri	butions \$10.00	\$10.00		
Last Name Negri	First Name Stephen		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	heck 0002	ition ID#	Amount of Contribution		
Residential Street Address 2 Lanyard Ln		City Waterford		State CT	Zip Code 06385-3208	Date Receive 02/04/20				
Principal Occupation Retired		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	butor a lobbyis at child of a lob Yes	byist?	Aggregate Contri	butions \$100.00	\$100.00		
Last Name Keeshan	First Name Jay		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	heck 0003	ition ID#	Amount of Contribution		
Residential Street Address 88 Southfield Ave Apt 106		City Stamford	•	State CT	Zip Code 06902-7653	Date Receive 02/04/20				
Principal Occupation Governance Consultant		Name of Employer Management Practice Inc.		•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	butor a lobbyis nt child of a lob Yes	byist?	Aggregate Contri	butions \$375.00	\$375.00		
Last Name Skovgaard	First Name Robert		MI A	Cash	contribution: Personal Cl y Order X Credit/Debi	heck 0004	ition ID#	Amount of Contribution		
Residential Street Address 128 Pond Rd		City Stamford		State CT	Zip Code 06902-1831	Date Receive				
Principal Occupation Attorney		Name of Employer Law Offices of Robert Skov	gaard		Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	butor a lobbyis	byist?	Aggregate Contri	butions \$375.00	\$375.00		

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILIN	G DUE DATE		
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009		
		B. Itemized Contributi	ions fron	Individu	ıals		•			
Last Name Skrzypczak	First Name Peter		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 000	ribution ID #	Amount of Contribution		
Residential Street Address 172 Cook Ln Apt C		City Marlborough		State MA	Zip Code 01752-2733	Date Rec 02/04/				
Principal Occupation CEO		Name of Employer Jaculis.Org, unpaid		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Co	stributions \$75.00	\$75.00		
Last Name Wertheim	First Name Peter		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 000	ribution ID #	Amount of Contribution		
Residential Street Address 50 Murray St Apt 1610		City New York		State NY	Zip Code 10007-2269	Date Rec 02/04/				
Principal Occupation student		Name of Employer Columbia Business School		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Co	stributions \$375.00	\$375.00		
Last Name Loehnen	First Name Ben		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 000	ribution ID #	Amount of Contribution		
Residential Street Address 50 Murray St Apt 1610		City New York		State NY	Zip Code 10007-2269	Date Rec 02/04/				
Principal Occupation Editor		Name of Employer Harper Collins			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Co	stributions \$375.00	\$375.00		
Last Name McCooey	First Name Patricia		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 000	ribution ID#	Amount of Contribution		
Residential Street Address 14 Lakeview St		City East Hampton		State CT	Zip Code 06424-1200	Date Rec 02/04/				
Principal Occupation attorney		Name of Employer not currently working			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Co	sntributions \$100.00	\$100.00		

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILIN	G DUE DATE		
Dan Malloy For Connecticut (C	T)						Origin	nal 04/13/2009		
		B. Itemized Contributi	ons fron	Individu	ıals		•			
Last Name Liska	First Name James		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 000	ibution ID #	Amount of Contribution		
Residential Street Address 138 Hubbard St		City Glastonbury		State CT	Zip Code 06033-2936	Date Rece 02/04/2				
Principal Occupation student		Name of Employer Dickinson College		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Cor	stributions \$10.00	\$10.00		
Last Name Lawlor	First Name Michael		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 001	ibution ID#	Amount of Contribution		
Residential Street Address 560 Silver Sands Rd Unit 412		City East Haven		State CT	Zip Code 06512-4658	Date Rece 02/04/2				
Principal Occupation Professor		Name of Employer University of New Haven			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Con	stributions \$100.00	\$100.00		
Last Name Carr	First Name Jeffrey		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 001	ibution ID #	Amount of Contribution		
Residential Street Address 171 Lounsbury Rd		City Ridgefield		State CT	Zip Code 06877-4712	Date Rece 02/04/2				
Principal Occupation investment advisor		Name of Employer Wachovia Securities			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Con	\$50.00	\$50.00		
Last Name Jepsen	First Name George		MI C	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 005	ibution ID # 7	Amount of Contribution		
Residential Street Address 49 Mountain View Dr		City West Hartford		State CT	Zip Code 06117-3028	Date Rece 02/04/2				
Principal Occupation Lawyer		Name of Employer Cowdery Eckers & Murphy			Is this contribution associa fundraising event listed in If yes, list Event #		Yes			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Cor	stributions \$250.00	\$250.00		

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							F	FILING	DUE DATE	
Dan Malloy For Connecticut (C	T)						(Origina	1 04/13/2009	
		B. Itemized Contributi	ions fron	Individu	ıals					
Last Name	First Name		MI	Method of	contribution:		Contribution I	ID#	Amount of	
Wall	Gail			Cash Money	Personal Ch x Order X Credit/Debi		0058		Contribution	
Residential Street Address		City		State	Zip Code	Dat	te Received			
119 Partrick Ave		Norwalk		СТ	06851-2601	02,	/04/2009			
Principal Occupation		Name of Employer			Is this contribution associate fundraising event listed in the state of the state		? '브'	Yes		
n/a		n/a			If yes, list Event #		X I	No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggrega	ate Contribution		\$375.00	
government the contract is with: Last Name	First Name		MI		contribution:		Contribution I	ID#	A £	
Friedman	Lois			Cash Money	y Order Personal Ch Credit/Debi		0195		Amount of Contribution	
Residential Street Address		City		State	Zip Code		te Received			
69 Deer Meadow Ln		Stamford		СТ	06903-1528	<u> </u>	/04/2009			
Principal Occupation none		Name of Employer None			Is this contribution associate fundraising event listed in the state of the state o			Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggrega	ate Contribution		\$375.00	
Last Name	First Name		MI	Method of	contribution:		Contribution I	ID#	Amount of	
Friedman	Michael			Cash Money	y Order Personal Ch Credit/Debi		0196		Contribution	
Residential Street Address		City		State	Zip Code		te Received			
69 Deer Meadow Ln		Stamford		СТ	06903-1528		/04/2009			
Principal Occupation retired		Name of Employer retired			Is this contribution associate fundraising event listed in the street #			Yes No		
Is contributor a principal of a state contractor	or prospective	Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggrega	ate Contribution	ins		
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive Legislative	dependent	child of a lob	byist?	, ,55,050	\$375		\$375.00	
Last Name	First Name		MI	Method of	contribution:		Contribution I	ID#	Amount of	
Schachne	David			Cash Money	y Order Personal Ch Credit/Debi		0197		Contribution	
Residential Street Address PO Box 765		City Westport		State CT	Zip Code 06881-0765		te Received /04/2009			
Principal Occupation		Name of Employer		•	Is this contribution associate		1^1	Yes		
Executive		Vertrue Inc			fundraising event listed in the state of the		? — — .			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggrega	ate Contribution		\$375.00	

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 04/13/2009
		B. Itemized C	ontributio	ons from	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
Wilson	Mary-Star	·ke		Н	Cash Money	y Order Responsible Credit/De		0198		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
122 Palmers Hill Rd Unit 1106		Stamford			СТ	06902-2135	0	2/04/2009	9	
Principal Occupation		Name of Employer				Is this contribution associ fundraising event listed in		J1?		
Retired		None				If yes, list Event #		x	No	
Is contributor a principal of a state contractor	or prospective	Yes	x _{No}		utor a lobbyis	-	Aggre	egate Contribu	utions	
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive Legisl	ative		child of a lob	-		5	\$25.00	\$25.00
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID #	Amount of
Imbrogno	Oscar				Cash Money	y Order Personal C		0199		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
81 Rock Spring Rd		Stamford			СТ	06906-1927	0	2/04/2009	9	
Principal Occupation		Name of Employer				Is this contribution associ			Yes	
supervisor Grade A - 197 Connecticut A				enue/		fundraising event listed in If yes, list Event #	Section.)1?	No	
Is contributor a principal of a state contractor	or prospective	Yes	x No		utor a lobbyis	-	Aggre	gate Contribu	utions	
state contractor? Is yes, indicate which branch or branches of		Encoding D Lorid	-4:	l	child of a lob	*		\$3	375.00	\$375.00
government the contract is with:	<u></u>	Executive Legisl	anve	 			<u> </u>	1		
Last Name Imbrogno	First Name Isabel			MI	Method of Cash	contribution: X Personal (Check	Contributio	on ID #	Amount of Contribution
					_	y Order Credit/De	bit Card	0200		Control
Residential Street Address		City			State	Zip Code		ate Received		
81 Rock Spring Rd		Stamford			СТ	06906-1927	0	2/04/2009	9	
Principal Occupation		Name of Employer none				Is this contribution associ fundraising event listed in		_{11?}		
Housewife		none				If yes, list Event #		<u>x</u>	No	
Is contributor a principal of a state contractor	or prospective	Yes	x _{No}		utor a lobbyis	-	Aggre	egate Contribu	utions	
state contractor? Is yes, indicate which branch or branches of	П	Executive Legisl	ative		child of a lob	-		\$3	375.00	\$375.00
government the contract is with: Last Name	First Name	Executive Legisi	ative	I MI		contribution:	<u> </u>	1	"	
Jaramillo	Gabriel			IVII	Cash	x Personal C	Check	Contribution 0201	on ID #	Amount of Contribution
					Money	y Order Credit/De	bit Card	0201		
Residential Street Address		City			State	Zip Code		ate Received		
1181 E 35th St		Brooklyn			NY	Is this contribution associ		2/04/2009		
Principal Occupation none listed		Name of Employer Grade A - 197 Con	necticut Av	enue/		fundraising event listed in		J1?	_	
						If yes, list Event #		LX	No	
Is contributor a principal of a state contractor state contractor?	or prospective	Yes	x No	1	utor a lobbyis child of a lob		Aggre	egate Contribu		
Is yes, indicate which branch or branches of		Executive Legisl	ative		es x	-		\$3	375.00	\$375.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origina	al 04/13/2009
		B. Itemized Cont	tributions	from	Individu	als				
Last Name Denham	First Name Mark		MI	I	Method of o	contribution: Personal C Order X Credit/Deb		Contribution 0013	on ID #	Amount of Contribution
Residential Street Address 70 Ocean Dr W		City Stamford			State CT	Zip Code 06902-8000	- 1	ate Received 2/05/2009	9	
Principal Occupation Real Estate		Name of Employer The Denham Group		·		Is this contribution associa fundraising event listed in If yes, list Event #		1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X Executive Legislative	der		tor a lobbyist shild of a lobb	byist?	Aggre	gate Contribu \$3	ations 375.00	\$375.00
Last Name Shoop	First Name Linda		MI M		Method of c	contribution: Personal C Order X Credit/Del		Contribution 0014	on ID #	Amount of Contribution
Residential Street Address 52 Breakneck Ln		City Milford			State CT	Zip Code 06460-4513	- 1	ate Received 2/05/2009)	
Principal Occupation none		Name of Employer none				Is this contribution associa fundraising event listed in If yes, list Event #		1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X Executive Legislative	der		tor a lobbyist child of a lobb	byist?	Aggre	gate Contribu	tions 550.00	\$50.00
Last Name Graham	First Name Jesse		MI	I	Method of o	contribution: Personal C Order X Credit/Deb		Contribution 0012	on ID#	Amount of Contribution
Residential Street Address 108 E 91st St		City New York			State NY	Zip Code 10128-1657	- 1	ate Received 2/05/2009)	
Principal Occupation Attorney		Name of Employer Rivlkin Radler LLP				Is this contribution associa fundraising event listed in If yes, list Event #		12	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X Executive Legislative	der		tor a lobbyist shild of a lobbes	byist?	Aggre	gate Contribu \$1	.00.00	\$100.00
Last Name Creed	First Name Kevin		MI E	I	Method of c Cash Money	contribution: X Personal C Order Credit/Del		Contribution 0063	on ID #	Amount of Contribution
Residential Street Address 39 Byrnes Ave		City Litchfield			State CT	Zip Code 06759-4113	- 1	ate Received 2/06/2009	9	
Principal Occupation Attorney		Name of Employer Newman Creed & Asso	oc	•		Is this contribution associa fundraising event listed in If yes, list Event #		1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X Executive Legislative	deg		tor a lobbyist	byist?	Aggre	gate Contribu \$3	itions 375.00	\$375.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 04/13/2009
		B. It	emized Contributi	ions fron	ı Individu	ıals		•		
Last Name	First Name			MI		contribution:		Contributio	on ID#	Amount of
Kincaid	Jeremy				X Cash Money	y Order Personal C		0062		Contribution
Residential Street Address		City		•	State	Zip Code	D	ate Received		
77 Lewis St		Torringto	n		СТ	06790-6705	0	2/06/2009)	
Principal Occupation		Name of Er	nployer		•	Is this contribution associ			Yes	ĺ
state of CT DDS		Mental H	lealth worker			fundraising event listed in If yes, list Event #	Section .	x x	No	
Is contributor a principal of a state contractor of	or prospective	•	Yes X No		utor a lobbyis	-	Aggre	gate Contribut	tions	ĺ
state contractor? Is yes, indicate which branch or branches of				I -	child of a lob	•		\$	10.00	\$10.00
government the contract is with:		Executive	Legislative	 	1			1		
Last Name Sherman	First Name Norman			MI	Method of Cash	contribution:	Theck	Contributio	on ID#	Amount of Contribution
Sherman	Norman					y Order Credit/Del		0064		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
17 Meadow Ave		Woodbur	У		СТ	06798-3921	0	2/06/2009)	
Principal Occupation		Name of Er	mployer		-	Is this contribution associ			Yes	
retired		scientist	(retired)			fundraising event listed in If yes, list Event #	Section .	x x	No	
Is contributor a principal of a state contractor of	or prospective	•	Yes X No		utor a lobbyis	-	Aggre	gate Contribut	tions	ĺ
state contractor? Is yes, indicate which branch or branches of		F	Legislative		child of a lob	-		\$	50.00	\$50.00
government the contract is with:		Executive	Legislative		I			1		<u> </u>
Last Name Barbarotta	First Name			MI F	Method of Cash	contribution:	Check	Contributio	on ID #	Amount of Contribution
Barbarotta	7 11				_	y Order Credit/Del	bit Card	0486		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
28 Unity Dr		Trumbull			СТ	06611-4929	0	2/06/2009)	
Principal Occupation		Name of Er	mployer		•	Is this contribution associ			Yes	
Construction		AFB				fundraising event listed in If yes, list Event #	Section .	x x	No	
Is contributor a principal of a state contractor of	or prochective		Yes X No	Is contrib	utor a lobbyis	t spansa ar	Τ.			
state contractor?	or prospective		Yes No		child of a lob	-	Aggre	gate Contribut	tions 375.00	\$375.00
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	Y	res x	No		Ψ3		\$373.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID#	Amount of
Erichson	Elaine			G	Cash Money	y Order X Credit/Del		0015		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
117 Sawmill Rd		Stamford	I		СТ	06903-3109	0	2/07/2009)	
Principal Occupation		Name of Er	mployer			Is this contribution associ			Yes	
None		Reitred				fundraising event listed in If yes, list Event #	Section .	x	No	
Is contributor a principal of a state contractor of	or prospective		Yes X No		utor a lobbyis	-	Aggre	gate Contribut	tions	ĺ
state contractor? Is yes, indicate which branch or branches of		P 2		dependent	child of a lob	-		\$	75.00	\$75.00
government the contract is with:	ᆜ	Executive	Legislative	Т п,	es 🔼	INO				<u> </u>

I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTEE							FILING	G DUE DATE	
Dan Malloy For Connecticut (C	T)						Origin	nal 04/13/2009	
		B. Itemized Contribut	ions fron	ı Individu	ıals		•		
Last Name Reich	First Name Veronica		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	heck 0016	ition ID#	Amount of Contribution	
Residential Street Address 27 Holbrook Dr		City Stamford		State CT	Zip Code 06906-1510	Date Receive 02/08/20			
Principal Occupation attorney		Name of Employer Bai, Pollock, Blueweiss and I	Mulcahey		Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Contr	butions \$375.00	\$375.00	
Last Name Blondin	First Name Audrey		MI	Cash	contribution: X Personal Cl y Order Credit/Debi	heck 0023	tion ID#	Amount of Contribution	
Residential Street Address 66 Talmadge Ln		City Litchfield		State CT	Zip Code 06759-2417	Date Receive 02/09/20			
Principal Occupation Name of Employer Attorney self				•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Contr	butions \$375.00	\$375.00	
Last Name Blondin	First Name Matthew		MI	Cash	contribution: X Personal Cl y Order Credit/Debi	heck 0060	tion ID#	Amount of Contribution	
Residential Street Address 66 Talmadge Ln		City Litchfield		State CT	Zip Code 06759-2417	Date Receive 02/09/20			
Principal Occupation optometrist		Name of Employer self		•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J19	Yes No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggregate Contr	butions \$375.00	\$375.00	
Last Name Bean	First Name Jeffrey		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	heck 0017	ition ID#	Amount of Contribution	
Residential Street Address 1495 Pearl Hill Rd		City Fitchburg		State MA	Zip Code 01420-1625	Date Receive 02/09/20			
Principal Occupation consultant		Name of Employer Bean & Associates		•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No		
Is contributor a principal of a state contractor of state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Contr	butions \$375.00	\$375.00	

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILING	G DUE DATE		
Dan Malloy For Connecticut (C	T)						Origin	nal 04/13/2009		
		B. Itemized Contribut	ions fron	ı Individu	ıals					
Last Name	First Name		MI	Method of Cash	contribution:		ution ID#	Amount of		
Malloy	Marc		А		y Order X Credit/Debi	0018		Contribution		
Residential Street Address 181 E 73rd St Apt 17F		City New York		State NY	Zip Code 10021-3566	Date Receiv 02/09/20				
Principal Occupation trader		Name of Employer Chilton Investments			Is this contribution associat fundraising event listed in S If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Conti	sibutions \$375.00	\$375.00		
Last Name Creed	First Name Evelyn		MI	Cash	contribution: X Personal Characteristics y Order Credit/Debi	neck 0061	ution ID#	Amount of Contribution		
Residential Street Address 39 Byrnes Ave		City Litchfield		State CT	Zip Code 06759-4113	Date Receiv 02/09/20				
Principal Occupation n/a		Name of Employer EMT			Is this contribution associat fundraising event listed in S If yes, list Event #	Section J1?	Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Contr	ibutions \$100.00	\$100.00		
Last Name Smith, Jr.	First Name Prentice		MI K	Cash	contribution: X Personal Character Credit/Debi	neck 0022	ution ID#	Amount of Contribution		
Residential Street Address 22 Glenbrook Rd Apt 102		City Stamford		State CT	Zip Code 06902-2927	Date Receiv				
Principal Occupation self		Name of Employer consulting			Is this contribution associat fundraising event listed in S If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Conti	sibutions \$375.00	\$375.00		
Last Name Gittines	First Name Edward		MI	Cash	contribution: Personal Ch y Order X Credit/Debi	neck 0020	ution ID#	Amount of Contribution		
Residential Street Address 106 Kettletown Woods Rd		City Southbury		State CT	Zip Code 06488-2710	Date Receiv 02/13/20				
Principal Occupation Programmer/Analyst		Name of Employer Cannondale Bicycle Corp			Is this contribution associat fundraising event listed in S If yes, list Event #	Section J1?	Yes X No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Conti	sibutions \$50.00	\$50.00		

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)			
NAME OF COMMITTEE							FIL	ING DUE DATE
Dan Malloy For Connecticut (C	T)						Ori	ginal 04/13/2009
		B. Itemized Contribut	ions fron	ı Individu	ıals			
Last Name Camhi	First Name Ellen		MI P	Method of Cash	contribution:	heck	ontribution ID #	# Amount of Contribution
Carrini	Liicii	1	<u> </u>	_	y Order X Credit/Debi	0	0021	Contribution
Residential Street Address 50 Arnold Dr		City Stamford		State CT	Zip Code 06905-1301		Received .3/2009	
Principal Occupation Retired		Name of Employer Retired		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate	Contributions \$375.0	0 \$375.00
Last Name Pentore	First Name Richard		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	heck 0	ontribution ID #	Amount of Contribution
Residential Street Address 785 Farmington Ave		City Kensington		State CT	Zip Code 06037-1302		Received .3/2009	
Principal Occupation attorney		Name of Employer Richard H. Pentore Atty at La	aw	•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate	Contributions \$50.0	\$50.00
Last Name Fortunato	First Name Alice		MI C	Cash	contribution: Personal Cl y Order X Credit/Debi	heck 0	ontribution ID #	Amount of Contribution
Residential Street Address 28 Hickory Way		City Stamford		State CT	Zip Code 06907-1305		Received .3/2009	
Principal Occupation Democratic Registrar of Voters		Name of Employer City of Stamford		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate	Contributions \$300.0	0 \$300.00
Last Name O'Rourke	First Name Michael		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	heck 0	ontribution ID #	Amount of Contribution
Residential Street Address 38 Hobson St		City Stamford		State CT	Zip Code 06902-8114		Received .3/2009	
Principal Occupation wealth management		Name of Employer Oppenheimer		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	outor a lobbyis t child of a lob	byist?	Aggregate	Contributions \$100.0	\$100.00

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILING	G DUE DATE			
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009			
		B. Itemized Contributi	ions fron	Individu	ıals						
Last Name Fedeli	First Name Josh		MI	Cash	contribution: Personal Ch v Order X Credit/Debi	neck 002	ibution ID #	Amount of Contribution			
Residential Street Address 133 Vine Rd		City Stamford		State CT	Zip Code 06905-2016	Date Rece 02/13/2					
Principal Occupation sales		Name of Employer Kodak			Is this contribution associate fundraising event listed in the second of the second second in the second sec		Yes X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Cor	\$100.00	\$100.00			
Last Name Sullivan	First Name Tighe		MI	Cash	contribution: Personal Ch / Order X Credit/Debi	neck 002	ibution ID #	Amount of Contribution			
Residential Street Address 118 5 Mile River Rd		City Darien		State CT	Zip Code 06820-6237	Date Rece 02/13/2					
Principal Occupation Managing Partner		Name of Employer Fraser Sullivan		•	Is this contribution associal fundraising event listed in S If yes, list Event #		Yes				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Con	s375.00	\$375.00			
Last Name Brody	First Name Adrian		MI P	Cash	contribution: Personal Ch Order X Credit/Debi	neck 002	ibution ID #	Amount of Contribution			
Residential Street Address 69 Hoyt Farm Rd		City New Canaan		State CT	Zip Code 06840-5035	Date Rece 02/13/2					
Principal Occupation Retired		Name of Employer None			Is this contribution associal fundraising event listed in the second of the second second in the second sec		Yes				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Cor	stributions \$150.00	\$150.00			
Last Name Chaltas	First Name Alison		MI	Cash	contribution: Personal Ch Order X Credit/Debi	neck 002	ibution ID #	Amount of Contribution			
Residential Street Address 11 Ocean Dr N		City Stamford		State CT	Zip Code 06902-7822	Date Rece 02/13/2					
Principal Occupation Marketing		Name of Employer Interscope, LLC			Is this contribution associal fundraising event listed in S If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob ves	byist?	Aggregate Cor	stributions \$100.00	\$100.00			

		I. MONETARY R	ECEIPT	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009
		B. Itemized Contribu	tions fron	n Individu	ıals			
Last Name Chaltas	First Name Thano		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	heck 0028	tion ID#	Amount of Contribution
Residential Street Address 11 Ocean Dr N		City Stamford		State CT	Zip Code 06902-7822	Date Receive 02/13/20		
Principal Occupation Marketing		Name of Employer UST, Inc.		•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	outor a lobbyis t child of a lob Yes X	byist?	Aggregate Contri	butions \$100.00	\$100.00
Last Name Spiegel	First Name Merle		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	heck 0030	tion ID#	Amount of Contribution
Residential Street Address 230 Saugatuck Ave Apt 13		City Westport		State CT	Zip Code 06880-6401	Date Receive 02/13/20		
Principal Occupation communications director		Name of Employer Purdue Pharma L.P.			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Contri	butions \$50.00	\$50.00
Last Name Waggaman	First Name Carol		MI M	Cash	contribution: Personal Cl y Order X Credit/Debi	heck 0031	tion ID#	Amount of Contribution
Residential Street Address 378 Pepper Ridge Rd		City Stamford		State CT	Zip Code 06905-2812	Date Receive 02/13/20		
Principal Occupation n/a		Name of Employer n/a			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	outor a lobbyis t child of a lob Yes X	byist?	Aggregate Contri	butions \$375.00	\$375.00
Last Name Waggaman	First Name Eugene		МІ	Cash	contribution: Personal Cl y Order X Credit/Debi	heck 0032	tion ID#	Amount of Contribution
Residential Street Address 378 Pepper Ridge Rd		City Stamford		State CT	Zip Code 06905-2812	Date Receive 02/13/20		
Principal Occupation executive		Name of Employer Advantage America Paperb	oard LLC	•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	bbyist?	Aggregate Contri	butions \$375.00	\$375.00

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE									FILING	G DUE DATE	
Dan Malloy For Connecticut (C	T)								Origina	al 04/13/2009	
B. Itemized Contributions from Individuals											
Last Name Morson	First Name Eric			MI	Cash	contribution: Personal G y Order X Credit/De		Contribution 0033	on ID#	Amount of Contribution	
Residential Street Address 306 Dundee Rd		City Stamford			State CT	Zip Code 06903-3612		ate Received 2/13/2009			
Principal Occupation registered investment advisor		Name of Employ AXA Advisor				Is this contribution associ fundraising event listed in If yes, list Event #		11?	Yes No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribu	75.00	\$75.00	
Last Name Selkowitz	First Name Arthur			MI	Cash	contribution: Personal (y Order X Credit/De		Contribution	on ID#	Amount of Contribution	
Residential Street Address 262 Ocean Dr E		City Stamford			State CT	Zip Code 06902-8238		ate Received 2/13/2009	9		
Principal Occupation Retired		Name of Employ	yer		•	Is this contribution associ fundraising event listed in If yes, list Event #		_{11?}	Yes No		
Is contributor a principal of a state contractor of state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu	ations 375.00	\$375.00	
Last Name Lenkowsky	First Name Diana			MI	Cash	contribution: Personal C y Order X Credit/De		Contribution 0035	on ID#	Amount of Contribution	
Residential Street Address 31 Cannon St		City Norwalk			State CT	Zip Code 06851-3825		ate Received			
Principal Occupation Administrator		Name of Employ Purdue Phar				Is this contribution associ fundraising event listed in If yes, list Event #		11?	Yes No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribu	ations 375.00	\$375.00	
Last Name Malloy	First Name John			MI	Cash	contribution: Personal G y Order X Credit/De		Contribution 0036	on ID #	Amount of Contribution	
Residential Street Address 612 Hope St # 1		City Stamford			State CT	Zip Code 06907-2710		ate Received 2/13/2009			
Principal Occupation Account Manager		Name of Employ Kodak	yer	_		Is this contribution associ fundraising event listed in If yes, list Event #		11?	Yes No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu	tions 50.00	\$50.00	

		I. M	ONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (CT	")								Origin	al 04/13/2009
		B. Ite	emized Contributi	ons from	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Graham	Jesse				Cash Money	Personal C V Order X Credit/Del		0029		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
108 E 91st St		New York			NY	10128-1657	0	2/13/2009)	
Principal Occupation		Name of En	nployer			Is this contribution associa	ated with	a	Yes	İ
Attorney		Rivlkin R	adler LLP			fundraising event listed in If yes, list Event #	Section .	11? x	No	
Is contributor a principal of a state contractor or	prospective		Yes X No		utor a lobbyis		Aggre	gate Contribu	tions	
state contractor? Is yes, indicate which branch or branches of		Executive	Legislative	1 ~	child of a lob	*		\$1	50.00	\$50.00
government the contract is with: Last Name	First Name	Executive	Legislative	Т _{МІ}		contribution:	<u> </u>	1	"	<u> </u>
	Timothy			IVII	Cash	Personal C	heck	Contributio	n ID#	Amount of Contribution
		Γ			Money	y Order X Credit/Deb	oit Card	0019		
Residential Street Address		City			State	Zip Code		ate Received		
5825 Main St		Stratford			СТ	06614	_	2/13/2009		
Principal Occupation		Name of En	nployer lackson & Kelly			Is this contribution association fundraising event listed in		J1?	Yes	
attorney		Бізпор, з	dekson & Keny			If yes, list Event #		X	No	
Is contributor a principal of a state contractor or	prospective		Yes X No		utor a lobbyis		Aggre	gate Contribu	tions	
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative		child of a lob	-		\$3	75.00	\$375.00
government the contract is with: Last Name	First Name	Laceutive	Legislative	MI		contribution:	<u> </u>		ID //	<u> </u>
	Samuel			R	Cash	Personal C	heck	Contributio	n ID#	Amount of Contribution
		ı			Money	y Order X Credit/Deb	oit Card	0033		
Residential Street Address		City			State	Zip Code		ate Received		
39 Chestnut Tree Hill Rd		Oxford			СТ	06478-1463		2/17/2009	<u>, </u>	
Principal Occupation professor of Middle Eastern		Name of En retired	nployer			Is this contribution association fundraising event listed in		J1?	Yes	
Studies		retired				If yes, list Event #		<u> x</u>	No	
Is contributor a principal of a state contractor or	prospective		Yes X No		utor a lobbyis		Aggre	gate Contribu	tions	
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative		child of a lob	-		\$	50.00	\$50.00
government the contract is with: Last Name	First Name	Laceutive	Legislative	MI		contribution:	<u> </u>		ID //	<u> </u>
	Jevera			IVII	Cash	Personal C	heck	Contributio	n ID#	Amount of Contribution
		ı			Money	y Order X Credit/Deb	oit Card	0040		
Residential Street Address		City			State	Zip Code		ate Received		
25 Wallacks Dr		Stamford			СТ	06902-7114	_	2/18/2009	<u>, </u>	
Principal Occupation		Name of En	nployer Hennessey, LLC			Is this contribution association fundraising event listed in		_{11?} 🗀	Yes	
Attorney		I haye a r	.c.messey, LLC			If yes, list Event #	_	<u> x</u>	No	
Is contributor a principal of a state contractor or	prospective		Yes X No		utor a lobbyis		Aggre	gate Contribu	tions	[
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative	dependent Y	child of a lob	-		\$3	75.00	\$375.00
government the contract is with:		LACCULIVE	Logislative	1 – ,	<u>ت</u>		<u> </u>			<u>i</u>

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 04/13/2009
		B. It	emized Contributi	ons fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Hennessey	William			J	Cash Money	Personal C X Credit/De		0041		Contribution
Residential Street Address		City			State	Zip Code	Б	ate Received		
25 Wallacks Dr		Stamford	I		СТ	06902-7114	0	2/18/2009	9	
Principal Occupation Attorney at Law		Name of Er Sandak,	nployer Hennessey & Greco			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribu \$3	itions 375.00	\$375.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Olson	Brian				Cash Money	Personal C y Order X Credit/De		0042	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Contribution
Residential Street Address		City			State	Zip Code	Б	ate Received		
44 Mayo Ave		Greenwic	:h		СТ	06830-7022	0	2/18/2009	9	
Principal Occupation		Name of Er	mployer			Is this contribution associ			Yes	
Retired		None				fundraising event listed in If yes, list Event #	1 Section .	x	No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribu \$3	ations 375.00	\$375.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Sharp	Daniel				Cash Money	y Order X Credit/De		0044		Contribution
Residential Street Address		City			State	Zip Code	Е	ate Received		
94 Campbell Dr		Stamford	<u> </u>		СТ	06903-4032	0	2/20/2009	9	
Principal Occupation		Name of Er				Is this contribution associ fundraising event listed in			Yes	
President		Assembl	stitution World Scien y	ice		If yes, list Event #		х	No	
Is contributor a principal of a state contractor	or prospective		Yes X No	Is contrib	outor a lobbyis	t, spouse, or	Aggre	egate Contribu	tions	
state contractor? Is yes, indicate which branch or branches of				1 ⁻	t child of a lob	•		\$	50.00	\$50.00
government the contract is with:		Executive	Legislative	 	Yes X	No		1		<u> </u>
Last Name Lee	First Name Kelly			MI	Method of Cash	contribution:	Theck	Contributio	on ID #	Amount of Contribution
Lee	Kelly					y Order X Credit/De		0045		Contribution
Residential Street Address		City			State	Zip Code	Е	ate Received		
25 Adams Ave Unit 212		Stamford	I		СТ	06902-3786	0	2/20/2009)	
Principal Occupation		Name of Er	nployer			Is this contribution associ			Yes	
controller		Markit N	orth America			fundraising event listed in If yes, list Event #	i section .	x	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		outor a lobbyis	-	Aggre	egate Contribu	tions	ĺ
state contractor? Is yes, indicate which branch or branches of		Executive	Legislative	1 -	t child of a lob Yes	•		\$1	.00.00	\$100.00
government the contract is with:		Executive	Legisiative	Т ,	100	INU	1			1

		I. MONETARY RI	ECEIPT	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILIN	IG DUE DATE
Dan Malloy For Connecticut (C	T)						Origi	nal 04/13/2009
		B. Itemized Contribut	tions fron	ı Individu	ıals		•	
Last Name	First Name		MI	Method of	contribution:		ontribution ID #	Amount of
Allen	Laurence			Cash Money	y Order X Personal Cl	00	046	Contribution
Residential Street Address		City	•	State	Zip Code	Date Ro	eceived	1
43 Maple Ave		Greenwich		СТ	06830-5645	02/20	0/2009	1
Principal Occupation		Name of Employer			Is this contribution associa fundraising event listed in		Yes	
investment banker		NYPPEX			If yes, list Event #	Section 31:	x No	
Is contributor a principal of a state contractor	or prospective	Yes X No		outor a lobbyis	-	Aggregate (Contributions	7
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive Legislative		t child of a lob Yes	-		\$375.00	\$375.00
Last Name	First Name		MI	Method of	contribution:	Cor	ontribution ID #	Amount of
Paulson	Alexande	r		Cash Money	Personal Cl x Credit/Deb	00	047	Contribution
Residential Street Address		City	•	State	Zip Code	Date Re	eceived	1
3836 Fulton St NW		Washington		DC	20007-1344	02/20	0/2009	1
Principal Occupation		Name of Employer			Is this contribution associa fundraising event listed in		Yes	
government		Rep. Jim Himes			If yes, list Event #	occuon v i	x No	
Is contributor a principal of a state contractor	or prospective	Yes X No		outor a lobbyis	-	Aggregate (Contributions	7
state contractor? Is yes, indicate which branch or branches of	П	Executive Legislative	_ l `──	t child of a lob Yes	•		\$40.00	\$40.00
government the contract is with:	I Firmt Name	Executive Legislative	I _{MI}					1
Last Name Katz	First Name Aaron		MI	Cash	contribution: Personal Cl	heck	ontribution ID #	Amount of Contribution
				Money	y Order X Credit/Deb	it Card	048	_
Residential Street Address		City		State	Zip Code	Date Re		
232 Redding Rd		Easton		СТ	06612-1518		0/2009	4
Principal Occupation		Name of Employer Stamford Ambulance Corps			Is this contribution associa fundraising event listed in		Yes	
Supervisor of Paramedics		Stamora Ambalance Corps	•		If yes, list Event #		x No	
Is contributor a principal of a state contractor	or prospective	Yes X No		outor a lobbyis		Aggregate (Contributions	1
state contractor? Is yes, indicate which branch or branches of	П	Executive Legislative	_ l `──	t child of a lob Yes	•		\$100.00	\$100.00
government the contract is with: Last Name	First Name	<u> </u>	MI		contribution:		ontribution ID #	
Carlson	Don		IVII	Cash	Personal Cl	heck	049	Amount of Contribution
		1		Money	y Order X Credit/Deb			4
Residential Street Address 20 Shore Acre Dr		City Old Greenwich		State CT	Zip Code 06870-2130		eceived 0/2009	
				CI	Is this contribution associa		<u> </u>	+
Principal Occupation business consultant		Name of Employer Carlson Consulting Inc.			fundraising event listed in		Yes	
					If yes, list Event #		x No	
Is contributor a principal of a state contractor state contractor?	or prospective	Yes X No		outor a lobbyis t child of a lob		Aggregate (Contributions	
Is yes, indicate which branch or branches of		Executive Legislative		res x	-		\$375.00	\$375.00

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILING	G DUE DATE			
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009			
B. Itemized Contributions from Individuals											
Last Name Shapiro	First Name Warren		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 005	ribution ID #	Amount of Contribution			
Residential Street Address 27 Park Ln		City Westport		State CT	Zip Code 06880-4418	Date Rece 02/20/2					
Principal Occupation sales manager bio-pharma		Name of Employer Roche Labs			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Cor	\$25.00	\$25.00			
Last Name Cooper	First Name Eric		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 004	ribution ID#	Amount of Contribution			
Residential Street Address 1924 Long Ridge Rd		City Stamford		State CT	Zip Code 06903-3232	Date Rece 02/20/2					
Principal Occupation Educator		Name of Employer National Urban Alliance		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Cor	ntributions \$375.00	\$375.00			
Last Name Cicarello-Robinson	First Name Marilyn		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 005	ibution ID #	Amount of Contribution			
Residential Street Address 21 Linden St Apt 5		City Norwalk		State CT	Zip Code 06851-1550	Date Rece 02/21/2					
Principal Occupation retired		Name of Employer none			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Co	s50.00	\$50.00			
Last Name Pittoni	First Name Luke		MI M	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 005	ribution ID #	Amount of Contribution			
Residential Street Address 283 Quarry Rd		City Stamford		State CT	Zip Code 06903-5011	Date Recei					
Principal Occupation Attorney		Name of Employer Heidell, Pittoni, Murphy Bard	d	•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor of state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Cor	s375.00	\$375.00			

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILIN	G DUE DATE			
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009			
B. Itemized Contributions from Individuals											
Last Name Pittoni	First Name Mary Jo		MI J	Cash	contribution: Personal C y Order X Credit/Deb	heck 0053	ution ID#	Amount of Contribution			
Residential Street Address 283 Quarry Rd		City Stamford		State CT	Zip Code 06903-5011	Date Receiv					
Principal Occupation Assistant Principal		Name of Employer TOR Middle School			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative		ntributor a lobbyis dent child of a lob Yes		Aggregate Cont	ributions \$375.00	\$375.00			
Last Name Painter	First Name Andrew		MI	Cash	contribution: Personal C y Order X Credit/Deb	heck 0054	ution ID#	Amount of Contribution			
Residential Street Address 7840 SW 195th Ter		City Cutler Bay		State FL	Zip Code 33157-8130	Date Receiv					
Principal Occupation Retired		Name of Employer None		·	Is this contribution associa fundraising event listed in If yes, list Event #		Yes No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No		ntributor a lobbyis dent child of a lob Yes	-	Aggregate Cont	ributions \$375.00	\$375.00			
Last Name Darris	First Name Cranston		MI	Cash	contribution: Personal C y Order X Credit/Deb	heck 0055	ution ID#	Amount of Contribution			
Residential Street Address 91 Strawberry Hill Ave Apt 325		City Stamford		State CT	Zip Code 06902-2746	Date Receiv					
Principal Occupation operations improvement consultant		Name of Employer Darris Consulting		·	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative		ntributor a lobbyis dent child of a lob Yes		Aggregate Cont	ributions \$100.00	\$100.00			
Last Name Harvey	First Name Darrell		MI	Cash	contribution: Personal C y Order X Credit/Deb	heck 0056	ution ID#	Amount of Contribution			
Residential Street Address 18 Peach Hill Rd		City Darien		State CT	Zip Code 06820-2821	Date Receiv					
Principal Occupation Co-CEO		Name of Employer The Ashforth Company		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative		ntributor a lobbyis dent child of a lob Yes	-	Aggregate Cont	ributions \$375.00	\$375.00			

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILIN	G DUE DATE			
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009			
B. Itemized Contributions from Individuals											
Last Name Ternier	First Name Melissa		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 0069	bution ID#	Amount of Contribution			
Residential Street Address 16 Bouton St E Apt 20		City Stamford		State CT	Zip Code 06907-1677	Date Recei					
Principal Occupation assistant modeling engineer		Name of Employer Hamworthy Peabody Combus	stion		Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Con	\$50.00	\$50.00			
Last Name Rich	First Name Robert		MI N	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 0070	bution ID#	Amount of Contribution			
Residential Street Address 222 Summer St		City Stamford		State CT	Zip Code 06901-2303	Date Recei					
Principal Occupation Executive		Name of Employer F.D. Rich		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Con	tributions \$375.00	\$375.00			
Last Name Lasko	First Name William		MI J	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 0071	bution ID #	Amount of Contribution			
Residential Street Address 40 Four Brooks Rd		City Stamford		State CT	Zip Code 06903-4615	Date Recei					
Principal Occupation attorney		Name of Employer NYC		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Con	tributions \$50.00	\$50.00			
Last Name Kruger	First Name Thomas		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 0074	bution ID#	Amount of Contribution			
Residential Street Address 224 Dolphin Cv Quay		City Stamford		State CT	Zip Code 06902-7752	Date Recei					
Principal Occupation Attorney		Name of Employer Paul Hastings	_	•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	outor a lobbyist child of a lob	byist?	Aggregate Con	tributions \$375.00	\$375.00			

		I. MONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE							F	ILING	DUE DATE
Dan Malloy For Connecticut (C	T)						О	rigina	1 04/13/2009
		B. Itemized Contribut	ions fron	ı Individu	ıals				
Last Name Bailie	First Name Maureen		MI	Cash	contribution: Personal C		Contribution II	D#	Amount of Contribution
Residential Street Address 224 Dolphin Cv Quay		City Stamford		State CT	Zip Code 06902-7752		ate Received 2/26/2009		
Principal Occupation Human Resource Director		Name of Employer Exenet			Is this contribution associa fundraising event listed in If yes, list Event #		LII	es Io	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	utor a lobbyis child of a lob Yes	byist?	Aggre	gate Contribution \$375	1	\$375.00
Last Name Williams	First Name Dudley		MI N	Cash	contribution: Personal Contribution: y Order X Credit/Deb		Contribution II	D#	Amount of Contribution
Residential Street Address 101 Dogwood Ln		City Stamford		State CT	Zip Code 06903-4532		ate Received 2/27/2009		
Principal Occupation Manager		Name of Employer GE Asset Management		-	Is this contribution associa fundraising event listed in If yes, list Event #			es Io	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribution \$375	1	\$375.00
Last Name Sheridan	First Name David		MI M	Cash	contribution: X Personal Contribution: y Order Credit/Deb		Contribution II	D#	Amount of Contribution
Residential Street Address 24 Yale Dr		City Manchester		State CT	Zip Code 06042-8504		ate Received 2/28/2009		
Principal Occupation attorney		Name of Employer Levy & Droney, PC		•	Is this contribution associa fundraising event listed in If yes, list Event #		1 1		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	utor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribution \$100		\$100.00
Last Name Goldstein	First Name Robert		MI L	Cash	contribution: X Personal City Order Credit/Deb		Contribution II	D#	Amount of Contribution
Residential Street Address 86 Barnes Rd		City Stamford		State CT	Zip Code 06902-1241		ate Received 2/28/2009		
Principal Occupation Accountant		Name of Employer Marks Paneth		•	Is this contribution associa fundraising event listed in If yes, list Event #			1	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	outor a lobbyis t child of a lob	byist?	Aggre	gate Contribution \$375	1	\$375.00

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILING	G DUE DATE			
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009			
B. Itemized Contributions from Individuals											
Last Name Fuller	First Name Joseph		MI	Cash	contribution: X Personal C y Order Credit/Deb	0079	tion ID#	Amount of Contribution			
Residential Street Address 35 Sherwood Dr		City Westport		State CT	Zip Code 06880-6626	Date Receive 02/28/200					
Principal Occupation Architect		Name of Employer F&D Architects			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No		ntributor a lobbyis dent child of a lob Yes	byist?	Aggregate Contri	butions \$375.00	\$375.00			
Last Name Casper	First Name Stewart		MI M	Cash	contribution: X Personal C y Order Credit/Deb	I 0080	tion ID#	Amount of Contribution			
Residential Street Address 72 Seir Hill Rd		City Wilton		State CT	Zip Code 06897-4207	Date Receive 02/28/200					
Principal Occupation Attorney		Name of Employer Casper & De Toledo LLC		·	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative		ntributor a lobbyis dent child of a lob Yes	byist?	Aggregate Contri	butions \$375.00	\$375.00			
Last Name DeYulio	First Name Victor		MI	Cash	contribution: X Personal C y Order Credit/Deb	0081	tion ID#	Amount of Contribution			
Residential Street Address 252 Long Neck Point Rd		City Darien		State CT	Zip Code 06820-5816	Date Receive 02/28/200					
Principal Occupation none		Name of Employer none		•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	Is condependent	ntributor a lobbyis dent child of a lob Yes	byist?	Aggregate Contri	butions \$375.00	\$375.00			
Last Name Wheeler	First Name Jay		MI	X Cash	contribution: Personal C y Order Credit/Deb	heck 0082	tion ID#	Amount of Contribution			
Residential Street Address 63 Willetts Ave		City New London		State CT	Zip Code 06320-5429	Date Receive 02/28/200					
Principal Occupation director of campus security		Name of Employer Mitchell College		·	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No				
Is contributor a principal of a state contractor of state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative		ntributor a lobbyis dent child of a lob Yes	byist?	Aggregate Contril	butions \$30.00	\$30.00			

		I. N	MONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 04/13/2009
		B. It	temized Contributi	ons fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Miller	Len			S	Cash Money	y Order Personal C		0072		Contribution
Residential Street Address		City			State	Zip Code	Е	Date Received	l	
8 Kings Ln		Essex			СТ	06426-1012	C)2/28/200	9	
Principal Occupation		Name of E	imployer			Is this contribution associ fundraising event listed in			Yes	
retired		retired		-		If yes, list Event #		<u> </u>	No No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis		Aggre	egate Contrib	utions	
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		child of a lob	-		\$	375.00	\$375.00
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Miller	Catherine				Cash Money	y Order		0073		Contribution
Residential Street Address		City			State	Zip Code	Г	Date Received	l	
8 Kings Ln		Essex			СТ	06426-1012	C)2/28/200	9	1
Principal Occupation		Name of E	imployer			Is this contribution associ fundraising event listed in			Yes	
system analyst (IT)		self				If yes, list Event #		<u> </u>	No	
Is contributor a principal of a state contractor	or prospective		Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	egate Contrib	utions	†
state contractor? Is yes, indicate which branch or branches of			П	1 î—	child of a lob	•		\$	375.00	\$375.00
government the contract is with:		Executive	Legislative	 	res X		<u> </u>	1		
Last Name Taylor	First Name Kathryn L			MI	Method of Cash	contribution:	Check	Contributi	on ID#	Amount of Contribution
Taylor	Racinyii E					y Order Credit/Del	bit Card	0083		Contribution
Residential Street Address		City			State	Zip Code		Date Received		
1144 S Lewis Ave		Tulsa			OK	74104-3906	C)3/02/200	9	<u> </u>
Principal Occupation		Name of E				Is this contribution associ fundraising event listed in		J1?	Yes	
Mayor		City of	ruisa			If yes, list Event #		<u> </u>	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis		Aggre	egate Contrib	utions	
state contractor? Is yes, indicate which branch or branches of		Executive	Legislative	1 —	child of a lob	-		\$	375.00	\$375.00
government the contract is with: Last Name	First Name	Executive	Legislative	I Ш .	1	contribution:	<u> </u>	1	"	<u> </u>
Kaplan	Richard			IVII	Cash	Personal C	Check	Contributi 0084	on ID#	Amount of Contribution
					Mone	y Order X Credit/Del	bit Card	0004		
Residential Street Address		City			State	Zip Code	- 1	Date Received		
4866 NW 67th Ave		Lauderh			FL	33319-7214)3/02/200		<u> </u>
Principal Occupation		Name of E	imployer Lauderhill			Is this contribution associ fundraising event listed in		J1?	_	
Mayor						If yes, list Event #			No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis		Aggre	egate Contrib	utions	
Is yes, indicate which branch or branches of		Executive	Legislative		child of a lob	-		:	\$50.00	\$50.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILIN	G DUE DATE		
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009		
		B. Itemized Contribut	ions fron	ı Individu	ıals					
Last Name Ferris	First Name Roger		MI P	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 0085	bution ID #	Amount of Contribution		
Residential Street Address 81 Coleytown Rd		City Westport		State CT	Zip Code 06880-1529	Date Recei				
Principal Occupation Architect		Name of Employer Roger Ferris & Partners			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	utor a lobbyis child of a lob Yes	byist?	Aggregate Con	tributions \$375.00	\$375.00		
Last Name Greenfield	First Name Constance	e	MI	Cash	contribution: X Personal Cl y Order Credit/Deb	heck 0086	bution ID #	Amount of Contribution		
Residential Street Address 279 Sturges Hwy		City Westport		State CT	Zip Code 06880-1722	Date Recei				
Principal Occupation retired		Name of Employer n/a		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Con	tributions \$375.00	\$375.00		
Last Name Greenfield	First Name Stewart		MI H	Cash	contribution: X Personal Cl y Order Credit/Deb	heck 0087	bution ID #	Amount of Contribution		
Residential Street Address 279 Sturges Hwy		City Westport		State CT	Zip Code 06880-1722	Date Recei				
Principal Occupation Investment Advisor		Name of Employer Alternative Investment Grou	ıp	•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	outor a lobbyis t child of a lob Yes X	byist?	Aggregate Con	tributions \$375.00	\$375.00		
Last Name Osman	First Name Stephen		MI C	Cash	contribution: X Personal Cl y Order Credit/Deb	heck 0088	bution ID#	Amount of Contribution		
Residential Street Address 57 W Hill Rd		City Stamford		State CT	Zip Code 06902-2029	Date Recei				
Principal Occupation retired		Name of Employer retired			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	utor a lobbyis child of a lob Yes	byist?	Aggregate Con	tributions \$375.00	\$375.00		

		I. MONETARY R	ECEIPT	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009
		B. Itemized Contribu	itions fron	n Individu	ıals			
Last Name	First Name		MI		contribution:	l l	oution ID #	Amount of
Rapoport	Jerome			Cash Mone	y Order Credit/Deb	0089		Contribution
Residential Street Address 122 Davenport Dr		City Stamford		State CT	Zip Code 06902-7713	Date Recei		
Principal Occupation		Name of Employer		Ci	Is this contribution associa			†
not listed		Data Guard			fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	butor a lobbyis at child of a lob Yes	byist?	Aggregate Cont	ributions \$375.00	\$375.00
Last Name Lombardi	First Name Diana		MI R	Cash	contribution: X Personal Cl	heck 0090	oution ID#	Amount of Contribution
Residential Street Address 57 Vineyard Dr		City Berlin	·	State CT	Zip Code 06037-1832	Date Recei		
Principal Occupation retired		Name of Employer retired		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	butor a lobbyis at child of a lob Yes	byist?	Aggregate Cont	ributions \$100.00	\$100.00
Last Name Cingari	First Name Salvatore	,	MI A	Cash	contribution: X Personal Cl y Order Credit/Deb	heck 0091	oution ID#	Amount of Contribution
Residential Street Address 2236 Shippan Ave		City Stamford		State CT	Zip Code 06902-8210	Date Recei		
Principal Occupation Owner		Name of Employer Grade A/Shoprite		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	butor a lobbyis at child of a lob Yes	byist?	Aggregate Cont	ributions \$375.00	\$375.00
Last Name Phillips	First Name Patricia		MI	Cash	contribution: X Personal Cl y Order	heck 0093	oution ID#	Amount of Contribution
Residential Street Address 130 Wallacks Dr		City Stamford		State CT	Zip Code 06902-7100	Date Recei		
Principal Occupation volunteer		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	butor a lobbyis at child of a lob	byist?	Aggregate Cont	ributions \$375.00	\$375.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 04/13/2009
		B. It	emized Contribut	ions fron	ı Individu	ıals		·		
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Phillips	Robert				Cash Money	y Order X Personal C		0094		Contribution
Residential Street Address	•	City			State	Zip Code	Б	ate Received		
130 Wallacks Dr		Stamford	I		СТ	06902-7100	0	3/04/2009	Ð	
Principal Occupation		Name of Er			•	Is this contribution associ fundraising event listed in		J1?		
advisor/banker		Peter J.	Solomon Co.			If yes, list Event #		x	No	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis		Aggre	gate Contribu	itions	
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	Î	res x	•		\$3	375.00	\$375.00
Last Name	First Name			MI	Method of	contribution:	<u>'</u>	Contributio	on ID #	Amount of
Keeney	Wayne				Cash Money	y Order Resonal C		0096)II II	Contribution
Residential Street Address	1	City			State	Zip Code	Г	ate Received		
1187 Broad St Ste B		Bridgepo	rt		СТ	06604-4121	0	3/04/2009	€	
Principal Occupation		Name of Er	nployer		•	Is this contribution associ			Yes	ĺ
Attorney at Law		Self Emp	oloyed			fundraising event listed in If yes, list Event #	n Section .	x x	No	
Is contributor a principal of a state contractor state contractor?	or prospective	•	Yes X No		utor a lobbyis child of a lob	-	Aggre	gate Contribu	itions 350.00	\$350.00
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		res X	No		⊅ ~		\$330.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Cohen	Richard			J	Cash Money	y Order		0095		Contribution
Residential Street Address		City			State	Zip Code	Б	ate Received		
230 Butternut Ln		Stamford	l		СТ	06903-3830	0	3/04/2009	9	
Principal Occupation		Name of Er	nployer			Is this contribution associ fundraising event listed in			Yes	
Retired		None				If yes, list Event #		х	No	
Is contributor a principal of a state contractor	or prospective		Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	gate Contribu	itions	
state contractor? Is yes, indicate which branch or branches of					child of a lob	-		\$3	375.00	\$375.00
government the contract is with:	<u>_</u>	Executive	Legislative	+ -	res X			1		
Last Name Urbank	First Name Katharine			MI S	Method of Cash	contribution:	Check	Contributio	on ID #	Amount of Contribution
Orbank	Katriaririe]		y Order X Credit/De		0101		Contribution
Residential Street Address		City			State	Zip Code	Б	ate Received		
227 Brookdale Rd		Stamford	l		СТ	06903-4118	0	3/06/2009	9	
Principal Occupation		Name of Er	mployer			Is this contribution associ fundraising event listed in			Yes	
none		none				If yes, list Event #	. Beeuon .	x	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis	-	Aggre	gate Contribu	itions	
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative	Î	child of a lob	•		\$	20.00	\$10.00
government the contract is with:		LACCULIVE	Legislative		ت	*10	1			1

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILIN	G DUE DATE		
Dan Malloy For Connecticut (C	T)						Origii	nal 04/13/2009		
		B. Itemized Contribut	ions fron	ı Individu	ıals		<u> </u>			
Last Name Hartwell	First Name John		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 0:	ontribution ID#	Amount of Contribution		
Residential Street Address PO Box 266		City Greens Farms		State CT	Zip Code 06838-0266		Received 18/2009			
Principal Occupation consultant		Name of Employer self		-	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate	Contributions \$375.00	\$375.00		
Last Name Golub	First Name David		MI S	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 0:	ontribution ID#	Amount of Contribution		
Residential Street Address 47 Old Long Ridge Rd		City Stamford		State CT	Zip Code 06903-1620		Received 19/2009			
Principal Occupation Attorney		Name of Employer Silver Golub & Teitell LLP			Is this contribution associa fundraising event listed in If yes, list Event #		Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate	Contributions \$375.00	\$375.00		
Last Name Ettinger	First Name Irwin		MI R	Cash	contribution: X Personal Cl	heck 00	ontribution ID#	Amount of Contribution		
Residential Street Address 631 Long Ridge Rd Unit 40		City Stamford		State CT	Zip Code 06902-1263		Received 19/2009			
Principal Occupation Executive		Name of Employer Travelers Party & Casualty		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate	Contributions \$375.00	\$375.00		
Last Name Jackson	First Name Michael		MI C	Cash	contribution: X Personal Cl y Order Credit/Deb	heck 00	ontribution ID#	Amount of Contribution		
Residential Street Address 177 Sabbaday Ln		City Washington Depot		State CT	Zip Code 06794-1221		Received 19/2009			
Principal Occupation Equity Investor		Name of Employer Ironwood Partners			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate	Contributions \$375.00	\$375.00		

		I. M	ONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Dan Malloy For Connecticut (C	TT)								Origina	al 04/13/2009
		B. Ite	emized Contributi	ons from	ı Individu	ıals				
Last Name Cingari	First Name Rocco			MI	Cash	contribution: X Personal C Order Credit/Del		Contribution	ID#	Amount of Contribution
Residential Street Address 249 Hamilton Ave		City Stamford			State CT	Zip Code 06902-3415		Date Received 03/09/2009		
Principal Occupation Owner		Name of En	nployer / Shop Rite			Is this contribution associ- fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contributi \$37	ons 75.00	\$375.00
Last Name Malloy	First Name Howard			MI P	Cash	contribution: X Personal C Order Credit/Del		Contribution 0103	ID#	Amount of Contribution
Residential Street Address 68 Eagle Dr		City Stamford			State CT	Zip Code 06903-3917		Date Received		
Principal Occupation Real Estate		Name of En	nployer			Is this contribution associ- fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contributi \$37	ons 75.00	\$375.00
Last Name Vollmer	First Name Edward			MI	Cash	contribution: X Personal C Order Credit/Del		Contribution 0104	ID#	Amount of Contribution
Residential Street Address 322 Hoyt Farm Rd		City New Cana	aan		State CT	Zip Code 06840-5044		Date Received 03/12/2009		
Principal Occupation Retired		Name of En	nployer		•	Is this contribution associ- fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contribution \$5	ons 50.00	\$50.00
Last Name Giordano	First Name Phillip			MI J	Cash	contribution: X Personal C		Contribution 0105	ID#	Amount of Contribution
Residential Street Address 54 W North St Apt 305		City Stamford			State CT	Zip Code 06902-2222		Date Received 03/12/2009		
Principal Occupation Retired		Name of En Retired	nployer			Is this contribution associ fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contributi \$10	ons 00.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 04/13/2009
		B. It	emized Contributi	ons from	ı Individ	uals				
Last Name Nemec	First Name Michael			MI P	Cash	contribution: X Personal (y Order Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 25 Adams Ave Unit 110		City Stamford	ı		State CT	Zip Code 06902-3785		Oate Received 03/12/200		
Principal Occupation n/a		Name of Er	nployer			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob res	obyist?	Aggre	egate Contrib	utions 100.00	\$100.00
Last Name Duffy	First Name James			MI	Cash	contribution: X Personal of the property of t		Contributi	on ID#	Amount of Contribution
Residential Street Address 8 Runningbrook Ln		City New Can	aan		State CT	Zip Code 06840-6547		ate Received		
Principal Occupation Finance		Name of Er Oakleaf	nployer		•	Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	outor a lobbyis child of a lob Yes	-	Aggre	egate Contrib	utions 375.00	\$375.00
Last Name Melzer	First Name Franklin			MI	Cash	contribution: X Personal C y Order Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 180 Turn of River Rd Unit 1D		City Stamford	I		State CT	Zip Code 06905-1331		Date Received 03/12/200		
Principal Occupation Attorney		Name of E	nployer nwealth Land Title Co			Is this contribution assoc fundraising event listed in If yes, list Event #		_{J1?} L	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyist child of a lob		Aggre	egate Contrib	utions \$50.00	\$50.00
Last Name Gebrian	First Name Jeffrey			MI A	Cash	contribution: X Personal 0 y Order Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 56 Sunrise Hill Dr		City West Har	tford		State CT	Zip Code 06107-3350		ate Received		
Principal Occupation Landscape Architect		Name of E	nployer ./Landscaping & Arch	itect		Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	-	Aggre	egate Contrib	utions 250.00	\$250.00

		I. MONETARY RE	ECEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE							FI	LING DUE DATE	
Dan Malloy For Connecticut (C	T)						Oi	riginal 04/13/2009	
		B. Itemized Contribut	ions fron	ı Individu	ıals				
Last Name	First Name		MI	Method of	contribution:	С	Contribution ID)# Amount o	f
Lentz	Mervyn		D	Cash Money	y Order X Personal Cl Credit/Deb	10	0110	Contribution	on
Residential Street Address		City		State	Zip Code	Date	Received		
34 Avondale Rd		West Hartford		СТ	06117-1107	03/1	12/2009		
Principal Occupation		Name of Employer			Is this contribution associa fundraising event listed in		Ye	es	
wholesaler		Brescome Barton Inc			If yes, list Event #		X No)	
Is contributor a principal of a state contractor state contractor?	or prospective	Yes X No		outor a lobbyis	-	Aggregate	e Contributions	3	
Is yes, indicate which branch or branches of government the contract is with:		Executive Legislative		t child of a lob	-		\$100.	.00 \$1	100.00
Last Name	First Name		MI	Method of	contribution:		Contribution ID)# Amount o	f
Trott	Edward		W	Cash Money	y Order X Personal Cl Credit/Deb	10	0111	Contribution	on
Residential Street Address		City		State	Zip Code	Date	Received		
97 Sea Beach Dr		Stamford		СТ	06902-8125	03/1	12/2009		
Principal Occupation		Name of Employer			Is this contribution associa fundraising event listed in		Ye	es	
Accountant		Price Waterhouse			If yes, list Event #	occion v i .	x No		
Is contributor a principal of a state contractor	or prospective	Yes X No		outor a lobbyis	-	Aggregate	e Contributions	3	
state contractor? Is yes, indicate which branch or branches of	П		I	t child of a lob Yes	•		\$200.	.00 \$2	200.00
government the contract is with:	<u> </u>	Executive Legislative	+ -					<u> </u>	
Last Name Deragon	First Name Russell		MI	Method of Cash	contribution: X Personal Cl	heck	Contribution ID	O# Amount o Contributio	
20.dgo.:	- Kubban	1			y Order Credit/Deb		0112	Contribution	<i>,</i> 11
Residential Street Address		City		State	Zip Code		Received		
97 W Main St Apt 88		Niantic		СТ	06357-1732	03/1	12/2009		
Principal Occupation		Name of Employer retired			Is this contribution associa fundraising event listed in		Ye		
Episcopal Priest		retired			If yes, list Event #		X No		
Is contributor a principal of a state contractor	or prospective	Yes X No		outor a lobbyis		Aggregate	e Contributions	3	
state contractor? Is yes, indicate which branch or branches of	П	Executive Legislative		t child of a lob Tes	•		\$25.	.00	\$25.00
government the contract is with: Last Name	First Name	Executive Eegistative			contribution:		a . a	.,,	
Blum	Irving		M	Cash	X Personal Cl	heck	Contribution ID 0113	Amount o Contributio	
		1		Money	y Order Credit/Deb		0113		
Residential Street Address		City		State	Zip Code		Received		
54 W North St Apt 416		Stamford		СТ	06902-2227		12/2009		
Principal Occupation		Name of Employer retired			Is this contribution associa fundraising event listed in		∐ Ye		
accountant		. San eu			If yes, list Event #		X No)	
Is contributor a principal of a state contractor	or prospective	Yes X No		outor a lobbyis		Aggregate	e Contributions	3	
Is yes, indicate which branch or branches of		Executive Legislative		t child of a lob Yes	-		\$100.	.00 \$1	100.00

		I. MONETARY R	ECEIPT	S (Sectio	n A-I)				
NAME OF COMMITTEE							F	FILING	DUE DATE
Dan Malloy For Connecticut (C	TT)						С	Origina	1 04/13/2009
		B. Itemized Contribu	tions fron	n Individu	ıals		<u> </u>		
Last Name Tarzia	First Name Joseph		MI R	Cash	contribution: X Personal C y Order Credit/Deb		Contribution II	D#	Amount of Contribution
Residential Street Address 58 Deacon Hill Rd		City Stamford		State CT	Zip Code 06905-3011		ate Received 3/12/2009		
Principal Occupation building inspector		Name of Employer unemployed			Is this contribution associa fundraising event listed in If yes, list Event #		Y	∕es No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	butor a lobbyis at child of a lob Yes	byist?	Aggre	gate Contribution \$100		\$100.00
Last Name Salvatore	First Name Ryan		MI	Cash	contribution: X Personal C y Order Credit/Deb		Contribution II	D#	Amount of Contribution
Residential Street Address 76 Auldwood Rd		City Stamford		State CT	Zip Code 06902-7816		ate Received 3/12/2009		
Principal Occupation Real Estate Development		Name of Employer The Nassau Interests			Is this contribution association fundraising event listed in If yes, list Event #		Y	/es No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	outor a lobbyis at child of a lob Yes	byist?	Aggre	gate Contribution \$200		\$200.00
Last Name Fox	First Name Roger		MI J	Cash	contribution: Personal C y Order X Credit/Deb		Contribution II	D#	Amount of Contribution
Residential Street Address 81 Sweet Briar Rd		City Stamford		State CT	Zip Code 06905-1513		ate Received 3/12/2009		
Principal Occupation First V.P. Investments		Name of Employer Merril Lynch		•	Is this contribution association fundraising event listed in If yes, list Event #		1 1 1	res No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	outor a lobbyis at child of a lob Yes	byist?	Aggre	gate Contribution \$375		\$375.00
Last Name Chrust	First Name Steven		MI	Cash	contribution: Personal C y Order X Credit/Deb		Contribution II	D#	Amount of Contribution
Residential Street Address 107 Saddle Rock Rd		City Stamford		State CT	Zip Code 06902-8228		ate Received 3/12/2009		
Principal Occupation Investments		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event #			res No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	outor a lobbyis at child of a lob	byist?	Aggre	gate Contribution \$375		\$375.00

I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTEE							FILIN	G DUE DATE	
Dan Malloy For Connecticut (C	T)						Origin	nal 04/13/2009	
		B. Itemized Contributi	ions fron	Individu	ıals				
Last Name Breed	First Name Rebecca		MI	Cash	contribution: X Personal Cl	neck 0092	oution ID#	Amount of Contribution	
Residential Street Address 38 Calhoun Dr		City Greenwich		State CT	Zip Code 06831-4438	Date Receive 03/12/20			
Principal Occupation Attorney		Name of Employer Self Employed			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Cont	sibutions \$375.00	\$375.00	
Last Name Mark	First Name Len		MI H	Cash	contribution: Personal Cl y Order X Credit/Deb	neck 0132	oution ID#	Amount of Contribution	
Residential Street Address 55 Toilsome Brook Rd		City Stamford		State CT	Zip Code 06905-3952	Date Receive 03/13/20			
Principal Occupation Property Manager		Name of Employer Shoreline Management Co.		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Cont	ributions \$375.00	\$375.00	
Last Name Lessard	First Name Christian		MI J	Cash	contribution: Personal Cl y Order X Credit/Deb	neck 0133	oution ID#	Amount of Contribution	
Residential Street Address 8521 Leesburg Pike Ste 700		City Vienna		State VA	Zip Code 22182-2490	Date Receiv			
Principal Occupation Architect		Name of Employer Lessard Group Inc.		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Cont	ributions \$375.00	\$375.00	
Last Name Jenkins	First Name John		MI M	Cash	contribution: Personal Cl y Order X Credit/Deb	neck 0134	oution ID#	Amount of Contribution	
Residential Street Address 3619 N Peary St		City Arlington		State VA	Zip Code 22207-5345	Date Receive 03/13/20			
Principal Occupation Architect		Name of Employer Lessard Group, Inc.		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Cont	ributions \$375.00	\$375.00	

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILI	NG DUE DATE
Dan Malloy For Connecticut (C	T)						Origi	inal 04/13/2009
		B. Itemized Contribut	ions fron	ı Individu	ıals			
Last Name Emmett	First Name Kathryn		MI	Cash	contribution: X Personal Characteristics Personal Characteristics Credit/Debit Personal Characteristics Personal Cha	neck 01	ontribution ID #	Amount of Contribution
Residential Street Address 47 Old Long Ridge Rd		City Stamford		State CT	Zip Code 06903-1620		eceived 4/2009	
Principal Occupation Attorney		Name of Employer Emmett & Glander (self)		•	Is this contribution associal fundraising event listed in S If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate (Contributions \$375.00	\$375.00
Last Name Bonom	First Name Sandra		MI F	Cash	contribution: X Personal Cl y Order Credit/Debi	neck 01	ontribution ID #	Amount of Contribution
Residential Street Address 3 Dora St		City Stamford		State CT	Zip Code 06902-5414		eceived 4/2009	
Principal Occupation dog groomer		Name of Employer Pet Smart			Is this contribution associate fundraising event listed in St. If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate (Contributions \$25.00	\$25.00
Last Name O'Sullivan	First Name Patrick		MI B	Cash	contribution: X Personal Ch y Order Credit/Debi	neck 01	ontribution ID #	Amount of Contribution
Residential Street Address 701 Orange Center Rd		City Orange		State CT	Zip Code 06477-1830		eceived 4/2009	
Principal Occupation Town Clerk		Name of Employer Town of Orange			Is this contribution associate fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate (Contributions \$25.00	\$25.00
Last Name Budd	First Name Martin		MI L	Cash	contribution: X Personal Cl y Order Credit/Debi	neck 01	ontribution ID #	Amount of Contribution
Residential Street Address 215 Ocean Dr W		City Stamford		State CT	Zip Code 06902-8005		eceived 4/2009	
Principal Occupation retired		Name of Employer retired		•	Is this contribution associal fundraising event listed in S If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate (Contributions \$375.00	\$375.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE							F	FILING	DUE DATE
Dan Malloy For Connecticut (C	T)						C	Origina	1 04/13/2009
		B. Itemized Contribut	ions fron	Individu	ıals				
Last Name	First Name		MI	Method of Cash	contribution:		Contribution I	D#	Amount of
Budd	Aviva	1			y Order Credit/Debi		0125		Contribution
Residential Street Address 215 Ocean Dr W		City Stamford		State CT	Zip Code 06902-8005		e Received /14/2009		
Principal Occupation retired		Name of Employer retired			Is this contribution associa fundraising event listed in If yes, list Event #			res No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregat	te Contribution \$375		\$375.00
Last Name Steinmetz	First Name Shirley		MI	Cash	contribution: X Personal Cl y Order Credit/Debi	neck	Contribution II	D#	Amount of Contribution
Residential Street Address 375 Brimfield Rd		City Wethersfield		State CT	Zip Code 06109-3203		e Received /14/2009		
Principal Occupation retired		Name of Employer retired			Is this contribution associa fundraising event listed in If yes, list Event #		Y X N	res No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregat	te Contribution		\$100.00
Last Name Dennies	First Name Sandra		MI L	Cash	contribution: X Personal Cl y Order Credit/Debi	neck	Contribution II	D#	Amount of Contribution
Residential Street Address 171 Shadow Ridge Rd		City Stamford		State CT	Zip Code 06905-1813		e Received /14/2009		
Principal Occupation Director of Administration		Name of Employer City of Stamford		•	Is this contribution associa fundraising event listed in If yes, list Event #			res No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregat	te Contribution		\$100.00
Last Name Kelly	First Name Joseph		MI	Cash	contribution: X Personal Cl y Order Credit/Debi	neck	Contribution II	D#	Amount of Contribution
Residential Street Address 32 Rayfield Rd		City Westport		State CT	Zip Code 06880-4525		e Received /14/2009		
Principal Occupation Hotel Management		Name of Employer Marriott Hotels		•	Is this contribution associa fundraising event listed in If yes, list Event #		Y X N	res No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregat	te Contribution \$50	ns 0.00	\$50.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009
		B. Itemized Contributi	ions fron	Individu	ıals			
Last Name Romanowitz	First Name Harry		MI S	Cash	contribution: X Personal Cl	heck 0119	ution ID#	Amount of Contribution
Residential Street Address 110 White Oak Ln		City Stamford		State CT	Zip Code 06905-1520	Date Receiv 03/14/20		
Principal Occupation Physician		Name of Employer Firefly After Hours Pediatricia	an .		Is this contribution associa fundraising event listed in If yes, list Event #		Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Conti	\$50.00	\$50.00
Last Name Karr	First Name John		MI	Cash	contribution: X Personal Cl / Order Credit/Deb	heck 0120	ution ID#	Amount of Contribution
Residential Street Address 191 Smith Ridge Rd		City New Canaan		State CT	Zip Code 06840-3620	Date Receiv 03/14/20		
Principal Occupation Consultant		Name of Employer Ernst and Young			Is this contribution associa fundraising event listed in If yes, list Event #		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Conti	ibutions \$375.00	\$375.00
Last Name Pollak	First Name Edward		MI	Cash	contribution: X Personal Cl	heck 0126	ution ID#	Amount of Contribution
Residential Street Address 1920 Long Ridge Rd		City Stamford		State CT	Zip Code 06903-3232	Date Receiv		
Principal Occupation Retired		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Conti	ibutions \$100.00	\$100.00
Last Name McAnaney	First Name Brian		MI	Cash	contribution: X Personal Cl	heck 0129	ution ID#	Amount of Contribution
Residential Street Address 12 Georgian Ct		City Stamford		State CT	Zip Code 06903-4035	Date Receiv 03/14/20		
Principal Occupation retired		Name of Employer retired	_	•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Contr	ibutions \$150.00	\$150.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009
		B. Itemized Contribut	ions fron	Individu	ıals			
Last Name Malloy	First Name Julie		MI	Cash	contribution: X Personal Cl	heck 0131	ition ID#	Amount of Contribution
Residential Street Address 111 Downs Ave		City Stamford		State CT	Zip Code 06902-7802	Date Receive 03/14/20		
Principal Occupation VP Sales		Name of Employer Kodak			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Contri	butions \$100.00	\$100.00
Last Name Tenney	First Name Matthew		MI	Cash	contribution: X Personal Cl y Order Credit/Deb	heck 0130	tion ID#	Amount of Contribution
Residential Street Address 32 Blackberry Dr E		City Stamford		State CT	Zip Code 06903	Date Receive 03/14/20		
Principal Occupation Real Estate Developer		Name of Employer First Stamford Corp.		•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Contri	butions \$375.00	\$375.00
Last Name Cromie	First Name Daniel		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 0135	tion ID#	Amount of Contribution
Residential Street Address 77 Lindale St		City Stamford		State CT	Zip Code 06902-2819	Date Receive 03/16/20		
Principal Occupation Finance		Name of Employer Atlas Holdings LLC			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Contri	butions \$375.00	\$375.00
Last Name Rinaldi	First Name Mary Lou		MI	Cash	contribution: X Personal Cl y Order Credit/Deb	heck 0136	tion ID#	Amount of Contribution
Residential Street Address 56 Mary Violet Rd		City Stamford		State CT	Zip Code 06907-1144	Date Receive 03/17/20		
Principal Occupation Human Resources Manager		Name of Employer GE			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Contri	butions \$375.00	\$375.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origin	nal 04/13/2009
		B. Itemized Contributi	ons fron	ı Individu	ıals			
Last Name Kane	First Name Thomas		MI J	Cash	contribution: X Personal Cl / Order	neck 01	ntribution ID#	Amount of Contribution
Residential Street Address 2 Van Rensselaer Ave		City Stamford		State CT	Zip Code 06902-8020	Date Re 03/17	eceived 7/2009	
Principal Occupation Retired		Name of Employer None			Is this contribution associate fundraising event listed in State If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate C	Contributions \$25.00	\$25.00
Last Name Collins	First Name Arthur		MI	Cash	contribution: X Personal Cl / Order Credit/Debi	neck 01	ntribution ID#	Amount of Contribution
Residential Street Address 2001 W Main St Ste 175		City Stamford		State CT	Zip Code 06902-4562	Date Re 03/17	eceived 7/2009	
Principal Occupation Real Estate		Name of Employer Collins Enterprises		•	Is this contribution associate fundraising event listed in St. If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate C	Contributions \$350.00	\$350.00
Last Name Murphy	First Name William		MI C	Cash	contribution: X Personal Ch / Order	neck 01	ntribution ID #	Amount of Contribution
Residential Street Address 92 Selkirk St		City Oakland		State CA	Zip Code 94619-1626	Date Re 03/17	eceived 7/2009	
Principal Occupation Real Estate Consultant		Name of Employer Keyser Marston Associates			Is this contribution associal fundraising event listed in ! If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate C	Contributions \$20.00	\$20.00
Last Name Nixon	First Name Lea		MI	Cash	contribution: X Personal Ch / Order Credit/Debi	neck 01	ntribution ID #	Amount of Contribution
Residential Street Address 337 Mayapple Rd		City Stamford		State CT	Zip Code 06903-1310	Date Re 03/17	eceived 7/2009	
Principal Occupation Retired		Name of Employer None		•	Is this contribution associal fundraising event listed in S If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate C	Contributions \$25.00	\$25.00

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE							FI	LING DU	E DATE
Dan Malloy For Connecticut (C	T)						Or	riginal 04	1/13/2009
		B. Itemized Contributi	ions fron	ı Individu	ıals				
Last Name	First Name		MI		contribution:		Contribution ID	#	Amount of
Fox	Michael			Cash Money	y Order Credit/Deb	0	0141		Contribution
Residential Street Address 45 Boettner Rd		City Pleasant Valley		State CT	Zip Code 06063-4126		Received 17/2009		
Principal Occupation retired		Name of Employer retired		•	Is this contribution associa fundraising event listed in If yes, list Event #		Ye x No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate	e Contributions \$100.		\$100.00
Last Name Olkowski	First Name Bryan		MI	Cash	contribution: X Personal Cl y Order Credit/Deb	heck 0	Contribution ID	#	Amount of Contribution
Residential Street Address 8 Iris Ln		City Wallington		State NJ	Zip Code 07057-2105		Received 17/2009		
Principal Occupation Educator		Name of Employer Stamford Public Schools		•	Is this contribution associa fundraising event listed in If yes, list Event #		Ye x No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate	e Contributions \$100.		\$100.00
Last Name Ellenthal	First Name Jonathan		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 0	Contribution ID	#	Amount of Contribution
Residential Street Address 18 Highview Dr		City Wilton		State CT	Zip Code 06897-2426		Received 17/2009		
Principal Occupation Executive		Name of Employer Walker Digital Management		•	Is this contribution associa fundraising event listed in If yes, list Event #		Ye x No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate	e Contributions \$375.		\$375.00
Last Name Weyland	First Name Kathryn		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 0	Contribution ID)#	Amount of Contribution
Residential Street Address 2611 Bainbridge Ln		City Silver Spring		State MD	Zip Code 20906-5378		Received 17/2009		
Principal Occupation marketing		Name of Employer usmayor enterprises, inc			Is this contribution associa fundraising event listed in If yes, list Event #		Ye x No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate	e Contributions \$375.		\$375.00

		I. MONETARY R	ECEIPT	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009
		B. Itemized Contribu	ıtions fron	n Individu	ıals			
Last Name Weyland	First Name Julia		MI K	Cash	contribution: Personal Cl y Order X Credit/Debi	0146	tion ID#	Amount of Contribution
Residential Street Address 2611 Bainbridge Ln		City Silver Spring		State MD	Zip Code 20906-5378	Date Receive 03/17/20		
Principal Occupation student		Name of Employer UMaine			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	depender	butor a lobbyis at child of a lob Yes	byist?	Aggregate Contri	butions \$375.00	\$375.00
Last Name Gochberg	First Name Marilyn		MI	Cash	contribution: X Personal Cl y Order Credit/Debi	0143	tion ID#	Amount of Contribution
Residential Street Address 69 Mountain Wood Rd		City Stamford		State CT	Zip Code 06903-2116	Date Receive 03/17/20		
Principal Occupation attorney		Name of Employer self		•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	depender	butor a lobbyis at child of a lob Yes	byist?	Aggregate Contri	butions \$375.00	\$375.00
Last Name Miner	First Name Nancy		MI G	Cash	contribution: Personal Cl y Order X Credit/Debi	0488	tion ID#	Amount of Contribution
Residential Street Address 155 Brewster St Apt 4C		City Bridgeport		State CT	Zip Code 06605-3109	Date Receive 03/17/20		
Principal Occupation APRN - Advanced Practice Registered Nurse		Name of Employer Catholic Charities		•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No Executive Legislative	depender	butor a lobbyis at child of a lob Yes	byist?	Aggregate Contri	butions \$375.00	\$375.00
Last Name Udell	First Name Howard		MI R	Cash	contribution: Personal Cl y Order X Credit/Debi	heck 0147	tion ID#	Amount of Contribution
Residential Street Address 24 Old Hill Rd		City Westport		State CT	Zip Code 06880-3016	Date Receive 03/18/20		
Principal Occupation Lawyer		Name of Employer Self Employed		•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	depender	butor a lobbyis at child of a lob Yes	byist?	Aggregate Contri	butions \$375.00	\$375.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009
		B. Itemized Contribut	ions fron	Individu	ıals			
Last Name Udell	First Name Judith		MI A	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 0149	bution ID #	Amount of Contribution
Residential Street Address 24 Old Hill Rd		City Westport		State CT	Zip Code 06880-3016	Date Recei		
Principal Occupation Homemaker		Name of Employer n/a			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Con	tributions \$375.00	\$375.00
Last Name Strassburger	First Name Philip		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 0148	bution ID#	Amount of Contribution
Residential Street Address 123 East Ln		City Stamford		State CT	Zip Code 06905-3949	Date Recei		
Principal Occupation Attorney		Name of Employer Purdue Pharma L.P.		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Con	tributions \$375.00	\$375.00
Last Name Hoina	First Name Ron		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 0150	bution ID #	Amount of Contribution
Residential Street Address 31 Mamaroneck Ave		City White Plains		State NY	Zip Code 10601-3300	Date Recei		
Principal Occupation Architect		Name of Employer Design Development			Is this contribution associa fundraising event listed in If yes, list Event #		Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Con	tributions \$375.00	\$375.00
Last Name Schulman	First Name Mark		MI S	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 0151	bution ID#	Amount of Contribution
Residential Street Address 31 Mamaroneck Ave Ste 400		City White Plains		State NY	Zip Code 10601-3378	Date Recei		
Principal Occupation Architect		Name of Employer Design Development			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Con	tributions \$375.00	\$375.00

		I. M	IONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Dan Malloy For Connecticut (C	T)								Origina	al 04/13/2009
		B. It	emized Contributi	ons fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Connolly	Daniel			S	Cash Money	y Order X Credit/De		0152		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
89 Horton St		Bronx			NY	10464-1618	0	3/18/2009)	
Principal Occupation Attorney		Name of En Bracewe	nployer II & Giuliani LLP			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis t child of a lob	byist?	Aggre	gate Contribu	tions 75.00	\$375.00
Last Name	First Name			MI	Method of	contribution:	•	Contributio	n ID#	Amount of
Kester	Thomas			А	Cash Money	y Order X Credit/De		0153		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
31 Hobson St		Stamford			СТ	06902-8112	0	3/18/2009)	
Principal Occupation		Name of En				Is this contribution associ fundraising event listed in			Yes	
President		Cook & \	Villiams			If yes, list Event #	ii section .	x	No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribu	tions 50.00	\$250.00
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Rosen	Burt				Cash Money	y Order X Credit/De		0154		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
700 13th St NW Ste 525		Washingt	on		DC	20005-6604	0	3/18/2009)	
Principal Occupation		Name of En				Is this contribution associ fundraising event listed in			Yes	
Pharmaceutical		Purdue F	'narma			If yes, list Event #		х	No	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis child of a lob	, I	Aggre	gate Contribu	tions	\$100.00
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	Y	res x	No		Ψ1	.00.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Levinson	Betsy			А	Cash Money	y Order X Credit/De		0160		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
1 Ocean View Dr		Stamford			СТ	06902-8137	0	3/18/2009)	
Principal Occupation retired		Name of Er retired	nployer			Is this contribution associ fundraising event listed in If yes, list Event # 03	n Section .		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective		Yes X No		utor a lobbyis child of a lob	byist?	Aggre	gate Contribu	tions 75.00	\$375.00
government the contract is with:		Executive	Legislative	L 1	res x	No		·		·

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origin	nal 04/13/2009
		B. Itemized Contribut	ions fron	ı Individu	ıals		•	
Last Name Hamilton	First Name Wendy		MI	Cash	contribution: X Personal Cl y Order Credit/Debi	neck 016	tribution ID #	Amount of Contribution
Residential Street Address 209 Sharon Rd		City Lakeville		State CT	Zip Code 06039-2132	Date Rec 03/19/		
Principal Occupation n/a		Name of Employer n/a		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Co	ontributions \$100.00	\$100.00
Last Name Kanfer	First Name Andrea		MI F	Cash	contribution: X Personal Cl y Order Credit/Debi	neck 016	tribution ID #	Amount of Contribution
Residential Street Address 16 Baldwin Dr		City Waterford		State CT	Zip Code 06385-2708	Date Rec 03/19/		
Principal Occupation retired		Name of Employer retired		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Co	ontributions \$25.00	\$25.00
Last Name Homicki	First Name Anthony		MI	Cash	contribution: X Personal Cl	neck 016	tribution ID #	Amount of Contribution
Residential Street Address 201 Cumberland Ave		City Wethersfield		State CT	Zip Code 06109-1603	Date Rec 03/19/		
Principal Occupation ASSESSOT		Name of Employer Town of Darien		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Co	ontributions \$30.00	\$30.00
Last Name McDonald	First Name Annie		MI	Cash	contribution: X Personal Cl y Order Credit/Debi	neck 016	tribution ID #	Amount of Contribution
Residential Street Address 10202 Lakestone Pl		City Rockville		State MD	Zip Code 20850-5408	Date Rec 03/19/		
Principal Occupation Housewife		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Co	ontributions \$50.00	\$50.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FIL	ING DUE DATE
Dan Malloy For Connecticut (C	T)						Ori	ginal 04/13/2009
		B. Itemized Contributi	ons from	ı Individu	ıals			
Last Name	First Name		MI	Method of	contribution:		ontribution ID #	Amount of
Edelberg	Paul			Cash Money	y Order X Personal Ch Credit/Debi	0:	165	Contribution
Residential Street Address		City		State	Zip Code		Received	
122 White Oak Ln		Stamford		СТ	06905-1520	03/1	9/2009	_
Principal Occupation Attorney		Name of Employer Murtha Cullina LLP			Is this contribution associal fundraising event listed in the second of the second second in the second sec		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate	Contributions \$50.0	0 \$50.00
Last Name Reynolds	First Name Lisa		MI	Cash	contribution: X Personal Ch y Order Credit/Debi	neck 0:	ontribution ID #	Amount of Contribution
Residential Street Address 185 Hamilton Ave		City Stamford	•	State CT	Zip Code 06902-3406		Received 9/2009	
Principal Occupation city of Stamford		Name of Employer controller			Is this contribution associal fundraising event listed in S If yes, list Event #		Yes	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate	Contributions \$50.0	0 \$50.00
Last Name Sackler	First Name Raymond		MI	Cash	contribution: X Personal Ch y Order Credit/Debi	neck 0:	ontribution ID #	Amount of Contribution
Residential Street Address 60 Field Point Cir		City Greenwich		State CT	Zip Code 06830-7011		Received 9/2009	
Principal Occupation Physician		Name of Employer Purdue Pharma LP		•	Is this contribution associate fundraising event listed in the second of the second second in the second se		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate	Contributions \$375.0	0 \$375.00
Last Name Hoffman	First Name Stephen		MI J	Cash	contribution: X Personal Character Credit/Debi	neck 0:	ontribution ID #	Amount of Contribution
Residential Street Address 81 Lower Cross Rd		City Greenwich		State CT	Zip Code 06831-3001		Received 9/2009	
Principal Occupation Real Estate Investment		Name of Employer Hoffman Investment Partners	s	•	Is this contribution associate fundraising event listed in the second of the second second in the second second second second second second second second second second second second second second second second second sec		Yes	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate	Contributions \$375.0	0 \$375.00

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009
		B. Itemized Contributi	ions from	ı Individu	ıals		•	
Last Name Cavanagh	First Name Kevin		MI J	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 0169	oution ID #	Amount of Contribution
Residential Street Address 14 Greenway Rd		City New London	1	State CT	Zip Code 06320-2909	Date Recei		
Principal Occupation Retired		Name of Employer retired		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Con	tributions \$100.00	\$100.00
Last Name Fitzgerald	First Name Brian		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 0170	oution ID#	Amount of Contribution
Residential Street Address 8 Greenwich Office Park Ste 3		City Greenwich		State CT	Zip Code 06831-5149	Date Recei		
Principal Occupation Investments		Name of Employer Capital Partners		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Con	tributions \$375.00	\$375.00
Last Name Smith	First Name Guy		MI L	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 0171	oution ID#	Amount of Contribution
Residential Street Address 352 North St		City Greenwich		State CT	Zip Code 06830-3930	Date Recei		
Principal Occupation Executive		Name of Employer Diageo			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggregate Con	tributions \$375.00	\$375.00
Last Name Smit	First Name Pieter		MI H	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 0172	oution ID#	Amount of Contribution
Residential Street Address 109 Silver Hill Ln		City Stamford		State CT	Zip Code 06905-3236	Date Recei		
Principal Occupation Analyst		Name of Employer GE			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	outor a lobbyis t child of a lob	byist?	Aggregate Con	tributions \$50.00	\$50.00

		I. MON	ETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origina	al 04/13/2009
		B. Itemiz	zed Contributi	ons from	Individu	uals				
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID #	Amount of
Hendricks	David			Н	Cash Money	y Order X Credit/De		0173		Contribution
Residential Street Address		City			State	Zip Code	D	Date Received		
19 Van Rensselaer Ave		Stamford			СТ	06902-8018	0	3/19/200	9	
Principal Occupation		Name of Employe				Is this contribution assoc fundraising event listed in			Yes	
Executive		Datran Media	1	_		If yes, list Event #	- Section :	×	No	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis	-	Aggre	egate Contrib	utions	
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		res x	-		\$	100.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Mullarkey	James				Cash Money	y Order X Credit/De		0174		Contribution
Residential Street Address		City			State	Zip Code	D	Date Received		
105 Bloomfield Ave		Hartford			СТ	06105-1008	0	3/19/200	9	
Principal Occupation		Name of Employe				Is this contribution assoc fundraising event listed in			Yes	
Sales Director		Ticket Netwo	rk			If yes, list Event #		Х	No	
Is contributor a principal of a state contractor	or prospective		Yes X No	Is contrib	utor a lobbyis	st, spouse, or	Aggre	egate Contrib	utions	
state contractor? Is yes, indicate which branch or branches of				1 —	child of a lob	•		\$2	200.00	\$200.00
government the contract is with:		Executive	Legislative	<u> </u>				1		
Last Name Atkins	First Name Thomas			MI E	Method of Cash	contribution:	Check	Contributi	on ID#	Amount of Contribution
ACCIO	momus			_	_	y Order X Credit/De		0175		Contribution
Residential Street Address		City			State	Zip Code		Date Received		
52 Sylvan Ln		Weston			MA	02493-1028	0)3/19/200	9	
Principal Occupation		Name of Employe				Is this contribution assoc fundraising event listed is		J12 L		
Developer		Pinpoint Pow	er			If yes, list Event #		<u>x</u>	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis	-	Aggre	egate Contrib	utions	
state contractor? Is yes, indicate which branch or branches of		Executive	Legislative	1 —	child of a lob	-		\$3	375.00	\$375.00
government the contract is with: Last Name	First Name	Executive	Legislative	I MI		contribution:		T		
Atkins	Gretchen			R	Cash	Personal	Check	Contributi 0180	on ID #	Amount of Contribution
		1			Mone	y Order X Credit/De	bit Card	0180		
Residential Street Address		City			State	Zip Code		Date Received		
52 Sylvan Ln		Weston			MA	02493-1028)3/19/200		
Principal Occupation		Name of Employe	er			Is this contribution assoc fundraising event listed is		J1?		
mom		i iioiie				If yes, list Event #		<u>x</u>	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis		Aggre	egate Contrib	utions	
Is yes, indicate which branch or branches of		Executive	Legislative		child of a lob	-		\$3	375.00	\$375.00

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009
		B. Itemized Contribut	ions fron	ı Individu	ıals			
Last Name Padgett	First Name Christina		MI F	Cash	contribution: Personal Cl y Order X Credit/Deb	neck 017	ribution ID#	Amount of Contribution
Residential Street Address 158 Minivale Rd		City Stamford		State CT	Zip Code 06907-1209	Date Rec		
Principal Occupation Director of Programs		Name of Employer Malcolm Hewitt Wiener Foun	dation	•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Co	\$375.00	\$375.00
Last Name Zdrojeski	First Name Ronald		MI W	Cash	contribution: Personal Cl y Order X Credit/Deb	neck 017	ribution ID #	Amount of Contribution
Residential Street Address 47 Papermill Rd		City South Glastonbury		State CT	Zip Code 06073-2332	Date Rec. 03/19/		
Principal Occupation Attorney		Name of Employer Robinson & Cole			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Co	stributions \$375.00	\$375.00
Last Name Graham	First Name Luke		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	neck 017	ribution ID#	Amount of Contribution
Residential Street Address 1138 SW Ithaca St		City Port St Lucie		State FL	Zip Code 34983-2540	Date Rec 03/19/		
Principal Occupation Investor		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggregate Co	stributions \$100.00	\$100.00
Last Name Shepard	First Name Rory		MI T	Cash	contribution: Personal Cl y Order X Credit/Deb	neck 017	ribution ID #	Amount of Contribution
Residential Street Address 23 Crescent Rd		City Riverside		State CT	Zip Code 06878-1905	Date Rec. 03/19/		
Principal Occupation Real Estate Broker		Name of Employer Cushman & Wakefield			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	outor a lobbyis t child of a lob	byist?	Aggregate Co	stributions \$375.00	\$375.00

		I. MON	ETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origina	al 04/13/2009
		B. Itemiz	ed Contributi	ons from	Individu	ıals				
Last Name Collins	First Name Dwight			MI	Cash	contribution: X Personal C y Order Credit/De		Contribution 0181	on ID#	Amount of Contribution
Residential Street Address 114 Nearwater Ln		City Darien			State CT	Zip Code 06820-5712		ate Received		
Principal Occupation Real Estate		Name of Employer	r			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	_	Yes X No Legislative	dependent	child of a lob	byist?	Aggre	egate Contribu	ations 375.00	\$375.00
Last Name Fields	First Name Robert			MI S	Cash	contribution: Personal (y Order X Credit/De		Contribution 0183	on ID#	Amount of Contribution
Residential Street Address 631 Long Ridge Rd Unit 6		City Stamford			State CT	Zip Code 06902-1261		ate Received		
Principal Occupation Self		Name of Employer Orthodontist	r			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	_	Yes X No Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggre	egate Contribu	ations 375.00	\$375.00
Last Name Fields	First Name Joan			MI	Cash	contribution: Personal C y Order X Credit/De		Contribution 0184	on ID#	Amount of Contribution
Residential Street Address 631 Long Ridge Rd Unit 6		City Stamford			State CT	Zip Code 06902-1261		oate Received 3/19/200		
Principal Occupation Self		Name of Employer Homemaker	r			Is this contribution associ fundraising event listed in If yes, list Event #		_{11?}	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	_	Yes X No Legislative	dependent	child of a lob	byist?	Aggre	egate Contribu	ations 375.00	\$375.00
Last Name Fishbach	First Name Shirley			MI F	Cash	contribution: X Personal C y Order Credit/De		Contribution 0157	on ID#	Amount of Contribution
Residential Street Address 18 Farm Hill Rd		City Stamford			State CT	Zip Code 06902-1237		ate Received		
Principal Occupation None		Name of Employer Retired	r			Is this contribution associ fundraising event listed in If yes, list Event # 03	Section J	_{J1?}	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contribu	ations \$35.00	\$35.00

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE								FILING	DUE DATE
Dan Malloy For Connecticut (C	T)							Origina	al 04/13/2009
		B. Itemized Contribut	ions fron	ı Individu	ıals		•		
Last Name DePina	First Name Gloria		MI	Cash	contribution: X Personal Cl y Order		Contribution 0158	ID#	Amount of Contribution
Residential Street Address 21 Richmond Pl Apt 8		City Stamford		State CT	Zip Code 06902-5691		te Received /19/2009		
Principal Occupation Constituent Service Representative		Name of Employer Congressman Jim Himes		•	Is this contribution associa fundraising event listed in If yes, list Event # 032		? <u> </u>	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggrega	ate Contributio	ons 25.00	\$25.00
Last Name Steinegger	First Name Nancy		MI J	Cash	contribution: X Personal Cl y Order Credit/Deb		Contribution 0155	ID#	Amount of Contribution
Residential Street Address 88 Indian Harbor Dr		City Greenwich		State CT	Zip Code 06830-7148		te Received /19/2009		
Principal Occupation real estate development		Name of Employer self			Is this contribution associa fundraising event listed in If yes, list Event # 032		? <u> </u>		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggrega	ate Contributio	ons 25.00	\$25.00
Last Name Osman	First Name Harley		MI	Cash	contribution: Personal Cl y Order X Credit/Deb		Contribution 0182	ID#	Amount of Contribution
Residential Street Address 57 W Hill Rd		City Stamford		State CT	Zip Code 06902-2029		te Received /19/2009		
Principal Occupation retired		Name of Employer retired			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggrega	ate Contributio	ons 75.00	\$375.00
Last Name Gordon	First Name Adele		MI B	Cash	contribution: X Personal Cl y Order Credit/Deb		Contribution 0156	ID#	Amount of Contribution
Residential Street Address 211 West Ln		City Stamford		State CT	Zip Code 06905-3960		te Received /19/2009		
Principal Occupation director-administrator		Name of Employer CHC, Inc.			Is this contribution associa fundraising event listed in If yes, list Event # 032	Section J1	? <u> </u>		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	outor a lobbyis t child of a lob	byist?	Aggrega	ate Contributio	ons 50.00	\$50.00

		I. MONETAI	RY REC	EIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 04/13/2009
		B. Itemized Co	ntributio	ns from	Individu	ıals				
Last Name Costello	First Name Colin			MI J	Cash	contribution: X Personal C Order Credit/Del		Contribution	on ID#	Amount of Contribution
Residential Street Address 229 Davenport Dr		City Stamford			State CT	Zip Code 06902-7711		ate Received	9	
Principal Occupation self employed		Name of Employer self				Is this contribution associ- fundraising event listed in If yes, list Event # 03:		1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Executive Legislati	_	dependent	child of a lob	byist?	Aggre	gate Contribu	550.00	\$50.00
Last Name Malloy	First Name John			MI	Cash	contribution: Personal C Order X Credit/Del		Contribution	on ID #	Amount of Contribution
Residential Street Address 612 Hope St # 1		City Stamford			State CT	Zip Code 06907-2710		ate Received 3/20/2009	Ð	
Principal Occupation Account Manager		Name of Employer Kodak				Is this contribution associ- fundraising event listed in If yes, list Event #		1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Executive Legislati		dependent	child of a lob	byist?	Aggre	gate Contribu \$1	tions	\$100.00
Last Name Doreste	First Name Emmanue	el		MI W	Cash	contribution: Personal C		Contribution	on ID#	Amount of Contribution
Residential Street Address 46 Taylor St Apt 101		City Stamford			State CT	Zip Code 06902-5751		ate Received 3/20/2009	9	
Principal Occupation Library Clerk		Name of Employer Ferguson Library		·		Is this contribution associ- fundraising event listed in If yes, list Event #		12	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Executive Legislati	_	dependent	child of a lob	byist?	Aggre	gate Contribu	550.00	\$50.00
Last Name O'Neill	First Name Beverly			MI	Cash	contribution: X Personal C Order Credit/Del		Contribution 0185	on ID #	Amount of Contribution
Residential Street Address 5815 E Seaside Walk		City Long Beach			State CA	Zip Code 90803-4459		ate Received 3/20/2009		
Principal Occupation retired		Name of Employer retired		•		Is this contribution associ- fundraising event listed in If yes, list Event #		1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Executive Legislati		dependent	utor a lobbyist child of a lob	byist?	Aggre	gate Contribu	tions 550.00	\$50.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FILI	NG DUE DATE
Dan Malloy For Connecticut (C	T)						Orig	inal 04/13/2009
		B. Itemized Contribut	ions fron	Individu	ıals		•	
Last Name Bennett	First Name Jonathan		MI	Cash	contribution: X Personal Cl	neck 0:	ontribution ID#	Amount of Contribution
Residential Street Address 9784 NW 16th Ct		City Pembroke Pines		State FL	Zip Code 33024-4482		Received 0/2009	
Principal Occupation none		Name of Employer none		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate	Contributions \$50.00	\$50.00
Last Name Strateman	First Name Howard		MI J	Cash	contribution: X Personal Cl y Order Credit/Debi	neck 0:	ontribution ID#	Amount of Contribution
Residential Street Address 148 Ocean Dr W		City Stamford		State CT	Zip Code 06902-8028		Received 0/2009	
Principal Occupation investment banker		Name of Employer Harbour Associates LLC			Is this contribution associa fundraising event listed in If yes, list Event # 032		X Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate	Contributions \$50.00	\$50.00
Last Name Kaufman	First Name Linda		MI	Cash	contribution: X Personal Cl y Order Credit/Debi	neck 0:	ontribution ID #	Amount of Contribution
Residential Street Address 423 Broadway		City Lawrence		State NY	Zip Code 11559-2413		Received 0/2009	
Principal Occupation none		Name of Employer none			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate	Contributions \$100.00	\$100.00
Last Name Franco	First Name Carl		MI J	Cash	contribution: X Personal Cl y Order Credit/Debi	neck 0:	ontribution ID#	Amount of Contribution
Residential Street Address 130 Elm St		City New Canaan		State CT	Zip Code 06840-5406		Received 0/2009	
Principal Occupation Vice President		Name of Employer Francos Liquor Store Inc.		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate	Contributions \$100.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILING	G DUE DATE		
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009		
		B. Itemized Contrib	utions fro	m Individu	ıals		_			
Last Name Corcoran	First Name Kevin		MI J	Cash	contribution: Personal C y Order X Credit/Deb	heck 0190	ution ID#	Amount of Contribution		
Residential Street Address 3320 Andreas Hills Dr		City Palm Springs		State CA	Zip Code 92264-9601	Date Receiv 03/20/20				
Principal Occupation AT Consulting		Name of Employer Sales			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	depende	ibutor a lobbyis nt child of a lob Yes	byist?	Aggregate Contr	\$250.00	\$250.00		
Last Name Morris	First Name Scott		МІ	Cash	contribution: Personal C y Order X Credit/Deb	heck 0191	ution ID#	Amount of Contribution		
Residential Street Address 1600 N Quinn St Apt 304		City Arlington		State VA	Zip Code 22209-2847	Date Receiv 03/20/20				
Principal Occupation Manager, State League Programs			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No					
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	depende	ibutor a lobbyis nt child of a lob Yes	byist?	Aggregate Contr	ibutions \$100.00	\$100.00		
Last Name Johnson	First Name Susan		MI L	Cash	contribution: Personal C y Order X Credit/Deb	heck 0193	ution ID#	Amount of Contribution		
Residential Street Address 157 Bayberrie Dr		City Stamford	·	State CT	Zip Code 06902-2004	Date Receiv 03/21/20				
Principal Occupation VP Human Resources		Name of Employer Pitney Bowes			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	depende	ibutor a lobbyis nt child of a lob Yes	byist?	Aggregate Contr	ibutions \$100.00	\$100.00		
Last Name Mahony	First Name Debra		MI L	Cash	contribution: Personal C y Order X Credit/Deb	heck 0203	ution ID#	Amount of Contribution		
Residential Street Address 271 Shady Hill Rd		City Fairfield		State CT	Zip Code 06824-7345	Date Receiv 03/21/20				
Principal Occupation homemaker		Name of Employer none			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	depende	ibutor a lobbyis nt child of a lob Yes	byist?	Aggregate Contr	ibutions \$375.00	\$375.00		

		I. MO	ONETARY REC	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origina	al 04/13/2009
		B. Itei	mized Contributio	ons from	Individu	ıals				
Last Name Ellenthal	First Name Suzanne			MI	Cash	contribution: Personal C y Order X Credit/De		Contributi 0202	on ID#	Amount of Contribution
Residential Street Address 18 Highview Dr		City Wilton			State CT	Zip Code 06897-2426		Date Received		
Principal Occupation stay at home mom		Name of Emp	oloyer			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	egate Contrib	ations 375.00	\$375.00
Last Name Sheridan	First Name Margaret			MI	Cash	contribution: Personal (y Order X Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 318 Great Neck Rd		City Waterford			State CT	Zip Code 06385-3819		Date Received		
Principal Occupation retired professor		Name of Emp Connectic	oloyer ut College		•	Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggre	egate Contrib	utions 100.00	\$100.00
Last Name Sheridan	First Name Thomas			MI A	Cash	contribution: Personal C y Order X Credit/De		Contributi 0489	on ID#	Amount of Contribution
Residential Street Address 318 Great Neck Rd		City Waterford			State CT	Zip Code 06385-3819		Date Received		
Principal Occupation CEO		Name of Emp Chamber	oloyer of Commerce of Eas	stern CT	-	Is this contribution associ fundraising event listed in If yes, list Event #		J12 L	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	egate Contrib	utions 100.00	\$100.00
Last Name Quincy	First Name Barbara			MI B	Cash	contribution: Personal (y Order X Credit/De		Contributi 0207	on ID#	Amount of Contribution
Residential Street Address 81 Grey Rocks Rd		City Wilton			State CT	Zip Code 06897-1126		Date Received		
Principal Occupation RETIRED		Name of Emp	oloyer			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggre	egate Contrib	ations \$25.00	\$25.00

		I. MONETARY	RECEIP	PTS (Section	on A-I)			
NAME OF COMMITTEE							FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009
		B. Itemized Contri	outions fr	om Individ	uals			
Last Name Abbazia	First Name Timothy		MI M	Cash	contribution: X Personal C y Order	heck 0208	oution ID#	Amount of Contribution
Residential Street Address 263 Stamford Ave		City Stamford		State CT	Zip Code 06902-8202	Date Receive 03/23/20		
Principal Occupation Accounting		Name of Employer self		•	Is this contribution association fundraising event listed in If yes, list Event # 032		X Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative		ntributor a lobbyis ident child of a lob Yes		Aggregate Cont	ributions \$375.00	\$375.00
Last Name Bernstein	First Name Samuel		MI J	Cash	contribution: X Personal C y Order Credit/Deb	heck 0209	oution ID#	Amount of Contribution
Residential Street Address 123 Prospect St		City Stamford		State CT	Zip Code 06901-1200	Date Receive 03/23/20		
Principal Occupation Attorney		Name of Employer self			Is this contribution association fundraising event listed in If yes, list Event # 032		X Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative		ntributor a lobbyis ident child of a lob Yes	-	Aggregate Cont	ributions \$100.00	\$100.00
Last Name Bartels	First Name Kenneth		MI	Cash	contribution: Personal C y Order X Credit/Deb	heck 0205	oution ID#	Amount of Contribution
Residential Street Address 38 Close Rd		City Greenwich		State CT	Zip Code 06831-2722	Date Receive 03/23/20		
Principal Occupation Self Employed		Name of Employer n/a		•	Is this contribution association fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative		ntributor a lobbyis ident child of a lob Yes	-	Aggregate Cont	ributions \$375.00	\$375.00
Last Name Domondon	First Name Maria Leil	lani	MI	Cash	contribution: Personal C y Order X Credit/Deb	heck 0206	oution ID#	Amount of Contribution
Residential Street Address 544 Madison Ave Apt 7		City Albany		State NY	Zip Code 12208-3614	Date Receive 03/23/20		
Principal Occupation Student		Name of Employer N/A		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No		ntributor a lobbyis ident child of a lob Yes	obyist?	Aggregate Cont	ributions \$50.00	\$50.00

		I. N	MONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 04/13/2009
		B. It	temized Contributi	ons from	ı Individu	ıals				
Last Name Creed	First Name Blair			MI W	Cash	contribution: Personal C y Order X Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 544 Madison Ave Apt 7		City Albany			State NY	Zip Code 12208-3614		Date Received		
Principal Occupation Student		Name of E	imployer		•	Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob Yes X	byist?	Aggre	egate Contrib	utions \$40.00	\$40.00
Last Name Sackler	First Name Beverly			MI	Cash	contribution: X Personal C y Order Credit/De		Contributi 0216	on ID#	Amount of Contribution
Residential Street Address 60 Field Point Cir		City Greenwi	ch		State CT	Zip Code 06830-7011		Date Received		
Principal Occupation none		Name of E none	imployer			Is this contribution associ fundraising event listed in If yes, list Event # 03		_{J1?} [2	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contrib	utions 375.00	\$375.00
Last Name Hanser	First Name Thaddeus			MI	Cash	contribution: X Personal C y Order Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 50 Interlaken Rd		City Stamfore	d		State CT	Zip Code 06903-5025		Date Received		
Principal Occupation architect		Name of E self	mployer			Is this contribution associ fundraising event listed in If yes, list Event # 03		_{J1?} [2	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contrib	utions \$40.00	\$40.00
Last Name Kohn	First Name Herbert			MI B	Cash	contribution: X Personal C y Order Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 6 Kenilworth Dr E		City Stamfore	d		State CT	Zip Code 06902-7116		Date Received		
Principal Occupation operations		Name of E	mployer Stamford		•	Is this contribution associ fundraising event listed in If yes, list Event # 03	n Section .	_{J1?} [2	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contrib	utions \$50.00	\$50.00

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 04/13/2009
		B. It	emized Contributi	ons from	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
Lapine	Jennifer				Cash Money	y Order	Check Debit Card	0213		Contribution
Residential Street Address		City			State	Zip Code	Ι	Date Received		
171 Hardesty Rd		Stamford	1		СТ	06903-4327	C	3/23/2009	9	
Principal Occupation educator/facilitator		Name of Er self	nployer			Is this contribution asso fundraising event listed If yes, list Event # 0		_{J1?}	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contribu	ations 375.00	\$375.00
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID #	
Reed	Benjamin			R	Cash	X Personal	Check Debit Card	0215	on 1D #	Amount of Contribution
Residential Street Address		City			State	Zip Code	Ι	Date Received		
38 Bertmor Dr		Stamford	1		СТ	06905-2114	C	3/23/2009	9	
Principal Occupation		Name of Er	mployer		•	Is this contribution asso		1^	Yes	
Retired		None		_		fundraising event listed If yes, list Event # 0			No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis t child of a lob Yes	byist?	Aggro	egate Contribu	stions \$50.00	\$50.00
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
Serafino	Ralph				Cash Money	y Order Personal Credit/E	Check Debit Card	0217		Contribution
Residential Street Address		City			State	Zip Code	Г	Date Received		
172 Vine Rd Apt 2		Stamford	<u> </u>		СТ	06905-2017	C	3/23/2009	9	
Principal Occupation		Name of Er	mployer			Is this contribution asso fundraising event listed			Yes	
constable		self				If yes, list Event # 0			No	
Is contributor a principal of a state contractor	or prospective		Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	egate Contribu	ıtions	†
state contractor? Is yes, indicate which branch or branches of					child of a lob	-		-	100.00	\$100.00
government the contract is with:		Executive	Legislative	+ -	res X			1		<u> </u>
Last Name Critelli	First Name Joyce			MI	Method of Cash	contribution:	Check	Contribution	on ID#	Amount of Contribution
Criteiii	Joyce					=	ebit Card	0218		Contribution
Residential Street Address		City			State	Zip Code	Ι	Date Received		
39 Shields Rd		Darien			СТ	06820-2531	C	3/23/2009	9	1
Principal Occupation		Name of Er	mployer			Is this contribution asso fundraising event listed		1^	Yes	
n/a		n/a				If yes, list Event # 0			No	
Is contributor a principal of a state contractor	or prospective		Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	egate Contribu	ıtions	İ
state contractor? Is yes, indicate which branch or branches of					child of a lob	-		-	100.00	\$100.00
government the contract is with:	Ц	Executive	Legislative	L 1	res X	No				

		I. MONETARY I	RECEIP	TS (Section	on A-I)			
NAME OF COMMITTEE							FILI	NG DUE DATE
Dan Malloy For Connecticut (C	T)						Orig	ginal 04/13/2009
		B. Itemized Contrib	utions fr	om Individ	uals			
Last Name	First Name		MI	Method of	f contribution:	С	Contribution ID #	Amount of
Murphy	Janet		С	Cash Mone	Personal C x Credit/Del	1 0	0219	Contribution
Residential Street Address		City		State	Zip Code		Received	
50 Forest St Apt 923		Stamford		СТ	06901-1870	03/2	23/2009	_
Principal Occupation		Name of Employer			Is this contribution associ- fundraising event listed in		x Yes	
political consultant		retired			_ ~	292009B	No	
Is contributor a principal of a state contractor state contractor?	or prospective	Yes X No		ntributor a lobbyi dent child of a lo	-	Aggregate	e Contributions	, _{450.00}
Is yes, indicate which branch or branches of government the contract is with:		Executive Legislative		Yes X	No		\$50.00	\$50.00
Last Name	First Name		MI	Method of	f contribution:	-	Contribution ID #	Amount of
Mosca	Christoph	er	t	Cash Mone	Personal C x Credit/Del	1 0)220	Contribution
Residential Street Address		City		State	Zip Code		Received	
1551 N Flagler Dr # 16		West Palm Beach		FL	33401-3438		23/2009	_
Principal Occupation		Name of Employer		_	Is this contribution associ- fundraising event listed in		Yes	
analyst		american management se	ervices, inc	Ľ	If yes, list Event #		x No	
Is contributor a principal of a state contractor	or prospective	Yes X No		ntributor a lobbyi	-	Aggregate	e Contributions	\exists
state contractor? Is yes, indicate which branch or branches of	П	Executive Legislative	depen	dent child of a lo	bbyist?		\$375.00	\$375.00
government the contract is with:	l _{E' (M}	Executive Legislative	1,,,					1
Last Name Pollak	First Name Edward		MI	Cash	f contribution: X Personal C	heck	Contribution ID #	Amount of Contribution
		1		Mone Mone	ey Order Credit/Del)214	
Residential Street Address		City		State	Zip Code		Received	
1920 Long Ridge Rd		Stamford		СТ	06903-3232		23/2009	_
Principal Occupation		Name of Employer			Is this contribution associ- fundraising event listed in		X Yes	
Retired		None				292009B	No	
Is contributor a principal of a state contractor	or prospective	Yes X No		ntributor a lobbyi	-	Aggregate	e Contributions	\exists
state contractor? Is yes, indicate which branch or branches of		Executive Legislative	depen	dent child of a lo	bbyist? No		\$200.00	\$100.00
government the contract is with:	<u></u>	Executive Legislative	1,,,			<u> </u>		1
Last Name Taney	First Name Charlie		MI	Method of Cash	f contribution: Personal C	heck	Contribution ID #	Amount of Contribution
					ey Order X Credit/Del)264	
Residential Street Address		City		State	Zip Code		Received	
9 Outer Rd		Norwalk		СТ	06854-4709		24/2009	_
Principal Occupation		Name of Employer			Is this contribution associ- fundraising event listed in		Yes	
Marketing		SoundWaters			If yes, list Event #		x No	
Is contributor a principal of a state contractor	or prospective	Yes X No		ntributor a lobbyi		Aggregate	e Contributions	7
Is yes, indicate which branch or branches of		Executive Legislative	depen	dent child of a lo	bbyist? No		\$100.00	\$100.00

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 04/13/2009
		B. Ito	emized Contributi	ions fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Russo	Patricia			М	Cash Money	y Order X Personal C		0223		Contribution
Residential Street Address		City		•	State	Zip Code	Е	ate Received		
191 Smith Ridge Rd		New Cana	aan		СТ	06840-3620	0	3/24/2009	9	
Principal Occupation		Name of En				Is this contribution associ fundraising event listed in		J1?	Yes	
Housewife		Homema	iker	_		If yes, list Event #		x	No	
Is contributor a principal of a state contractor of state contractor?	or prospective		Yes X No		outor a lobbyis		Aggre	egate Contribu	itions	
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	I '─	res x	•		\$3	375.00	\$375.00
Last Name	First Name			МІ	Method of	contribution:		Contributio	on ID #	Amount of
Hackett	John				Cash Money	y Order Resonat Credit/De		0222		Contribution
Residential Street Address		City			State	Zip Code	Е	Date Received		
144 Haystack Rd		Manchest	er		СТ	06040-6772	o	3/24/2009	9	
Principal Occupation		Name of En	nployer		•	Is this contribution associ	ated with	a	Yes	ĺ
teacher		South W	indsor BOE			fundraising event listed in If yes, list Event #	Section.	J1?	No	
Is contributor a principal of a state contractor of	or prospective		Yes X No		outor a lobbyis	-	Aggre	egate Contribu	itions	
state contractor? Is yes, indicate which branch or branches of		Executive	Legislative		t child of a lob Yes	-		\$1	100.00	\$100.00
government the contract is with:	First Name	Executive	Legislative	ј <u>Г</u>	I			1		<u> </u>
Last Name Gersh	Steven			MI	Cash	contribution: X Personal G	Check	Contributio	on ID #	Amount of Contribution
		1			Money	y Order Credit/De	bit Card	0224		
Residential Street Address		City			State	Zip Code		ate Received		
50 Greenlea Ln		Weston			СТ	06883-3019	0	3/24/2009	9	
Principal Occupation		Name of En				Is this contribution associ fundraising event listed in			Yes	
Attorney at Law		Berkowit	z Trager			If yes, list Event #		x	No	
Is contributor a principal of a state contractor of	or prospective		Yes X No		utor a lobbyis		Aggre	egate Contribu	itions	ĺ
state contractor? Is yes, indicate which branch or branches of		Executive	Legislative	1 m	t child of a lob Yes	•		\$3	375.00	\$375.00
government the contract is with:		Executive	Legislative	+ -	1			1		
Last Name Berg	First Name Paul			MI	Method of Cash	contribution:	Check	Contributio	on ID #	Amount of Contribution
berg	i dui					y Order Credit/De		0225		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
740 Old Post Rd		Fairfield			СТ	06824-8402	0	3/24/2009	9	ļ
Principal Occupation		Name of En				Is this contribution associ fundraising event listed in		J1?	Yes	
Attorney at Law		Berkowit	z Trager Trager			If yes, list Event #		x	No	
Is contributor a principal of a state contractor of	or prospective		Yes X No		outor a lobbyis	-	Aggre	egate Contribu	itions	Ì
state contractor? Is yes, indicate which branch or branches of					t child of a lob	-		-	375.00	\$375.00
government the contract is with:	Ш	Executive	Legislative	L 1	res x	No				

		I. M	IONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 04/13/2009
		B. It	emized Contributi	ions fron	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Preminger	Richard			J	Cash Money	y Order		0226		Contribution
Residential Street Address		City			State	Zip Code	Б	ate Received		
185 Stoneleigh Sq		Fairfield			СТ	06825-1414	0	3/24/2009)	
Principal Occupation Attorney		Name of Er Berkowit	nployer z Trager & Trager			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor of state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contribu	tions 75.00	\$375.00
Last Name	First Name			MI	1	contribution:		Contributio	ID //	
Siegelaub	Steven			IVII	Cash	y Order Personal C		0227	in ID#	Amount of Contribution
Residential Street Address		City			State	Zip Code	Е	ate Received		
150 Wildrose Rd		Orange			СТ	06477-1837	0	3/24/2009)	
Principal Occupation		Name of En	nployer			Is this contribution associ	ated with	a	Yes	•
Attorney at Law		Berkowit	z Trager & Trager			fundraising event listed in If yes, list Event #	Section .	J1?	No	
Is contributor a principal of a state contractor of state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contribu	tions 75.00	\$375.00
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Komisar	Howard				Cash Money	y Order X Personal C		0228		Contribution
Residential Street Address		City			State	Zip Code	Е	ate Received		
8 Wright St Fl 2		Westport			СТ	06880-3100	0	3/24/2009)	
Principal Occupation Attorney at Law		Name of En	nployer zz Trager & Trager			Is this contribution associ fundraising event listed in		J1?	Yes No	
				-		If yes, list Event #			NO	
Is contributor a principal of a state contractor of state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contribu \$3	tions 75.00	\$375.00
Last Name	First Name			MI	1	contribution:		0.116	ID //	
Febbraio	Samuel			IVII	Cash	x Personal C		Contributio	in ID#	Amount of Contribution
Residential Street Address		City		•	State	Zip Code	Е	ate Received		
152 Dill Rd		Fairfield			СТ	06824-4566	0	3/24/2009)	
Principal Occupation		Name of Er	nployer		•	Is this contribution associ			Yes	
Lawyer		Berkowit	z Trager & Trager			fundraising event listed in If yes, list Event #	Section .)1?	No	
Is contributor a principal of a state contractor of	or prospective		Yes X No		utor a lobbyis	-	Aggre	gate Contribu	tions	
state contractor? Is yes, indicate which branch or branches of		Evacutiv	Legislative	dependent	child of a lob	-		\$3	75.00	\$375.00
government the contract is with:	ᆜ	Executive	Legislative	Т П,	CS	INU	1			

		I. MONETARY	RECEIP	PTS (Section	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Dan Malloy For Connecticut (C	TT)						Origi	nal 04/13/2009
		B. Itemized Contri	ibutions fr	om Individu	ıals		•	
Last Name Cody	First Name Erin		MI M	Cash	contribution: X Personal C y Order Credit/Deb	heck	Contribution ID #	Amount of Contribution
Residential Street Address 123 Harbor Dr Apt 711		City Stamford		State CT	Zip Code 06902-7493		e Received 24/2009	
Principal Occupation IT & Process Design		Name of Employer Fidelity Investments			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X N Executive Legislative		ntributor a lobbyis ident child of a lob Yes	byist?	Aggregat	te Contributions \$350.00	\$350.00
Last Name Breakstone	First Name Robert		MI	Cash	contribution: X Personal C y Order Credit/Deb	heck	Contribution ID #	Amount of Contribution
Residential Street Address 2432 NW 62nd St		City Boca Raton		State FL	Zip Code 33496-3632		e Received 224/2009	
Principal Occupation consulting		Name of Employer Landmark International		·	Is this contribution associa fundraising event listed in If yes, list Event #		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X N Executive Legislative		ntributor a lobbyis ident child of a lob Yes	byist?	Aggregat	te Contributions \$375.00	\$375.00
Last Name Craig	First Name Thomas		МІ	Cash	contribution: X Personal C y Order Credit/Deb	heck	Contribution ID #	Amount of Contribution
Residential Street Address 734 Duck Farm Rd		City Fairfield		State CT	Zip Code 06824-2937		e Received /24/2009	
Principal Occupation Senior Vice President		Name of Employer Hines Int			Is this contribution associa fundraising event listed in If yes, list Event #		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X N Executive Legislative		ntributor a lobbyis ndent child of a lob Yes	byist?	Aggregat	te Contributions \$375.00	\$375.00
Last Name Fink	First Name Elizabeth		MI	Cash	contribution: X Personal C y Order Credit/Deb	heck	Contribution ID #	Amount of Contribution
Residential Street Address 51 Graenest Ridge Rd		City Wilton		State CT	Zip Code 06897-2929		e Received '24/2009	
Principal Occupation n/a		Name of Employer n/a		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X N Executive Legislative		ntributor a lobbyis ndent child of a lob Yes	byist?	Aggregat	te Contributions \$350.00	\$350.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE							F	FILING	DUE DATE
Dan Malloy For Connecticut (C	T)						C	Origina	1 04/13/2009
		B. Itemized Contribut	ions fron	ı Individu	ıals		•		
Last Name Cutter	First Name Christoph	er	MI J	Cash	contribution: X Personal Cl y Order Credit/Deb	heck	Contribution II	D#	Amount of Contribution
Residential Street Address 47 Fordyce Rd		City New Milford		State CT	Zip Code 06776-3629		e Received /24/2009		
Principal Occupation retired		Name of Employer retired			Is this contribution associa fundraising event listed in If yes, list Event # 032		, X Y		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggrega	te Contribution \$50	ns 0.00	\$50.00
Last Name Cutter	First Name Anne		MI	Cash	contribution: X Personal Cl y Order Credit/Deb	heck	Contribution II	D#	Amount of Contribution
Residential Street Address 47 Fordyce Rd		City New Milford		State CT	Zip Code 06776-3629		e Received /24/2009		
Principal Occupation n/a		Name of Employer n/a		•	Is this contribution associa fundraising event listed in If yes, list Event # 032		? × Y		
Is contributor a principal of a state contractor of state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggrega	te Contribution \$50	ns 0.00	\$50.00
Last Name Keithan	First Name James		MI P	Cash	contribution: X Personal Cl	heck	Contribution II	D#	Amount of Contribution
Residential Street Address 354 Northfield Rd		City Litchfield		State CT	Zip Code 06759-3715		e Received /24/2009		
Principal Occupation engineer		Name of Employer Netronome		•	Is this contribution associa fundraising event listed in If yes, list Event # 032		1 1		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggrega	te Contributior \$25	ns 5.00	\$25.00
Last Name Dillon	First Name John		MI	Cash	contribution: X Personal Cl y Order Credit/Deb	heck	Contribution II	D#	Amount of Contribution
Residential Street Address 124 Whipporwill Ln		City Torrington		State CT	Zip Code 06790-2158		e Received /24/2009		
Principal Occupation non-profit executive		Name of Employer self		•	Is this contribution associa fundraising event listed in If yes, list Event # 032	Section J1?	1 1		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggrega	te Contribution		\$200.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FILI	NG DUE DATE
Dan Malloy For Connecticut (C	T)						Orig	inal 04/13/2009
		B. Itemized Contributi	ons fron	ı Individu	ıals			
Last Name Ortiz	First Name Mariah		MI	Cash	contribution: X Personal Cl	neck 02	ontribution ID #	Amount of Contribution
Residential Street Address 330 Highland Ave Apt 9A		City Torrington		State CT	Zip Code 06790-4746		eceived 4/2009	
Principal Occupation education counselor		Name of Employer Community Systems Inc.			Is this contribution associa fundraising event listed in If yes, list Event # 032		X Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate (Contributions \$20.00	\$20.00
Last Name Fishman	First Name Mitchell		MI	Cash	contribution: X Personal Cl y Order Credit/Debi	neck 02	ontribution ID #	Amount of Contribution
Residential Street Address 18 Osborn Ln		City Litchfield		State CT	Zip Code 06759-2320		eceived 4/2009	
Principal Occupation attorney		Name of Employer self		•	Is this contribution associa fundraising event listed in If yes, list Event # 032		X Yes No	
Is contributor a principal of a state contractor of state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate (Contributions \$50.00	\$50.00
Last Name Kennedy	First Name Kelly		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 02	ontribution ID #	Amount of Contribution
Residential Street Address 38 Castlewood Rd		City West Hartford		State CT	Zip Code 06107-2903		eceived 4/2009	
Principal Occupation communications, policy & planning	9	Name of Employer CTLCV, freelancer			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate (Contributions \$25.00	\$25.00
Last Name Bluestein	First Name Lynda		MI S	Cash	contribution: Personal Cl y Order x Credit/Debi	neck 02	ontribution ID #	Amount of Contribution
Residential Street Address 61 Lantern Rd		City Fairfield		State CT	Zip Code 06824-2801		eceived 4/2009	
Principal Occupation fundraising consultant		Name of Employer self			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate (Contributions \$100.00	\$100.00

		I. N	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Dan Malloy For Connecticut (C	T)								Origina	al 04/13/2009
		B. It	emized Contribut	ions fron	ı Individu	ıals		•		
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Haberek	Edward				Cash Money	y Order X Credit/De		0243		Contribution
Residential Street Address		City			State	Zip Code	Е	ate Received		
28 Moss St		Pawcatuo	ck		СТ	06379-2115	0	3/24/2009)	
Principal Occupation First Selectman		Name of E	nployer Stonington			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
							1			•
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contribut \$1	00.00	\$100.00
government the contract is with: Last Name	First Name	LACCULIVE	Legistative	I _{MI}	I	contribution:	<u> </u>		ID #	
Street	Paul			A	Cash	y Order X Credit/De		Contribution 0244	n ID#	Amount of Contribution
Residential Street Address		City			State	Zip Code	Б	ate Received		
25 Tower Rd		Riverside	!		СТ	06878-2514	0	3/24/2009)	
Principal Occupation		Name of E	mployer		•	Is this contribution associ			Yes	
Investor		Impala F	Partners			fundraising event listed in If yes, list Event #	n Section .	x	No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contribut \$3	75.00	\$375.00
Last Name	First Name			MI	I	contribution:		Contributio	n ID#	Amount of
Clements	Marilyn			Т	Cash Money	y Order X Credit/De		0245	II II	Contribution
Residential Street Address		City			State	Zip Code	Е	ate Received		
104 Wallacks Dr		Stamford	l		СТ	06902-7100	0	3/24/2009)	
Principal Occupation		Name of E	mployer			Is this contribution associ fundraising event listed in			Yes	
Artist/teacher		self				If yes, list Event #	ii section .	x	No	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No	1	utor a lobbyis child of a lob		Aggre	gate Contribut	tions	
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		res x	-		\$1	00.00	\$100.00
Last Name	First Name			MI		contribution:	a	Contribution	n ID#	Amount of
Hotaling	Robert	1			Cash Money	y Order X Credit/De		0246		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
160 Pine Point Dr		Bridgepo	rt		СТ	06606-1958	_	3/24/2009		
Principal Occupation Software Developer		Name of Er Supply I				Is this contribution associ fundraising event listed in If yes, list Event #		J1? $f egin{array}{cccccccccccccccccccccccccccccccccccc$	Yes No	
Is contributor a principal of a state contractor state contractor?	or prospective	•	Yes X No	1	utor a lobbyis child of a lob		Aggre	gate Contribut		#F0 00
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	Y	res X	No		\$	50.00	\$50.00

I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTEE							FILIN	G DUE DATE	
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009	
		B. Itemized Contribut	ions fron	ı Individu	ıals				
Last Name Mosca	First Name Louis		MI M	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 0247	oution ID#	Amount of Contribution	
Residential Street Address 9235 Ridge Pine Trl		City Orlando		State FL	Zip Code 32819-4884	Date Recei			
Principal Occupation Exec Vice President		Name of Employer American Management Serv	ices, Inc		Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Cont	ributions \$375.00	\$375.00	
Last Name Glassman	First Name Jan		MI A	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 0253	oution ID#	Amount of Contribution	
Residential Street Address 530 E Central Blvd Apt 503		City Orlando		State FL	Zip Code 32801-4344	Date Recei			
Principal Occupation General Counsel		Name of Employer American Management Serv	ices, Inc.		Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Cont	ributions \$375.00	\$375.00	
Last Name Delaney	First Name Michael		MI E	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 0254	oution ID#	Amount of Contribution	
Residential Street Address 389 Ocean Dr W		City Stamford		State CT	Zip Code 06902-8222	Date Recei			
Principal Occupation president		Name of Employer ralsey group		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggregate Cont	ributions \$375.00	\$375.00	
Last Name Delaney	First Name Jamie		MI F	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 0265	oution ID#	Amount of Contribution	
Residential Street Address 389 Ocean Dr W		City Stamford		State CT	Zip Code 06902-8222	Date Recei			
Principal Occupation evp design		Name of Employer ralsey group		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Cont	ributions \$375.00	\$375.00	

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 04/13/2009
		B. It	emized Contributi	ons fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Nichani	Shalinder				Cash Money	y Order X Credit/Del		0255		Contribution
Residential Street Address		City		1	State	Zip Code	Г	ate Received		
12 Hickory Dr # B		Greenwic	:h		СТ	06831-4916	0	3/24/2009	e	
Principal Occupation		Name of E	nployer		•	Is this contribution associ	ated with	a	Yes	Ī
Business		Greenwi	ch Hospitality Group	,llc		fundraising event listed in If yes, list Event #	Section .	J1? x	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis		Aggre	egate Contribu	itions	
state contractor? Is yes, indicate which branch or branches of		Executive	Legislative	I '─	child of a lob	,		\$2	250.00	\$250.00
government the contract is with:	l _{E' (M}	Executive	Legislative	Т _{МІ}	I			1		<u> </u>
Last Name Blaustein	First Name Dorothy			MI	Cash	contribution: Personal C	Check	Contribution 0257	on ID #	Amount of Contribution
					Money	y Order X Credit/Del	bit Card	0237		
Residential Street Address		City			State	Zip Code		ate Received		
261 Random Rd		Fairfield			СТ	06825-1407	0	3/24/2009		
Principal Occupation		Name of E	nployer			Is this contribution associ fundraising event listed in			Yes	
none		none				If yes, list Event #		х	No	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis child of a lob	-	Aggre	egate Contribu	itions	\$10.00
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	Y	res x	No		*		Ψ10.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID#	Amount of
Heftman	Jacquelin				Cash Money	y Order X Credit/Del		0258		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
97 Acre View Dr		Stamford	<u> </u>		СТ	06903-2510	0	3/24/2009	9	
Principal Occupation		Name of E	mployer			Is this contribution associ fundraising event listed in			Yes	
Retired		None				If yes, list Event #	. Deciron	x	No	
Is contributor a principal of a state contractor	or prospective	1	Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	egate Contribu	itions	†
state contractor? Is yes, indicate which branch or branches of				l	child of a lob	•		-	375.00	\$375.00
government the contract is with:		Executive	Legislative	'	res X	No				<u> </u>
Last Name	First Name Thomas			MI		contribution:	heck	Contributio	on ID#	Amount of
Heide	Inomas				Cash Money	y Order X Credit/Del		0259		Contribution
Residential Street Address		City			State	Zip Code	Е	ate Received		
115 Carriage Dr		Stamford	!		СТ	06902-1534	0	3/24/2009		
Principal Occupation		Name of E				Is this contribution associ			Yes	
Investment Banker		Heide &	Company, LLC			fundraising event listed in If yes, list Event #	i section .	x	No	
Is contributor a principal of a state contractor	or prospective		Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	egate Contribu	itions	†
state contractor? Is yes, indicate which branch or branches of				dependent	child of a lob	byist?	1.551	-	100.00	\$100.00
government the contract is with:	Ш	Executive	Legislative	L 1	res X	No				

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE							F	FILING	DUE DATE
Dan Malloy For Connecticut (C	T)						(Origina	ıl 04/13/2009
		B. Itemized Contributi	ions from	Individu	ıals				
Last Name	First Name		MI	Method of	contribution:		Contribution I	ID#	Amount of
Gianquinto	Christine			Cash Money	Personal Cl x Credit/Debi		0260		Contribution
Residential Street Address		City		State	Zip Code	Date	e Received		
2 Binney Rd		Old Lyme		СТ	06371-1444	03/	/24/2009		
Principal Occupation Secretary		Name of Employer Norwich Free Academy			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
			I						
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggrega	ate Contribution \$35	ns 5.00	\$35.00
Last Name	First Name		MI	Method of	contribution:		Contribution I	ID#	Amount of
Lob	Roger			Cash Money	Personal Cl y Order X Credit/Debi		0262		Contribution
Residential Street Address		City		State	Zip Code		e Received		
250 Butternut Ln		Stamford		СТ	06903-3830		/24/2009		
Principal Occupation investment manager		Name of Employer markston intl IIc			Is this contribution associa fundraising event listed in If yes, list Event #		2 X 1	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggrega	ate Contribution		\$120.00
government the contract is with: Last Name	First Name	Executive	<u>Тмі</u>		contribution:	T		- I	
Cello	Curtis		IVII	Cash	Personal Cl y Order X Credit/Debi	neck	Contribution I 0263	ID#	Amount of Contribution
Residential Street Address	•	City		State	Zip Code	Date	e Received		
3500 Watercrest Pl		Orlando		FL	32835-2527	03/	/24/2009		
Principal Occupation Sales		Name of Employer American Management Servi	ices		Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective	Yes X No		utor a lobbyis child of a lob	byist?	Aggrega	ate Contribution		\$375.00
government the contract is with:		Executive Legislative	L Y	res X	No		·		·
Last Name Harrington	First Name Richard		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck	Contribution I	ID#	Amount of Contribution
Residential Street Address		City		State	Zip Code		e Received		
9 Greystone Farm Ln		Westport		CT	06880-2750		/24/2009		
Principal Occupation venture capital		Name of Employer self employed			Is this contribution associa fundraising event listed in If yes, list Event #		2 X 1	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggrega	ate Contribution		\$375.00

	I. MONETARY RE	CEIPTS (Sectio	n A-I)			
NAME OF COMMITTEE					FILING	DUE DATE
Dan Malloy For Connecticut (CT)					Origina	al 04/13/2009
	B. Itemized Contributi	ions from Individu	ıals			
Last Name First Nar Messer Al	e	Cash	contribution: X Personal C	0239	on ID#	Amount of Contribution
Residential Street Address 282 Torrington Rd	City Litchfield	State CT	Zip Code 06759-0579	Date Received		
Principal Occupation None	Name of Employer Retired		Is this contribution associa fundraising event listed in If yes, list Event # 032	Section J1?	Yes No	
Is contributor a principal of a state contractor or prospect state contractor? Is yes, indicate which branch or branches of government the contract is with:	ve Yes X No Executive Legislative	Is contributor a lobbyis dependent child of a lob	byist?	Aggregate Contribu	utions 100.00	\$100.00
Last Name First Nam Malloy Lee	e	Cash	contribution: Personal Contribution: y Order X Credit/Deb	0288	on ID#	Amount of Contribution
Residential Street Address 55 Westcott Rd	City Stamford	State CT	Zip Code 06902-8127	Date Received 03/25/200		
Principal Occupation Operations Management	Name of Employer Phillips de Pury		Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No	
Is contributor a principal of a state contractor or prospect state contractor? Is yes, indicate which branch or branches of government the contract is with:	ve Yes X No Executive Legislative	Is contributor a lobbyis dependent child of a lob	byist?	Aggregate Contribi	utions 375.00	\$375.00
Last Name First Nar Kalter Peggy	е	Cash	contribution: Personal C	0261	on ID#	Amount of Contribution
Residential Street Address 25 Barnes Rd W	City Stamford	State CT	Zip Code 06902-1243	Date Received 03/25/200		
Principal Occupation Pres/CEO	Name of Employer The Masterson/SWOT Team	•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No	
Is contributor a principal of a state contractor or prospect state contractor? Is yes, indicate which branch or branches of government the contract is with:	ve Yes X No Executive Legislative	Is contributor a lobbyis dependent child of a lob	byist?	Aggregate Contribu	utions 375.00	\$375.00
Last Name First Nar Samers Edith	e	M Cash	contribution: Personal Contribution: y Order X Credit/Deb	0256	on ID#	Amount of Contribution
Residential Street Address 180 Big Oak Rd	City Stamford	State CT	Zip Code 06903-4608	Date Received 03/25/200		
Principal Occupation marketing	Name of Employer Shalom TV		Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No	
Is contributor a principal of a state contractor or prospect state contractor? Is yes, indicate which branch or branches of government the contract is with:	ve Yes X No Executive Legislative	Is contributor a lobbyis dependent child of a lob	byist?	Aggregate Contrib	utions 100.00	\$100.00

	I. MONETARY RE	CEIPTS (Section .	A-I)			
NAME OF COMMITTEE					FILING	DUE DATE
Dan Malloy For Connecticut (CT)					Origina	al 04/13/2009
	B. Itemized Contributi	ions from Individual	ls			
Last Name First Nan Wilson Winifre		MI Method of con Cash Money Or	Personal Che	0286	on ID#	Amount of Contribution
Residential Street Address 107 Tallwood Dr	City South Windsor		Zip Code 06074-2920	Date Received 03/25/2009	9	
Principal Occupation retired	Name of Employer n/a	f	Is this contribution associate fundraising event listed in Se If yes, list Event #	ection J1?	Yes No	
Is contributor a principal of a state contractor or prospec state contractor? Is yes, indicate which branch or branches of government the contract is with:	Yes X No Executive Legislative	Is contributor a lobbyist, sp dependent child of a lobbyi	ist?	Aggregate Contribu	tions \$25.00	\$25.00
Last Name First Nai Mcknight Richar		MI Method of con Cash Money O	Personal Che	I 0289	on ID#	Amount of Contribution
Residential Street Address 320 Old Oaks Rd	City Fairfield		Zip Code 06825-1932	Date Received 03/25/2009	e	
Principal Occupation Executive Search Consultant	Name of Employer The McKnight Group	f	Is this contribution associate fundraising event listed in Se If yes, list Event #	ection J1?	Yes No	
Is contributor a principal of a state contractor or prospec state contractor? Is yes, indicate which branch or branches of government the contract is with:	Yes X No Executive Legislative	Is contributor a lobbyist, sp dependent child of a lobbyi	ist?	Aggregate Contribu \$1	itions	\$100.00
Last Name First Nan Priest Jason	ne	MI Method of con R Cash Money Or	Personal Che	0290	on ID#	Amount of Contribution
Residential Street Address 9945 Long Bay Dr	City Orlando		Zip Code 32832-5971	Date Received 03/25/2009	Э	
Principal Occupation Sales	Name of Employer American Management Servi	ices	Is this contribution associate fundraising event listed in Se If yes, list Event #	ection J1?	Yes No	
Is contributor a principal of a state contractor or prospec state contractor? Is yes, indicate which branch or branches of government the contract is with:	Yes X No Executive Legislative	Is contributor a lobbyist, sp dependent child of a lobbyi	ist?	Aggregate Contribu \$2	tions 200.00	\$200.00
Last Name First Nan Gwozdziowski Joanna		MI Method of con M Cash Money Or	X Personal Che	0249	on ID#	Amount of Contribution
Residential Street Address 15 Stamford Ave	City Stamford	1 1	Zip Code 06902-8010	Date Received 03/25/2009	9	
Principal Occupation Consultant	Name of Employer Self Employed	f	Is this contribution associate fundraising event listed in Self yes, list Event # 0329	ection J1?	Yes No	
Is contributor a principal of a state contractor or prospec state contractor? Is yes, indicate which branch or branches of government the contract is with:	Yes X No Executive Legislative	Is contributor a lobbyist, sp dependent child of a lobbyi	ist?	Aggregate Contribu	itions	\$100.00

	I. MONETARY RE	CEIPTS (Section	n A-I)			
NAME OF COMMITTEE					FILING	DUE DATE
Dan Malloy For Connecticut (CT)					Origina	al 04/13/2009
	B. Itemized Contribution	ons from Individu	ıals			
Last Name First Name Stein Robert		M Cash	contribution:	0250	on ID#	Amount of Contribution
Residential Street Address	City	State	/ Order Credit/Deb	Date Received		
67 Leonard St Principal Occupation city planner	Name of Employer City of Stamford	СТ	Is this contribution associa fundraising event listed in If yes, list Event # 032	Section J1?	Yes No	
Is contributor a principal of a state contractor or prospective state contractor? Is yes, indicate which branch or branches of government the contract is with:	Yes X No Executive Legislative	Is contributor a lobbyis dependent child of a lob	byist?	Aggregate Contribu	utions 100.00	\$100.00
Last Name First Name Linke William		F Cash	contribution: X Personal Cl	0251	on ID#	Amount of Contribution
Residential Street Address 75 Ridgecrest Rd	City Stamford	State CT	Zip Code 06903-3120	Date Received 03/25/200		
Principal Occupation retired	Name of Employer Retired		Is this contribution associa fundraising event listed in If yes, list Event # 032	Section J1?	Yes No	
Is contributor a principal of a state contractor or prospective state contractor? Is yes, indicate which branch or branches of government the contract is with:	Yes X No Executive Legislative	Is contributor a lobbyis dependent child of a lob	byist?	Aggregate Contrib	ations \$50.00	\$50.00
Last Name Neems First Name Karen		V Cash	contribution: X Personal Cl / Order Credit/Deb	0252	on ID#	Amount of Contribution
Residential Street Address 215 Brookdale Rd	City Stamford	State CT	Zip Code 06903-4118	Date Received		
Principal Occupation artist	Name of Employer self	•	Is this contribution associa fundraising event listed in If yes, list Event # 032	Section J1?	Yes No	
Is contributor a principal of a state contractor or prospective state contractor? Is yes, indicate which branch or branches of government the contract is with:	Yes No Executive Legislative	Is contributor a lobbyis dependent child of a lob	byist?	Aggregate Contribu	utions 100.00	\$100.00
Last Name First Name Stein David		Cash	contribution: X Personal Cl Order Credit/Deb	0248	on ID#	Amount of Contribution
Residential Street Address 83 Boulder Brook Dr	City Stamford	State CT	Zip Code 06903-3231	Date Received 03/25/200		
Principal Occupation Attorney	Name of Employer Vision Financial Markets		Is this contribution associa fundraising event listed in If yes, list Event # 032	Section J1?	Yes No	
Is contributor a principal of a state contractor or prospective state contractor? Is yes, indicate which branch or branches of government the contract is with:	Yes X No Executive Legislative	Is contributor a lobbyis dependent child of a lob	byist?	Aggregate Contrib	utions 100.00	\$100.00

		I. MONETA	RY REC	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origina	al 04/13/2009
		B. Itemized Co	ntributio	ns from	Individu	ıals				
Last Name Lasko	First Name William			MI J	Cash	contribution: Personal C y Order X Credit/De		Contributio	on ID#	Amount of Contribution
Residential Street Address 40 Four Brooks Rd		City Stamford			State CT	Zip Code 06903-4615	Da	ate Received 3/25/2009)	
Principal Occupation attorney		Name of Employer NYC				Is this contribution associ fundraising event listed in If yes, list Event #		1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Executive Legislat	X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribu \$1	ons.00.00	\$50.00
Last Name Steinegger	First Name Nancy			MI J	Cash	contribution: X Personal C y Order Credit/De		Contribution 0283	on ID #	Amount of Contribution
Residential Street Address 88 Indian Harbor Dr		City Greenwich			State CT	Zip Code 06830-7148		ate Received 3/26/2009	9	
Principal Occupation real estate development		Name of Employer self				Is this contribution associ fundraising event listed in If yes, list Event #		1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Executive Legislat	X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu \$3	itions 375.00	\$350.00
Last Name Kahn	First Name Robert			MI H	Cash	contribution: X Personal C y Order Credit/De		Contributio	on ID #	Amount of Contribution
Residential Street Address 80 Old Hill Rd # C		City Westport			State CT	Zip Code 06880-2316		ate Received 3/26/2009)	
Principal Occupation Executive		Name of Employer United Realty				Is this contribution associ fundraising event listed in If yes, list Event #		12	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Executive Legislat	X No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribu \$3	itions 375.00	\$375.00
Last Name Rose	First Name Jonathan			MI	Cash	contribution: X Personal G y Order Credit/De		Contribution 0282	on ID #	Amount of Contribution
Residential Street Address 33 Katonah Ave		City Katonah			State NY	Zip Code 10536-2164		ate Received 3/26/2009)	
Principal Occupation Real Estate Developer		Name of Employer Jonathan Rose Co.				Is this contribution associ fundraising event listed in If yes, list Event #		1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Executive Legislat	x No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribu \$3	itions 375.00	\$375.00

		I. M	IONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 04/13/2009
		B. It	emized Contributi	ons fron	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Berman	Deborah			S	Cash Money	y Order X Personal C		0284		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
44 Four Brooks Rd		Stamford	1		СТ	06903-4615	0	3/26/2009	9	
Principal Occupation retired		Name of En	nployer			Is this contribution associ fundraising event listed in If yes, list Event # 03			Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contribu	tions 50.00	\$50.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Hynes	Thomas				Cash Money	y Order Personal C		0285		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
67 Fawnfield Rd		Stamford			СТ	06903-3727	0	3/26/2009		ļ
Principal Occupation wealth management		Name of Er Hynes, H	nployer Himmelreich, Glennor	n & Co.		Is this contribution associ fundraising event listed in If yes, list Event #		_{11?}	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contribu \$2	itions 250.00	\$250.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Wells	Galen				Cash Money	y Order Personal C		0267		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
224 W Norwalk Rd		Norwalk			СТ	06850-4316	0	3/26/2009	9	
Principal Occupation Attorney		Name of En				Is this contribution associ fundraising event listed in If yes, list Event # 03	Section .		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribu	itions 575.00	\$75.00
government the contract is with: Last Name	First Name			MI	1	contribution:		Contributio	ID #	
Hamilton	Winifred			1411	Cash	y Order Personal C		0268	on ID#	Amount of Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
11 Donohue Dr		Norwalk			СТ	06851-1036	0	3/26/2009	9	l
Principal Occupation educator		Name of En	^{nployer} d Board of Education		•	Is this contribution associ fundraising event listed in If yes, list Event # 03	Section .		Yes No	
Is contributor a principal of a state contractor: state contractor? Is yes, indicate which branch or branches of	or prospective		Yes X No	dependent	utor a lobbyis	byist?	Aggre	gate Contribu	itions	\$100.00
government the contract is with:	Ш	Executive	Legislative	L '	res x	No				

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)		_		
NAME OF COMMITTEE							F	FILING	DUE DATE
Dan Malloy For Connecticut (C	T)						C	Origina	1 04/13/2009
		B. Itemized Contribut	ions fron	ı Individu	ıals				
Last Name	First Name		MI	Method of	contribution:		Contribution I	D#	Amount of
Zinn	Renee			Cash Money	y Order X Personal Ch Credit/Debi	1	0269		Contribution
Residential Street Address		City		State	Zip Code	Date	e Received		
2539 Bedford St Apt 38P		Stamford		СТ	06905-3941	03/	/26/2009		
Principal Occupation retired		Name of Employer retired			Is this contribution associated fundraising event listed in If yes, list Event # 032		1 1	res No	
			I						
Is contributor a principal of a state contractor of state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggrega	ate Contribution \$25	ns 5.00	\$25.00
Last Name	First Name		MI	Method of	contribution:		Contribution I	D#	Amount of
Fanning	Jeanette			Cash Money	y Order Personal Ch Credit/Debi		0270		Contribution
Residential Street Address		City		State	Zip Code		e Received		
11409 Commonwealth Dr Apt T4		Rockville		MD	20852-2831	<u> </u>	/26/2009		
Principal Occupation student/USME aide		Name of Employer USME			Is this contribution associated fundraising event listed in the state of the state		? 🔲 Y	res No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective	Yes X No Executive Legislative	dependent	outor a lobbyis t child of a lob	byist?	Aggrega	ate Contribution \$375		\$375.00
government the contract is with: Last Name	First Name		MI		contribution:	T	Contribution I	D#	
Brody	Susanne			Cash	x Personal Ch y Order Credit/Debi	neck	0271	Бπ	Amount of Contribution
Residential Street Address		City		State	Zip Code	Date	e Received		
966 Lake Ave		Greenwich		СТ	06831-3032	03/	/26/2009		
Principal Occupation Attorney		Name of Employer Federal Defenders SDNY			Is this contribution associated fundraising event listed in the state of the state			res No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggrega	ate Contribution \$375		\$375.00
government the contract is with: Last Name	First Name		MI	1	contribution:	T	Contribution I	D#	
Savage	Mary		М	Cash	x Personal Ch y Order Credit/Debi	neck	0272	.D#	Amount of Contribution
Residential Street Address 14 Lillian St		City Stamford		State CT	Zip Code 06902-4212	1	e Received /26/2009		
Principal Occupation		Name of Employer		-	Is this contribution associa	ted with a	П	res	
Elementary School Principal		Stamford Board of Education	1		fundraising event listed in S If yes, list Event #	Section J1?			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis t child of a lob	byist?	Aggrega	ate Contribution		\$200.00

		I. M	IONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origina	al 04/13/2009
		B. It	emized Contributi	ons from	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contribution	n ID#	Amount of
Tomasello	Camille				Cash Money	y Order X Personal C		0273		Contribution
Residential Street Address	•	City		•	State	Zip Code	D	ate Received		
631 Long Ridge Rd Unit 15		Stamford			СТ	06902-1261	0	3/26/2009	1	
Principal Occupation Housewife		Name of Er none	nployer			Is this contribution associ fundraising event listed in If yes, list Event #		11? <u>'</u>	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contribut	tions 00.00	\$100.00
government the contract is with:	<u></u>	Executive	Legislative	+-			<u> </u>	1		
Last Name White	First Name Arthur			MI H	Cash	contribution: X Personal C		Contribution 0274	n ID#	Amount of Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
121 Four Brooks Rd		Stamford			СТ	06903-4629	0	3/26/2009	ı	
Principal Occupation		Name of Er	nployer		•	Is this contribution associ			Yes	
n/a		self				fundraising event listed in If yes, list Event #	Section .	x	No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribut \$	tions 75.00	\$75.00
Last Name	First Name			MI	Method of	contribution:		Contribution	n ID#	Amount of
Douglas	Bruce				Cash Money	y Order Personal C		0275		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
24 Andrea Ln		Scarsdale	2		NY	10583-3116	0	3/26/2009		
Principal Occupation marketing		Name of Er	nployer Apartive Marketing			Is this contribution associ fundraising event listed in	Section .	11?	Yes	
						If yes, list Event # 03	302009	<u>іс</u>	No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribut \$2	tions 50.00	\$250.00
government the contract is with: Last Name	First Name			MI		contribution:	<u> </u>	Contribution	ID #	
Greenberg	Lynn			G	Cash	y Order Personal Credit/De		0276	n 1D #	Amount of Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
491 Thayer Pond Rd		Wilton			СТ	06897-2321	0	3/26/2009		
Principal Occupation		Name of Er	nployer			Is this contribution associ fundraising event listed in			Yes	
Housewife		none				If yes, list Event #	i dection .	х	No	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis child of a lob	-	Aggre	gate Contribut	tions 75.00	\$375.00
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	Y	res x	No		45		4373.00

		I. MON	NETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origina	al 04/13/2009
		B. Itemiz	zed Contributi	ons from	Individu	ıals				
Last Name	First Name			MI		contribution:	21 1	Contributi	on ID#	Amount of
Greenberg	David			A	Cash Money	y Order Personal C		0277		Contribution
Residential Street Address 491 Thayer Pond Rd		City Wilton			State CT	Zip Code 06897-2321		ate Received		
Principal Occupation		Name of Employe	er		<u> </u>	Is this contribution associ		<u> </u>		
Attorney		1	rager & Trager			fundraising event listed in If yes, list Event #	n Section J	I1?	No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	child of a lob	byist?	Aggre	gate Contribu \$3	ations 375.00	\$375.00
Last Name Abbazia	First Name Margaret			MI	Cash	contribution: X Personal (y Order Credit/De		Contribution 0278	on ID#	Amount of Contribution
Residential Street Address 95C Forest Rd		City Milford		•	State CT	Zip Code 06461-9002		ate Received		
Principal Occupation Retired		Name of Employe	er			Is this contribution assoc fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggre	egate Contribu	utions \$50.00	\$50.00
Last Name Malloy	First Name Johnnie			MI C	Cash	contribution: X Personal 0 y Order Credit/De		Contribution 0279	on ID#	Amount of Contribution
Residential Street Address 55 Westcott Rd		City Stamford			State CT	Zip Code 06902-8127		ate Received		
Principal Occupation non profit management		Name of Employe St. Luke's Lif				Is this contribution association fundraising event listed in If yes, list Event #		11?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu	ations 375.00	\$375.00
Last Name Malloy	First Name Shaun			MI M	Cash	contribution: X Personal 0 y Order Credit/De		Contribution 0280	on ID#	Amount of Contribution
Residential Street Address 55 Westcott Rd		City Stamford			State CT	Zip Code 06902-8127		ate Received		
Principal Occupation Broker/Banker		Name of Employe Mortgage Ma				Is this contribution assoc fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	_	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribu	ations 375.00	\$375.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FIL	LING DUE DATE
Dan Malloy For Connecticut (C	T)						Ori	iginal 04/13/2009
		B. Itemized Contributi	ons from	ı Individu	ıals		•	
Last Name	First Name		MI	Method of	contribution:	С	Contribution ID #	# Amount of
Karg	Dorothy			Cash Money	Personal Cl x Credit/Debi	10	350	Contribution
Residential Street Address		City		State	Zip Code	Date I	Received	
100 Seaview Ave Unit 4C		Norwalk		СТ	06855-2305	03/2	26/2009	_
Principal Occupation Interior Designer		Name of Employer Self employed			Is this contribution associa fundraising event listed in		Yes	
		, ,			If yes, list Event #		X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggregate	Contributions \$50.0	\$50.00
Last Name	First Name		MI	Method of	contribution:		Contribution ID #	# Amount of
Velishka	Benjamin		d	Cash Money	Personal Cl y Order X Credit/Debi	10)351	Contribution
Residential Street Address		City		State	Zip Code		Received	
109 Burwood Ave		Stamford		СТ	06902-7702		26/2009	_
Principal Occupation builder		Name of Employer dayton builders llc			Is this contribution associa fundraising event listed in If yes, list Event #		Yes No	
Is contributor a principal of a state contractor of state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate	Contributions \$375.0	\$375.00
Last Name	First Name		MI	Method of	contribution:	С	Contribution ID #	# Amount of
Gianquinto	Emily			Cash Money	Personal Cl x Credit/Debi	neck 0)341	Contribution
Residential Street Address		City		State	Zip Code	Date I	Received	
216 Oxford St		Hartford		СТ	06105-2250	03/2	26/2009	
Principal Occupation		Name of Employer	D		Is this contribution associa fundraising event listed in		Yes	
Attorney		Axinn Veltrop & Harkrider LL	r		If yes, list Event #		x No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective		dependent	utor a lobbyis	byist?	Aggregate	Contributions	\$100.00
government the contract is with:		Executive Legislative	+ -	res x				
Last Name Cabrera	First Name Joseph		MI	Cash	contribution:	neck	Contribution ID #	# Amount of Contribution
		1		Money	y Order X Credit/Debi	_ _		_
Residential Street Address 51 W 52nd St		City New York		State NY	Zip Code 10019-6119		Received 26/2009	
Principal Occupation		Name of Employer			Is this contribution associa		Yes	7
Real Estate Broker		Cushman & Wakefield			fundraising event listed in If yes, list Event #	Section J1?	X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate	e Contributions \$375.0	\$375.00

		I. MONETAR	Y RECEI	IPTS	(Section	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origina	al 04/13/2009
		B. Itemized Cont	ributions	from	Individu	als				
Last Name	First Name		MI	I	Method of	contribution:		Contributio	on ID #	Amount of
Lukaj	Richard				Cash Money	Personal C Credit/Deb		0348		Contribution
Residential Street Address		City	•		State	Zip Code	D	ate Received		
1 Canterbury Grn		Stamford			СТ	06901-2032	0	3/27/2009	9	
Principal Occupation		Name of Employer				Is this contribution associa fundraising event listed in			Yes	
Senior Managing Director		Bank Street Group				If yes, list Event #		x	No	
Is contributor a principal of a state contractor	or prospective	Yes X			tor a lobbyist		Aggre	gate Contribu	itions	
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive Legislative	dep	pendent o	child of a lob	-		\$3	375.00	\$375.00
Last Name	First Name		MI	I	Method of	contribution:		Contributio	on ID #	Amount of
Vazquez	Mirellise				Cash Money	Personal C Order X Credit/Deb		0349		Contribution
Residential Street Address		City	•		State	Zip Code	D	ate Received		
30 Maple Tree Ave Apt C1		Stamford			СТ	06906-2233	0	3/27/2009	€	
Principal Occupation		Name of Employer				Is this contribution association fundraising event listed in			Yes	
Partnership Development		Christian Children''s Fi	und			If yes, list Event #	Section :	x	No	
Is contributor a principal of a state contractor	or prospective	Yes X			tor a lobbyist		Aggre	gate Contribu	itions	
state contractor? Is yes, indicate which branch or branches of	П	Executive Legislative	l i	pendent o	child of a lob	•		\$	50.00	\$50.00
government the contract is with: Last Name	First Name	Executive Legislative	MI			contribution:	<u> </u>	1	"	
Diddel-Warren	Katha		IVII		Cash	X Personal C	heck	Contribution 0363	on ID#	Amount of Contribution
		1			Money	Order Credit/Deb	oit Card	0303		
Residential Street Address		City			State	Zip Code		ate Received	,	
180 Stanwich Rd		Greenwich		!	СТ	06831-0419	_	3/27/2009	-	
Principal Occupation owner of company		Name of Employer self				Is this contribution association fundraising event listed in		_{11?}	1 100	
- Owner or company						If yes, list Event #		Įχ	No	
Is contributor a principal of a state contractor state contractor?	or prospective	Yes			tor a lobbyist		Aggre	gate Contribu	itions	
Is yes, indicate which branch or branches of government the contract is with:		Executive Legislative	1 1	Ye		-		\$1	100.00	\$100.00
Last Name	First Name		MI	ı [Method of	contribution:		Contributio	on ID#	Amount of
Sandford	Christoph	er			Cash	Personal C		0343		Contribution
Residential Street Address		City			State	Order X Credit/Deb		ate Received		
175 Upper Pattagansett Rd .		East Lyme			CT	06333		3/27/2009		
Principal Occupation		Name of Employer				Is this contribution associa	ated with	a [Yes	
Assoc. Principal		North Stonington Boar	d of Educat	ition		fundraising event listed in If yes, list Event #	Section .	11? x	No	
Is contributor a principal of a state contractor	or prospective	Yes X	No. Ic.	contribu	tor a lobbyist	•		vento C - 1 1	ution-	
state contractor? Is yes, indicate which branch or branches of	. ppecure		dep	pendent o	child of a lob	byist?	Aggre	gate Contribu \$1	100.00	\$100.00
government the contract is with:		Executive Legislative		Ye	es X	No	1			ĺ

		I. M	ONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Dan Malloy For Connecticut (C	TT)								Origina	al 04/13/2009
		B. It	emized Contributi	ions fron	ı Individu	ıals		'		
Last Name Watson	First Name Kelly			MI	Cash	contribution: X Personal C		Contribution 0354	n ID#	Amount of Contribution
Residential Street Address 4117 San Carlos St		City Dallas			State TX	Zip Code 75205-2047		Date Received		
Principal Occupation none		Name of E none	mployer			Is this contribution associ fundraising event listed in If yes, list Event #		_{J1?} $f lue{}$	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes X	byist?	Aggre	egate Contribut	ions 75.00	\$375.00
Last Name Watson	First Name John			MI	Cash	contribution: X Personal C y Order Credit/De		Contribution 0356	n ID#	Amount of Contribution
Residential Street Address 4117 San Carlos St		City Dallas			State TX	Zip Code 75205-2047		Date Received		
Principal Occupation banking		Name of E UBS	mployer		•	Is this contribution associ fundraising event listed in If yes, list Event #		J1? 브	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribut	ions 75.00	\$375.00
Last Name McClutchy	First Name Todd			MI	Cash	contribution: X Personal C		Contribution 0357	n ID#	Amount of Contribution
Residential Street Address 11 Molly Ln		City Darien			State CT	Zip Code 06820-2929		Date Received		
Principal Occupation Real Estate Developer		Name of E The Rich	mployer nman Group			Is this contribution associ fundraising event listed in If yes, list Event #		J1? 브	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribut	ions 75.00	\$375.00
Last Name McClutchy	First Name Janet			MI	Cash	contribution: X Personal C y Order Credit/De		Contribution 0358	n ID#	Amount of Contribution
Residential Street Address 11 Molly Ln		City Darien			State CT	Zip Code 06820-2929		Date Received		
Principal Occupation none		Name of E None	mployer		•	Is this contribution associ fundraising event listed in If yes, list Event #		J1? 브	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribut	ions 75.00	\$375.00

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 04/13/2009
		B. It	emized Contributi	ons from	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID#	Amount of
McClutchy	John			Н	Cash Money	y Order X Personal Credit/De		0355		Contribution
Residential Street Address		City			State	Zip Code	Е	ate Received		
11 Molly Ln		Darien			СТ	06820-2929	0	3/27/2009	9	
Principal Occupation Real Estate Developer		Name of Er JHM Gro			•	Is this contribution assoc fundraising event listed i If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor of state contractor?	or prospective	<u> </u>	Yes X No		utor a lobbyis	t, spouse, or	Aggre	egate Contribu	tions 375.00	\$375.00
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	Y	res X	No		Ψ ²		φ373.00
Last Name Cacace	First Name Michael			MI J	Cash	contribution: X Personal y Order Credit/De		Contribution	on ID#	Amount of Contribution
Residential Street Address	l	City		1	State	Zip Code	Е	ate Received		
316 Scofieldtown Rd		Stamford			СТ	06903-4012	0	3/27/2009	9	
Principal Occupation Attorney		Name of Er Cacace,	nployer Tusch & Santagata		•	Is this contribution assoc fundraising event listed i If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor of state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contribu \$3	itions 375.00	\$375.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID#	Amount of
Cacace	Maureen			R	Cash Money	x Personal y Order Credit/De		0360		Contribution
Residential Street Address		City			State	Zip Code	Б	ate Received		
316 Scofieldtown Rd		Stamford	<u> </u>		СТ	06903-4012	0	3/27/2009	9	
Principal Occupation teacher		Name of Er Stamford	nployer d Board of Education			Is this contribution assoc fundraising event listed i If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor of state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contribu \$3	itions 375.00	\$375.00
Last Name	First Name			MI	Method of	contribution:	•	Contributio	on ID#	Amount of
Emil	Arthur				Cash Money	y Order		0361		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
240 Centre St # 3N		New York	<u> </u>		NY	10013-3215	0	3/27/2009	9	
Principal Occupation Attorney		Name of Er Cohen To	nployer auber Spievack & Wa	agner PC		Is this contribution assoc fundraising event listed i If yes, list Event #		_{J1?} 🗀	Yes No	
Is contributor a principal of a state contractor of state contractor? Is yes, indicate which branch or branches of	or prospective		Yes X No		utor a lobbyis t child of a lob	bbyist?	Aggre	egate Contribu \$3	tions 375.00	\$375.00
government the contract is with:	Ш	Executive	Legislative		ιτ ς Δ	INO				

		I. MONETARY R	ECEIPT	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009
		B. Itemized Contribu	itions fron	n Individu	ıals			
Last Name Geraghty	First Name Barbara		MI	Cash	contribution: X Personal Cl y Order	neck 0362	oution ID#	Amount of Contribution
Residential Street Address 97 Richards Ave Apt E4		City Norwalk		State CT	Zip Code 06854-1646	Date Recei 03/27/2		
Principal Occupation none		Name of Employer none		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	depender	butor a lobbyis at child of a lob Yes	byist?	Aggregate Con	tributions \$15.00	\$15.00
Last Name Lee	First Name Johnnie		MI	Cash	contribution: X Personal Cl y Order Credit/Deb	neck 0364	oution ID#	Amount of Contribution
Residential Street Address 30 Raymond Ln		City Wilton		State CT	Zip Code 06897-3527	Date Recei 03/27/2		
Principal Occupation Physician/Director of Health		Name of Employer City of Stamford			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	depender	butor a lobbyis at child of a lob Yes	byist?	Aggregate Con	tributions \$100.00	\$100.00
Last Name Beinfield	First Name Bruce		MI	Cash	contribution: X Personal Cl y Order Credit/Deb	neck 0365	oution ID #	Amount of Contribution
Residential Street Address 1 Marshall St Ste 202		City Norwalk		State CT	Zip Code 06854-2262	Date Recei		
Principal Occupation architect		Name of Employer Beinfield Architects			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	depender	butor a lobbyis at child of a lob Yes	byist?	Aggregate Con	tributions \$50.00	\$50.00
Last Name Leydon	First Name John		MI F	Cash	contribution: X Personal Cl y Order Credit/Deb	neck 0366	oution ID#	Amount of Contribution
Residential Street Address 222 Roxbury Rd		City Stamford		State CT	Zip Code 06902-1222	Date Recei		
Principal Occupation Attorney		Name of Employer Brennan & Leydon - Stamf	ord	•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	depender	butor a lobbyis at child of a lob	byist?	Aggregate Con	\$375.00	\$375.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FII	LING DUE DATE
Dan Malloy For Connecticut (C	T)						Ori	iginal 04/13/2009
		B. Itemized Contributi	ons fron	Individu	ıals			
Last Name	First Name		MI	Method of	contribution:	С	Contribution ID	# Amount of
Berg	Bruce			Cash Money	x Personal Ch y Order Credit/Debi	0)367	Contribution
Residential Street Address		City		State	Zip Code		Received	
1 Hitching Post Ln		Chappaqua		NY	10514-1206	03/2	27/2009	
Principal Occupation real estate		Name of Employer Fuller Development			Is this contribution associated fundraising event listed in the state of the state		Yes X No	
Is contributor a principal of a state contractorstate contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate	e Contributions \$375.0	\$375.00
Last Name Slaney	First Name Paul		MI	Cash	contribution: X Personal Cl y Order Credit/Debi	neck 0	Contribution ID	# Amount of Contribution
Residential Street Address 11 Fern St		City Floral Park	1	State NY	Zip Code 11001-3207		Received 27/2009	
Principal Occupation COO		Name of Employer George A. Fuller Company			Is this contribution associal fundraising event listed in S If yes, list Event #		Yes	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate	e Contributions \$375.0	\$375.00
Last Name Apicella	First Name Joseph		MI V	Cash	contribution: X Personal Characteristics y Order Credit/Debi	neck 0	Contribution ID :	# Amount of Contribution
Residential Street Address 1 Renaissance Sq Unit 23F		City White Plains		State NY	Zip Code 10601-3005		Received 27/2009	
Principal Occupation real estate developer		Name of Employer Jen Jess Corp.			Is this contribution associal fundraising event listed in S If yes, list Event #		Yes	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate	e Contributions \$375.0	\$375.00
Last Name Palazzo	First Name Peter		MI	Cash	contribution: X Personal Character Credit/Debi	neck 0	Contribution ID	# Amount of Contribution
Residential Street Address 3849 Briarhill St		City Mohegan Lake		State NY	Zip Code 10547-1004		Received 27/2009	
Principal Occupation construction management		Name of Employer George A. Fuller Company			Is this contribution associate fundraising event listed in the state of the state o		Yes	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate	e Contributions \$375.0	\$375.00

		I. N	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	CT)								Origin	al 04/13/2009
		B. It	emized Contributi	ons fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Wiederlight	Ronnie				Cash Money	y Order Personal C		0291		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
94 Berrian Rd		Stamford	<u> </u>		СТ	06905-2413	0	3/27/2009	9	_
Principal Occupation		Name of E	mployer			Is this contribution associ		1^	Yes	
business owner		The Insu	ırance Exchange Inc.			fundraising event listed ir If yes, list Event # 03.	292009		No	
Is contributor a principal of a state contractor	or prospective		Yes X No		outor a lobbyis	-	Aggre	egate Contribu	itions	
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative	1 ⁻	t child of a lob	•		\$	\$50.00	\$50.00
government the contract is with: Last Name	First Name		Degisianve	I MI		contribution:	<u> </u>	Contribution		1
Stevenson	Constance	9		J	Cash	x Personal C	Check	0293	on ID#	Amount of Contribution
					Money	y Order Credit/Del	bit Card	0293		
Residential Street Address		City			State	Zip Code		ate Received		
482 Pepper Ridge Rd		Stamford			СТ	06905-2418	0	3/27/2009	9	<u> </u>
Principal Occupation		Name of Er				Is this contribution associ fundraising event listed in		1^	Yes	
Assistant Principal		Stamfor	d Board of Education			If yes, list Event # 03.			No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribu	itions \$50.00	\$50.00
government the contract is with:		Executive	Legislative	 				1		1
Last Name Longo	First Name Diane			MI	Method of Cash	contribution:	Check	Contribution	on ID #	Amount of Contribution
					_	y Order Credit/Del	bit Card	0294		Commodulon
Residential Street Address		City			State	Zip Code	D	ate Received		
59 Mill Spring Ln		Stamford			СТ	06903-1635	0	3/27/2009	9	1
Principal Occupation		Name of E	mployer			Is this contribution associ		1^	Yes	
filmmaker		self				fundraising event listed in If yes, list Event # 03.			No	
Is contributor a principal of a state contractor	or prospective	1	Yes X No	Is contrib	outor a lobbyis	t spouse or	Aggra	egate Contribu	utions	†
state contractor? Is yes, indicate which branch or branches of	_				t child of a lob	byist?	Aggie	-	\$50.00	\$50.00
government the contract is with:	Ш	Executive	Legislative	L 1	Yes X	No				
Last Name	First Name			MI		contribution:		Contribution	on ID #	Amount of
Heckerling	Eileen				Cash Money	y Order Personal C		0296		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
111 Jeanne Ct		Stamford	<u> </u>		СТ	06903-5133	0	3/27/2009	9	
Principal Occupation		Name of Er	mployer			Is this contribution associ fundraising event listed in		1^	Yes	
Retired		None				If yes, list Event # 03			No	
Is contributor a principal of a state contractor	or prospective	1	Yes X No	Is contrib	outor a lobbyis	t, spouse, or	Aggre	egate Contribu	ıtions	İ
state contractor? Is yes, indicate which branch or branches of				1 -	t child of a lob	•		-	150.00	\$150.00
government the contract is with:	Ц	Executive	Legislative	L '	Yes X	No				

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 04/13/2009
		B. It	emized Contributi	ons from	Individu	uals				
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Fazio	Victor				Cash Mone	y Order X Personal C		0297		Contribution
Residential Street Address	•	City			State	Zip Code	D	ate Received	1	
65 George St		Stamford	i		СТ	06902-6211	0	3/27/200	9	
Principal Occupation		Name of E	mployer			Is this contribution associ fundraising event listed in		1.	Yes	
retired		none				1 "	292009		No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis	, I ,	Aggre	egate Contrib	utions	ĺ
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	1 —	child of a lot	-		:	\$50.00	\$50.00
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Argenio	Eileen				Cash Mone	y Order Registration X Personal C		0299		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received	1	
76 Palmer St		Stamford	1		СТ	06907-2034	0	3/27/200	9	
Principal Occupation		Name of E	mployer			Is this contribution associ fundraising event listed in		J1?	Yes	
none		none				1	292009		No	
Is contributor a principal of a state contractor	or prospective	•	Yes X No		utor a lobbyis	-	Aggre	egate Contrib	utions	İ
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	1 —	child of a lot es	No		:	\$50.00	\$50.00
Last Name	First Name			MI	Method of	contribution:	<u> </u>	Contributi	on ID#	Amount of
Doreste	Emmanue	el		W	Cash Mone	y Order X Personal C		0298		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
46 Taylor St Apt 101		Stamford	İ		СТ	06902-5751		3/27/200	_	
Principal Occupation Library Clerk		Name of E	^{mployer} n Library			Is this contribution associ fundraising event listed in	Section .	_{J1?} _	_	
						If yes, list Event # 03	292009	<u>B</u> L	No	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis child of a lob		Aggre	egate Contrib		+50.00
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	Y	res x	No		\$	100.00	\$50.00
Last Name	First Name			MI		contribution:		Contributi	on ID#	Amount of
Jaffe	Marc				Cash Mone	y Order X Credit/De		0336		Contribution
Residential Street Address	•	City		•	State	Zip Code	D	ate Received	Į.	
5 Roosevelt Ave		Old Gree	nwich		СТ	06870-1810	0	3/27/200	9	
Principal Occupation		Name of E				Is this contribution associ fundraising event listed in		J1?		
publishing executive		FIXFUSIO				If yes, list Event #			No No	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis	-	Aggre	egate Contrib	utions	
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		res x	-		\$	100.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILING	G DUE DATE		
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009		
		B. Itemized Contribut	ions fron	ı Individu	ıals					
Last Name Alexander	First Name Moses		MI T	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 033	ribution ID #	Amount of Contribution		
Residential Street Address 61 Ryders Ln		City Wilton		State CT	Zip Code 06897-1722	Date Rec 03/27/				
Principal Occupation Real Estate		Name of Employer Spinnaker Companies			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Co	\$375.00	\$375.00		
Last Name Kettle	First Name Bernie		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 033	ribution ID #	Amount of Contribution		
Residential Street Address 241 Bridge St		City Stamford		State CT	Zip Code 06905-4449	Date Rec 03/27/				
Principal Occupation IT Consultant		Name of Employer Self employed			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Co	entributions \$25.00	\$25.00		
Last Name Deegan	First Name Thomas		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 034	ribution ID #	Amount of Contribution		
Residential Street Address 170 Ocean Dr W		City Stamford		State CT	Zip Code 06902-8028	Date Rec 03/27/				
Principal Occupation Finance		Name of Employer Self		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Co	shaributions \$375.00	\$375.00		
Last Name Lasko	First Name William		MI J	Cash	contribution: X Personal Cl y Order Credit/Deb	heck 029	ribution ID #	Amount of Contribution		
Residential Street Address 40 Four Brooks Rd		City Stamford		State CT	Zip Code 06903-4615	Date Rec 03/27/				
Principal Occupation attorney		Name of Employer NYC		•	Is this contribution associa fundraising event listed in If yes, list Event # 032	Section J1?	X Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Co	sntributions \$150.00	\$50.00		

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE FILING I										
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009		
		B. Itemized Contribut	tions fron	ı Individu	ıals					
Last Name Wade	First Name Julia		MI	Cash	contribution: X Personal Cl y Order Credit/Deb	heck 0292	ution ID#	Amount of Contribution		
Residential Street Address 15 Old Long Ridge Rd		City Stamford		State CT	Zip Code 06903-1620	Date Receiv 03/27/20				
Principal Occupation Program Manager		Name of Employer Stamford Partnership			Is this contribution associa fundraising event listed in If yes, list Event # 032		X Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	utor a lobbyis child of a lob Yes	byist?	Aggregate Conti	stibutions \$25.00	\$25.00		
Last Name Goldblum	First Name Marilyn		MI F	Cash	contribution: X Personal Cl y Order Credit/Deb	heck 0492	ution ID#	Amount of Contribution		
Residential Street Address 76 N Lake Dr		City Stamford		State CT	Zip Code 06903-1012	Date Receiv 03/28/20				
Principal Occupation Housewife		Name of Employer None		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Conti	ributions \$375.00	\$375.00		
Last Name Cingari	First Name Catherine	·	MI V	Cash	contribution: X Personal Cl	heck 0307	ution ID#	Amount of Contribution		
Residential Street Address 2236 Shippan Ave		City Stamford		State CT	Zip Code 06902-8210	Date Receiv 03/28/20				
Principal Occupation Housewife		Name of Employer None		•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	outor a lobbyis t child of a lob Yes X	byist?	Aggregate Conti	ributions \$375.00	\$375.00		
Last Name Charters	First Name John		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 0335	ution ID #	Amount of Contribution		
Residential Street Address 421 W Preston St		City Hartford		State CT	Zip Code 06114-2246	Date Receiv 03/28/20				
Principal Occupation Realtor		Name of Employer self-employed			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	utor a lobbyis child of a lob	byist?	Aggregate Conti	ributions \$50.00	\$50.00		

I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTEE							FILIN	G DUE DATE	
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009	
		B. Itemized Contribut	ions from	Individu	ıals				
Last Name Cingari	First Name Thomas		MI	Cash	contribution: X Personal Cl	neck 0300	oution ID#	Amount of Contribution	
Residential Street Address 197 Stamford Ave		City Stamford		State CT	Zip Code 06902-8013	Date Receive 03/28/20			
Principal Occupation supermarket operator		Name of Employer Grade A Market Inc.			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Cont	ributions \$375.00	\$375.00	
Last Name Cingari	First Name Suzanne		MI	Cash	contribution: X Personal Cl / Order Credit/Deb	neck 0301	oution ID#	Amount of Contribution	
Residential Street Address 197 Stamford Ave		City Stamford		State CT	Zip Code 06902-8013	Date Received 03/28/20			
Principal Occupation Real Estate Agent		Name of Employer William Pitt Sotheby's		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Cont	ributions \$375.00	\$375.00	
Last Name Goldberg	First Name Rachel		MI	Cash	contribution: X Personal Cl y Order Credit/Deb	neck 0302	oution ID#	Amount of Contribution	
Residential Street Address 123 Harbor Dr Apt 201		City Stamford		State CT	Zip Code 06902-7460	Date Receiv			
Principal Occupation Attorney		Name of Employer Urban Redevelopment Comn	nission		Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Cont	ributions \$375.00	\$375.00	
Last Name Grossman	First Name Richard		MI A	Cash	contribution: X Personal Cl	neck 0303	oution ID#	Amount of Contribution	
Residential Street Address 11 Sherwood Ave		City Greenwich		State CT	Zip Code 06831-3213	Date Receive 03/28/20			
Principal Occupation builder		Name of Employer Gibraltar Management Co.			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Cont	ributions \$375.00	\$375.00	

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE							FI	ILING	DUE DATE
Dan Malloy For Connecticut (C	T)						О	rigina	1 04/13/2009
		B. Itemized Contributi	ons fron	ı Individu	ıals		•		
Last Name	First Name		MI		contribution:		Contribution IE	D#	Amount of
Bruno	Theresa	<u></u>		Cash Money	y Order Personal Ch Credit/Debi	10	0304		Contribution
Residential Street Address 336 Sprain Rd		City Scarsdale		State NY	Zip Code 10583-1232		Received 28/2009		
Principal Occupation		Name of Employer		I IVI	Is this contribution associat	<u> </u>	<u> </u>		
homemaker		retired			fundraising event listed in S If yes, list Event #		X No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate	e Contributions		\$350.00
Last Name	First Name Richard		MI	Method of Cash	contribution:		Contribution IE	D#	Amount of
Bruno	Richard			_	y Order Credit/Debi		0305		Contribution
Residential Street Address 336 Sprain Rd		City Scarsdale		State NY	Zip Code 10583-1232		Received 28/2009		
Principal Occupation firefighter		Name of Employer fire dept.		•	Is this contribution associat fundraising event listed in S If yes, list Event #		X No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate	te Contributions		\$350.00
Last Name Bruno	First Name Marti		MI	Cash	contribution: X Personal Ch y Order Credit/Debi	neck C	Contribution ID	D#	Amount of Contribution
Residential Street Address 9 Windermere Close		City Hampton Bays	•	State NY	Zip Code 11946-3241		Received 28/2009		
Principal Occupation bookeeper		Name of Employer Westchester Hospital			Is this contribution associat fundraising event listed in S If yes, list Event #		X No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate	e Contributions		\$350.00
Last Name Tsiralidis	First Name Thomas		MI	Cash	contribution: X Personal Character Credit/Debi	neck C	Contribution IE	O #	Amount of Contribution
Residential Street Address 5 Derry St		City Stamford		State CT	Zip Code 06905-1107		Received 28/2009		
Principal Occupation owner		Name of Employer Italian Corner Deli		!	Is this contribution associat fundraising event listed in S If yes, list Event #		X No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate	te Contributions		\$375.00

		I. M	IONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (CT	Γ)								Origina	al 04/13/2009
		B. It	emized Contributi	ions from	Individu	ıals		•		
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Dinino	Ennio				Cash Money	y Order X Personal C		0310		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
170 Saint Charles Ave		Stamford			СТ	06907-2405	0	3/28/2009)	
Principal Occupation Electrician		Name of En	nployer		•	Is this contribution associ fundraising event listed in If yes, list Event #		_{11?}	Yes No	,
				1			1			
Is contributor a principal of a state contractor o state contractor? Is yes, indicate which branch or branches of government the contract is with:	r prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	gate Contribut \$3	75.00	\$375.00
Last Name	First Name			MI	1	contribution:		Contributio	n ID#	A
Chiappetta	Domenic				Cash Money	y Order Personal C		0311	п по #	Amount of Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
14 Suburban Dr		Norwalk			СТ	06851-1612	0	3/28/2009)	
Principal Occupation		Name of Er				Is this contribution associ fundraising event listed in			Yes	
electrical		self emp	loyed			If yes, list Event #		х	No	
Is contributor a principal of a state contractor o state contractor? Is yes, indicate which branch or branches of government the contract is with:	r prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribut \$3	tions 75.00	\$375.00
Last Name	First Name			MI	Method of	contribution:	•	Contributio	n ID#	Amount of
Dinino	Benito				Cash Money	y Order Personal C		0312		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
85 Euclid Ave		Stamford			СТ	06902-6230		3/28/2009	_	
Principal Occupation Retired		Name of En	mployer			Is this contribution associ fundraising event listed in		_{11?}	Yes	
Retired		None				If yes, list Event #		х	No	
Is contributor a principal of a state contractor o state contractor? Is yes, indicate which branch or branches of	r prospective		Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribut \$3	tions 75.00	\$375.00
government the contract is with:		Executive	Legislative	+ -	res x		<u> </u>	1		
Last Name Fink	First Name Jesse			MI M	Cash	contribution: X Personal C y Order Credit/De		Contribution 0309	n ID#	Amount of Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
51 Graenest Ridge Rd		Wilton			СТ	06897-2929	0	3/28/2009)	
Principal Occupation		Name of En	mployer		•	Is this contribution associ			Yes	
private investment		self				fundraising event listed in If yes, list Event #	Section .	x x	No	
Is contributor a principal of a state contractor o	r prospective		Yes X No		utor a lobbyis	-	Aggre	gate Contribut	tions	
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative	dependent	child of a lob	-		\$3	50.00	\$350.00
government the contract is with:							1			1

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE FILING I										
Dan Malloy For Connecticut (C	T)								Origina	al 04/13/2009
		B. Iten	nized Contributio	ons from	Individu	ıals				
Last Name Spencer	First Name Miles			MI	Cash	contribution: Personal y Order X Credit/De		Contributi 0346	on ID#	Amount of Contribution
Residential Street Address 33 N Water St		City Norwalk			State CT	Zip Code 06854-2282		Date Received		
Principal Occupation Angel investor, Entrepreneur		Name of Empl Vaux les V	loyer 'entures, LLC			Is this contribution assoc fundraising event listed i If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggre	egate Contribi	ations 375.00	\$375.00
Last Name Ross	First Name James			MI H	Cash	contribution: Personal y Order X Credit/De		Contributi 0347	on ID#	Amount of Contribution
Residential Street Address 6 Chatham Trace Cir		City Wilbraham			State MA	Zip Code 01095-2623		ate Received		
Principal Occupation Self-Employed		Name of Empl	loyer			Is this contribution assoc fundraising event listed i If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	-	Yes X No Legislative	dependent	utor a lobbyis child of a lob es	bbyist?	Aggre	egate Contrib	utions 375.00	\$375.00
Last Name Gordon	First Name Carol			MI	Cash	contribution: Personal of the property of the		Contributi 0344	on ID#	Amount of Contribution
Residential Street Address 42 Randi Dr		City Madison			State CT	Zip Code 06443-2440	1	Pate Received		
Principal Occupation Optometrist		Name of Empl Village Opt	•			Is this contribution assoc fundraising event listed i If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contribi \$:	ations 375.00	\$375.00
Last Name Gordon	First Name Michael			MI B	Cash	contribution: Personal y Order X Credit/De		Contributi 0345	on ID#	Amount of Contribution
Residential Street Address 42 Randi Dr		City Madison			State CT	Zip Code 06443-2440	1	ate Received		
Principal Occupation Real Estate Broker		Name of Empl Cushman &	loyer & Wakefield			Is this contribution assoc fundraising event listed i If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggre	egate Contribi	ations 375.00	\$375.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE FILING I										
Dan Malloy For Connecticut (C	T)								Origin	al 04/13/2009
		B. Ite	emized Contribution	ons from	Individ	ıals				
Last Name Walton	First Name Garland			MI	Cash	contribution: Personal (y Order X Credit/De		Contribution 0337	on ID#	Amount of Contribution
Residential Street Address 42 Blaine St # 3		City Fairfield			State CT	Zip Code 06824-5855		Pate Received		
Principal Occupation chief of staff		Name of Em domus	nployer			Is this contribution assoc fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contribu	utions 375.00	\$375.00
Last Name Parson	First Name Harry			MI L	Cash	contribution: X Personal of the description of the		Contribution 0323	on ID#	Amount of Contribution
Residential Street Address 29 Trailing Rock Rd		City Stamford			State CT	Zip Code 06903-2021		ate Received		
Principal Occupation reitred		Name of Em none	nployer			Is this contribution assoc fundraising event listed in If yes, list Event # 03	n Section .	_{J1?}	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob Yes		Aggre	egate Contribu	utions \$50.00	\$50.00
Last Name Jepsen	First Name Charles			MI	Cash	contribution: X Personal (y Order Credit/De		Contribution 0324	on ID#	Amount of Contribution
Residential Street Address 252 Ocean Dr E		City Stamford			State CT	Zip Code 06902-8238	1	Pate Received		
Principal Occupation producer		Name of Em	nployer		•	Is this contribution assoc fundraising event listed in If yes, list Event # 03	n Section .		Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob res		Aggre	egate Contribu	utions 125.00	\$125.00
Last Name Heaphy	First Name Eileen			MI M	Cash	contribution: X Personal of the property of t		Contribution 0325	on ID#	Amount of Contribution
Residential Street Address 247 Hamilton Ave Apt 4		City Stamford			State CT	Zip Code 06902-3484	1	ate Received		
Principal Occupation retired		Name of Em	nployer		•	Is this contribution assoc fundraising event listed in If yes, list Event # 03	n Section .	_{J1?}	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob es	bbyist?	Aggre	egate Contribu	utions \$50.00	\$50.00

		I. MONETARY R	ECEIPT	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origin	nal 04/13/2009
		B. Itemized Contribu	tions fron	n Individu	ıals			
Last Name Rauh	First Name Pauline		MI S	Cash	contribution: X Personal Contribution: y Order Credit/Deb	heck 03	ntribution ID #	Amount of Contribution
Residential Street Address 143 Hoyt St Apt 3J		City Stamford		State CT	Zip Code 06905-5748	Date Re 03/30	eceived 0/2009	
Principal Occupation Retired		Name of Employer None		•	Is this contribution associa fundraising event listed in If yes, list Event # 032		X Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	butor a lobbyis at child of a lob Yes	byist?	Aggregate C	Contributions \$200.00	\$200.00
Last Name Fishman	First Name Judith		MI D	Cash	contribution: X Personal Contribution: y Order Credit/Deb	heck 03	ntribution ID #	Amount of Contribution
Residential Street Address 128 Rolling Wood Dr		City Stamford		State CT	Zip Code 06905-2328	Date Re 03/30	eceived 0/2009	
Principal Occupation retired		Name of Employer none			Is this contribution associa fundraising event listed in If yes, list Event # 032		X Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	butor a lobbyis at child of a lob Yes	byist?	Aggregate C	Contributions \$100.00	\$100.00
Last Name Hill	First Name Duane		MI E	Cash	contribution: X Personal C	heck 03	ntribution ID#	Amount of Contribution
Residential Street Address 108 N Lake Dr		City Stamford		State CT	Zip Code 06903-1010	Date Re 03/30	eceived 0/2009	
Principal Occupation investor		Name of Employer TSG Ventures LP			Is this contribution associa fundraising event listed in If yes, list Event # 032	Section J1?	X Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	butor a lobbyis at child of a lob Yes	byist?	Aggregate C	Contributions \$200.00	\$200.00
Last Name Rothman	First Name Saul		MI A	Cash	contribution: X Personal Contribution: y Order Credit/Deb	heck 03	ntribution ID#	Amount of Contribution
Residential Street Address 2437 Bedford St Unit D2		City Stamford		State CT	Zip Code 06905-3916	Date Re 03/30	eceived 0/2009	
Principal Occupation Attorney		Name of Employer Self		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	butor a lobbyis at child of a lob Yes	byist?	Aggregate C	Contributions \$375.00	\$375.00

		I. MONETARY R	ECEIPTS	S (Sectio	n A-I)		_		
NAME OF COMMITTEE							I	FILING	DUE DATE
Dan Malloy For Connecticut (C	T)						(Origina	al 04/13/2009
		B. Itemized Contribu	tions fron	ı Individu	ıals				
Last Name	First Name		MI	Method of	contribution:	I	Contribution I	ID#	Amount of
Baron	Steven		J	Cash Money	y Order X Personal Cl Credit/Deb		0332		Contribution
Residential Street Address		City		State	Zip Code	Dat	te Received		
27 Burnham Hl		Westport		СТ	06880-6607	03	/30/2009		·
Principal Occupation		Name of Employer			Is this contribution associa fundraising event listed in		;	Yes	
Attorney		self	_		If yes, list Event #		X 1	No	
Is contributor a principal of a state contractor state contractor?	or prospective	Yes X No		outor a lobbyis	-	Aggrega	ate Contributio	ns	
Is yes, indicate which branch or branches of government the contract is with:		Executive Legislative		t child of a lob Yes	-		\$375	5.00	\$375.00
Last Name	First Name		MI	Method of	contribution:		Contribution I	ID#	Amount of
Bello	Robert		S	Cash Money	y Order X Personal Cl Credit/Deb		0333		Contribution
Residential Street Address		City		State	Zip Code	Dat	te Received		
148 Turner Rd		Stamford		СТ	06905-3603	03	/30/2009		•
Principal Occupation		Name of Employer			Is this contribution associa fundraising event listed in			Yes	
Attorney		Bello Lapine Cassone			If yes, list Event #		x 1	No	
Is contributor a principal of a state contractor	or prospective	Yes X No	Is contrib	outor a lobbyis	t, spouse, or	Aggrega	ate Contributio	ns	
state contractor? Is yes, indicate which branch or branches of			_ `──	t child of a lob Yes	•		\$375	5.00	\$375.00
government the contract is with:		Executive Legislative	+						
Last Name Cassone	First Name Thomas		MI	Method of Cash	contribution:	heck	Contribution I	ID#	Amount of Contribution
Cassone	momas				y Order Credit/Deb		0334		Contribution
Residential Street Address		City		State	Zip Code		te Received		
166 Hubbard Ave		Stamford		СТ	06905-4813	03	/30/2009		1
Principal Occupation		Name of Employer			Is this contribution associa fundraising event listed in		⁷	Yes	
attorney		City of Stamford/self			If yes, list Event #		x 1	No	
Is contributor a principal of a state contractor	or prospective	Yes X No		outor a lobbyis	-	Aggrega	ate Contributio	ns	
state contractor? Is yes, indicate which branch or branches of		Executive Legislative		t child of a lob Tes	•		\$375	5.00	\$375.00
government the contract is with:	<u></u>	Executive Legislative	+ -			<u> </u>			
Last Name Fox	First Name Ruth		MI	Method of Cash	contribution: X Personal Cl	heck	Contribution I	ID#	Amount of Contribution
					y Order Credit/Deb	it Card	0315		Commount
Residential Street Address		City		State	Zip Code		te Received		
637 Cove Rd		Stamford		СТ	06902-5443		/30/2009		'
Principal Occupation		Name of Employer			Is this contribution associa fundraising event listed in		1^1	Yes	
liquidity analyst		K2 Advisors			If yes, list Event # 032		11.	No	
Is contributor a principal of a state contractor	or prospective	Yes X No		outor a lobbyis		Aggrega	ate Contributio	ns	
Is yes, indicate which branch or branches of		Executive Legislative		t child of a lob Tes	-		\$25	5.00	\$25.00

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origin	nal 04/13/2009
		B. Itemized Contributi	ions from	ı Individu	ıals			
Last Name Shapiro	First Name James		MI	Cash	contribution: X Personal Cl y Order Credit/Debi	heck 03:	ntribution ID #	Amount of Contribution
Residential Street Address 93 East Ln		City Stamford	1	State CT	Zip Code 06905-3947	Date Re-		-
Principal Occupation legislator		Name of Employer State of Connecticut		•	Is this contribution associa fundraising event listed in If yes, list Event # 032		X Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate C	Contributions \$100.00	\$100.00
Last Name Fox	First Name Virginia		MI L	Cash	contribution: X Personal Cl y Order Credit/Debi	heck 03	ntribution ID#	Amount of Contribution
Residential Street Address 165 Van Rensselaer Ave		City Stamford		State CT	Zip Code 06902-8211	Date Re-		
Principal Occupation case worker		Name of Employer Rep. Jim Himes		•	Is this contribution associa fundraising event listed in If yes, list Event # 032		X Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate C	Contributions \$50.00	\$50.00
Last Name Sherwood	First Name Jami		MI	Cash	contribution: X Personal Cl y Order Credit/Debi	heck 03:	ntribution ID #	Amount of Contribution
Residential Street Address 48 Putter Dr		City Stamford		State CT	Zip Code 06907-1238	Date Re-		
Principal Occupation graphic designer		Name of Employer self			Is this contribution associa fundraising event listed in If yes, list Event # 032		X Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob res	bbyist?	Aggregate C	Contributions \$25.00	\$25.00
Last Name Martin	First Name David		MI R	Cash	contribution: X Personal Cl y Order Credit/Debi	heck 03:	ntribution ID #	Amount of Contribution
Residential Street Address 2121 Long Ridge Rd		City Stamford		State CT	Zip Code 06903-2105	Date Re-		
Principal Occupation consultant		Name of Employer Michael Allen Company			Is this contribution associa fundraising event listed in If yes, list Event # 032	Section J1?	X Yes	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	outor a lobbyis t child of a lob	byist?	Aggregate C	Contributions \$100.00	\$100.00

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 04/13/2009
		B. It	emized Contributi	ions fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID#	Amount of
Vitti	Rina				Cash Money	y Order X Personal C		0320		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
65 Dulan Dr		Stamford	I		СТ	06903-1631	0	3/30/2009)	
Principal Occupation none		Name of Er none	nployer		•	Is this contribution associ fundraising event listed ir If yes, list Event # 03			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contribu \$3	itions 375.00	\$375.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	
Klein	Barbara				Cash	y Order Responsible Credit/Del		0321	лг 10 #	Amount of Contribution
Residential Street Address		City		1	State	Zip Code	D	ate Received		
72 Slice Dr		Stamford	I		СТ	06907-1133	0	3/30/2009)	
Principal Occupation		Name of Er	nployer		•	Is this contribution associ		1^	Yes	
Retired		None				fundraising event listed in If yes, list Event # 03			No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribu \$1	ons.00.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID#	Amount of
Colatrella	Lynne				Cash Money	y Order Personal C		0322		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
302 Vine Rd		Stamford	I		СТ	06905-2107	0	3/30/2009)	
Principal Occupation		Name of Er	mployer			Is this contribution associ fundraising event listed in		1^	Yes	
VP		DSSD				If yes, list Event # 03			No	
Is contributor a principal of a state contractor	or prospective	·	Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	gate Contribu	tions	
state contractor? Is yes, indicate which branch or branches of				1 ~	child of a lob	•		\$	25.00	\$25.00
government the contract is with:	<u>_</u>	Executive	Legislative	+ -	res X			1		<u> </u>
Last Name Bridge	First Name Josiah			MI	Cash	contribution:		Contribution 0210	on ID #	Amount of Contribution
		T				y Order Credit/Del				
Residential Street Address 444 Bedford St Apt 2S		City Stamford	l		State CT	Zip Code 06901-1503		ate Received 3/30/2009)	
Principal Occupation		Name of Er	mployer		-	Is this contribution associ		1^	Yes	
teacher		retired				fundraising event listed in If yes, list Event # 03			No	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis child of a lob	-	Aggre	gate Contribu		#F0.00
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		res X	No		*	50.00	\$50.00

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE							F	ILING	DUE DATE
Dan Malloy For Connecticut (C	T)						О	rigina	1 04/13/2009
		B. Itemized Contribut	ions fron	ı Individu	ıals		·		
Last Name Neems	First Name Gary		MI H	Cash	contribution: X Personal Contribution: y Order Credit/Deb	heck	Contribution II	D#	Amount of Contribution
Residential Street Address 215 Brookdale Rd		City Stamford		State CT	Zip Code 06903-4118		Received 30/2009		
Principal Occupation finance		Name of Employer Callidus Capital Managemen	t	•	Is this contribution associa fundraising event listed in If yes, list Event # 032		X Y		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate	te Contribution: \$100		\$100.00
Last Name Dennies	First Name Sandra		MI L	Cash	contribution: X Personal Contribution: y Order Credit/Deb	heck	Contribution II	D#	Amount of Contribution
Residential Street Address 171 Shadow Ridge Rd		City Stamford		State CT	Zip Code 06905-1813		Received 30/2009		
Principal Occupation Director of Administration		Name of Employer City of Stamford			Is this contribution associa fundraising event listed in If yes, list Event # 032		X Yo		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate	te Contribution: \$200		\$100.00
Last Name Gallup	First Name Jon		MI	Cash	contribution: X Personal C y Order Credit/Deb	heck	Contribution II	D#	Amount of Contribution
Residential Street Address 21 Dartley St		City Stamford		State CT	Zip Code 06905		Received 30/2009		
Principal Occupation Connecticut State Marshal		Name of Employer Self		-	Is this contribution associa fundraising event listed in If yes, list Event #		X No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate	e Contribution: \$375		\$375.00
Last Name Louizos	First Name John		MI	Cash	contribution: X Personal Contribution: y Order Credit/Deb	heck	Contribution II	D#	Amount of Contribution
Residential Street Address 1867 Shippan Ave		City Stamford		State CT	Zip Code 06902-8103		Received 30/2009		
Principal Occupation Attorney		Name of Employer Curtis Brinkerhoff & Barett F	PC	•	Is this contribution associa fundraising event listed in If yes, list Event # 032	Section J1?	X Y		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate	te Contributions		\$100.00

		I. MONE	TARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 04/13/2009
		B. Itemized	Contributi	ons from	Individu	ıals				
Last Name Warner	First Name Kathleen			MI	Cash	contribution: Personal 0 y Order X Credit/De		Contribution	on ID#	Amount of Contribution
Residential Street Address 4 Belden Hill Ln		City Wilton			State CT	Zip Code 06897-2925		ate Received 3/30/2009	9	
Principal Occupation district director		Name of Employer Rep. Jim Himes			•	Is this contribution associ fundraising event listed in If yes, list Event # 03			Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Legutive Leg	gislative	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribu	tions 50.00	\$50.00
Last Name Goldblum	First Name Irving			MI	Cash	contribution: X Personal (y Order Credit/De		Contribution 0487	on ID#	Amount of Contribution
Residential Street Address 76 N Lake Dr		City Stamford			State CT	Zip Code 06903-1012		ate Received 3/30/2009		
Principal Occupation owner		Name of Employer Stamford Wreck	ing Co.			Is this contribution associ fundraising event listed in If yes, list Event #		11?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Leg	x No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu	ations 375.00	\$375.00
Last Name Greene	First Name Gary			MI	Cash	contribution: Personal of the property of the		Contribution 0398	on ID#	Amount of Contribution
Residential Street Address 161 Holmes Ave		City Darien			State CT	Zip Code 06820-3819		ate Received	9	
Principal Occupation Attorney		Name of Employer Synapse Group,	Inc.		-	Is this contribution associ fundraising event listed in If yes, list Event #		11?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Leguire	x No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribu	ntions 150.00	\$150.00
Last Name Roberts	First Name Kenneth			MI P	Cash	contribution: Personal (y Order X Credit/De		Contribution	on ID#	Amount of Contribution
Residential Street Address 2 Rockwell St		City Niantic			State CT	Zip Code 06357-3612		ate Received 3/30/2009		
Principal Occupation Project Manager		Name of Employer Self-Employed			•	Is this contribution associ fundraising event listed in If yes, list Event #		11?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Executive Leg	x No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribu	ntions 375.00	\$375.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origin	nal 04/13/2009
		B. Itemized Contribut	ions fron	Individu	ıals			
Last Name Roberts	First Name Heather		MI C	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 040	ribution ID #	Amount of Contribution
Residential Street Address 2 Rockwell St		City Niantic		State CT	Zip Code 06357-3612	Date Rec 03/30/		
Principal Occupation Trainer		Name of Employer Self-employed			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Co	\$375.00	\$375.00
Last Name Thomas	First Name George		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 040	ribution ID #	Amount of Contribution
Residential Street Address 58 Woodchuck Ln		City Ridgefield		State CT	Zip Code 06877-5727	Date Rec 03/30/		
Principal Occupation Attorney		Name of Employer Vertrue Incorporated			Is this contribution associa fundraising event listed in If yes, list Event # 033		X Yes	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Co	stributions \$350.00	\$350.00
Last Name Hill	First Name Janet		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 040	ribution ID #	Amount of Contribution
Residential Street Address 67 Shearer Rd		City Washington		State CT	Zip Code 06793-1011	Date Rec 03/30/		
Principal Occupation Land Use Coordinator		Name of Employer Town of Washington			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Co	\$25.00	\$25.00
Last Name Ginott	First Name Ronni		MI	Cash	contribution: Personal Cl y Order x Credit/Debi	neck 040	ribution ID # 05	Amount of Contribution
Residential Street Address 650 Lake Ave		City Greenwich		State CT	Zip Code 06830-3854	Date Rec 03/30/		
Principal Occupation CEO		Name of Employer Rayburn Music		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Co	system on on tributions \$375.00	\$375.00

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009
		B. Itemized Contribut	ions fron	ı Individu	ıals		•	
Last Name	First Name		MI	Method of Cash	contribution:		ribution ID#	Amount of
Bronin	Andrew	1			y Order X Credit/Debi	035	3	Contribution
Residential Street Address 11 Windabout Dr		City Greenwich		State CT	Zip Code 06831-3702	Date Rec 03/30/		
Principal Occupation physician/dermatologist		Name of Employer self		•	Is this contribution associa fundraising event listed in If yes, list Event # 032		X Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Co	stributions \$375.00	\$375.00
Last Name Kurtz	First Name Brian		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 040	ribution ID #	Amount of Contribution
Residential Street Address 281 Tresser Blvd		City Stamford		State CT	Zip Code 06901-3284	Date Rec 03/30/		
Principal Occupation Direct Marketing		Name of Employer Boardroom Inc.		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Co	stributions \$375.00	\$375.00
Last Name Finger	First Name William		MI R	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 040	ribution ID #	Amount of Contribution
Residential Street Address 16 Barnstable Ln		City Greenwich		State CT	Zip Code 06830-3503	Date Rec 03/30/		
Principal Occupation Real Estate		Name of Employer self-employed		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Co	shtributions \$100.00	\$100.00
Last Name Fowler	First Name Jacqueline	e	MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 040	ribution ID #	Amount of Contribution
Residential Street Address 125 Cummings Point Rd		City Stamford		State CT	Zip Code 06902	Date Rec 03/30/		
Principal Occupation Homemaker		Name of Employer n/a		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Co	shtributions \$375.00	\$375.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origin	nal 04/13/2009
		B. Itemized Contributi	ons from	ı Individu	ıals			
Last Name Lutka	First Name Robert		MI T	Cash	contribution: X Personal Cl	neck 0371	bution ID#	Amount of Contribution
Residential Street Address 202 Essex Ct		City Torrington		State CT	Zip Code 06790-2800	Date Rece 03/30/2		
Principal Occupation teacher		Name of Employer Shelton Board of Education		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Con	stributions \$100.00	\$100.00
Last Name Lutka	First Name Madonna		MI L	Cash	contribution: X Personal Cl / Order Credit/Debi	neck 0372	bution ID#	Amount of Contribution
Residential Street Address 202 Essex Ct		City Torrington		State CT	Zip Code 06790-2800	Date Rece 03/30/2		
Principal Occupation Nurse		Name of Employer VNA Northwest			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Con	stributions \$100.00	\$100.00
Last Name Fowler	First Name Clayton		MI D	Cash	contribution: Personal Cl Order X Credit/Debi	neck 0490	bution ID #	Amount of Contribution
Residential Street Address 215 Upper Shad Rd		City Pound Ridge		State NY	Zip Code 10576-2237	Date Rece 03/30/2		
Principal Occupation Chairman & CEO		Name of Employer Spinnaker Real Estate Partne	ers		Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob yes	byist?	Aggregate Con	stributions \$375.00	\$375.00
Last Name Fowler	First Name Desiree		MI M	Cash	contribution: Personal Cl / Order X Credit/Debi	neck 0491	bution ID#	Amount of Contribution
Residential Street Address 215 Upper Shad Rd		City Pound Ridge		State NY	Zip Code 10576-2237	Date Rece 03/30/2		
Principal Occupation Real Estate Valuations and Financial Analyst		Name of Employer GEMSA LS / GE Real Estate			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Con	stributions \$375.00	\$375.00

		I. MONETARY RI	ECEIPTS	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009
		B. Itemized Contribut	tions fron	ı Individu	ıals			
Last Name Wilderman	First Name Brett		MI M	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 04	ntribution ID#	Amount of Contribution
Residential Street Address 39 Nutmeg Ln		City New Canaan		State CT	Zip Code 06840-4230	Date Re 03/30	eceived 0/2009	
Principal Occupation Real Estate		Name of Employer Forstone Capital			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate (Contributions \$250.00	\$250.00
Last Name Greeff	First Name		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 04	ntribution ID #	Amount of Contribution
Residential Street Address 1056 Oenoke Rdg		City New Canaan		State CT	Zip Code 06840-2606	Date Re 03/30	eceived 0/2009	
Principal Occupation HOMEMAKER		Name of Employer N/A		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate (Contributions \$375.00	\$375.00
Last Name Stevens	First Name Laurie		MI B	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 04	ntribution ID #	Amount of Contribution
Residential Street Address 164R Skeet Club Rd		City Durham		State CT	Zip Code 06422-1009	Date Re 03/31	eceived 1/2009	
Principal Occupation retired		Name of Employer n/a		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate (Contributions \$250.00	\$250.00
Last Name Cabrera	First Name Tyler		MI J	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 04	ntribution ID#	Amount of Contribution
Residential Street Address 8 Shoreham Club Rd		City Old Greenwich		State CT	Zip Code 06870-2408	Date Re 03/31	eceived 1/2009	
Principal Occupation student		Name of Employer university of miami			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate (Contributions \$375.00	\$375.00

		I. M	ONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 04/13/2009
		B. Ite	emized Contribution	ons from	Individu	ıals				
Last Name Riker	First Name Stephen			MI	Cash	contribution: X Personal of the property of t		Contributi 0418	on ID#	Amount of Contribution
Residential Street Address 40 E 52nd St Fl 10		City New York			State NY	Zip Code 10022-5911		ate Received		
Principal Occupation Real Estate Broker		Name of Em Colliers A				Is this contribution assoc fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contribu	utions 375.00	\$375.00
Last Name Isaacs	First Name Jed			MI	Cash	contribution: X Personal of the property of t		Contributi 0419	on ID#	Amount of Contribution
Residential Street Address 2 Wallenberg Dr		City Stamford			State CT	Zip Code 06903-1000	1	ate Received		
Principal Occupation CPA/attorney		Name of Em	nployer		•	Is this contribution assoc fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob Yes	bbyist?	Aggre	gate Contrib	utions 375.00	\$375.00
Last Name Breault	First Name Joseph			MI	Cash	contribution: X Personal (y Order Credit/De		Contributi 0420	on ID#	Amount of Contribution
Residential Street Address 34 Creeping Hemlock Dr		City Norwalk			State CT	Zip Code 06851-1029	1	ate Received		
Principal Occupation property manager		Name of Em				Is this contribution assoc fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contrib	utions 375.00	\$375.00
Last Name Salvatore	First Name Claire			MI F	Cash	contribution: X Personal of the property of t		Contributi 0421	on ID#	Amount of Contribution
Residential Street Address 1135 Ponus Ridge Rd		City New Cana	aan		State CT	Zip Code 00000-6840	1	ate Received		
Principal Occupation Homemaker		Name of Em	pployer			Is this contribution assoc fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contrib	utions 375.00	\$375.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)					
NAME OF COMMITTEE							FILING	G DUE DATE		
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009		
B. Itemized Contributions from Individuals										
Last Name Salvatore	First Name Randall		MI M	Cash	contribution: X Personal Cl y Order Credit/Deb	heck 042	tribution ID #	Amount of Contribution		
Residential Street Address 1135 Ponus Ridge Rd		City New Canaan		State CT	Zip Code 06840-2332	Date Rec 03/31/				
Principal Occupation Real Estate Development		Name of Employer RMS Construction		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Co	\$375.00	\$375.00		
Last Name Salvatore	First Name Ronald		MI	Cash	contribution: X Personal Cl y Order Credit/Deb	heck 042	tribution ID#	Amount of Contribution		
Residential Street Address 42 N Meadows Ln		City Stamford		State CT	Zip Code 06903-5151	Date Rec 03/31/				
Principal Occupation Owner		Name of Employer Accurate Lock & Hardware		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Co	ontributions \$375.00	\$375.00		
Last Name Mehner	First Name Sarah		MI	Cash	contribution: X Personal Cl y Order Credit/Deb	heck 042	tribution ID #	Amount of Contribution		
Residential Street Address 12 W Rocks Rd		City Norwalk		State CT	Zip Code 06851-2929	Date Rec 03/31/				
Principal Occupation marketing		Name of Employer Connecticut Information Sec	urity	•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Co	ontributions \$100.00	\$100.00		
Last Name Major	First Name Christoph	er	MI	Cash	contribution: X Personal Cl y Order Credit/Deb	heck 042	tribution ID#	Amount of Contribution		
Residential Street Address 10 Glen Hill Ln		City Wilton		State CT	Zip Code 06897-2419	Date Rec 03/31/				
Principal Occupation Attorney		Name of Employer Robinson & Cole LLP		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor of state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Co	s375.00	\$375.00		

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009
		B. Itemized Contribut	ions fron	Individu	ıals			
Last Name Pencu	First Name Rachel		MI	Cash	contribution: X Personal Cl	heck 04	ntribution ID #	Amount of Contribution
Residential Street Address 39 Partridge Rd		City Stamford		State CT	Zip Code 06903-3633	Date Ro 03/31	eceived L/2009	
Principal Occupation Attorney		Name of Employer Cohen & Wolf			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate (Contributions \$375.00	\$375.00
Last Name Simone	First Name Julia		MI	Cash	contribution: X Personal Cl y Order Credit/Deb	heck 04	ntribution ID #	Amount of Contribution
Residential Street Address 15 Wild Duck Rd		City Stamford		State CT	Zip Code 06903-3629	Date Ro 03/31	eceived L/2009	
Principal Occupation Teacher		Name of Employer Wilton Board of Education			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate (Contributions \$375.00	\$375.00
Last Name Elbaum	First Name Steven		MI	Cash	contribution: X Personal Cl	heck 04	ntribution ID #	Amount of Contribution
Residential Street Address 51 Tudor Ln		City Trumbull		State CT	Zip Code 06611-1049	Date Ro	eceived L/2009	
Principal Occupation Attorney		Name of Employer Robinson & Cole		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate (Contributions \$375.00	\$375.00
Last Name Fiorillo	First Name Joseph		MI A	Cash	contribution: X Personal Cl y Order Credit/Deb	heck 04	ntribution ID#	Amount of Contribution
Residential Street Address 12 Hampton Rd		City Purchase		State NY	Zip Code 10577-2229	Date Re 03/31	eceived 1/2009	
Principal Occupation manager		Name of Employer City Carting			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate (Contributions \$375.00	\$375.00

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILIN	NG DUE DATE
Dan Malloy For Connecticut (C	T)						Origi	nal 04/13/2009
		B. Itemized Contribut	ions fron	ı Individu	ıals			
Last Name Kohler	First Name Mark		MI F	Cash	contribution: X Personal Ch y Order Credit/Debi	neck 04	ntribution ID#	Amount of Contribution
Residential Street Address 63 Wepawaug Rd		City Woodbridge		State CT	Zip Code 06525-2424	Date Re	eceived 1/2009	
Principal Occupation Assistant Attorney General		Name of Employer State of CT, Office of Attorno General	еу		Is this contribution associal fundraising event listed in S If yes, list Event #		Yes	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate (Contributions \$250.00	\$250.00
Last Name Mugrage	First Name Cecile		MI	Cash	contribution: X Personal Cl y Order Credit/Debi	neck 04	ntribution ID #	Amount of Contribution
Residential Street Address 491 Woodridge Ave		City Fairfield		State CT	Zip Code 06825-2554	Date Ro 03/31	eceived 1/2009	
Principal Occupation administrator		Name of Employer Seaboard		•	Is this contribution associal fundraising event listed in the second of the second second in the second sec		Yes	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate (Contributions \$375.00	\$375.00
Last Name O'Connor	First Name Jonathan		MI	Cash	contribution: X Personal Cl y Order Credit/Debi	neck 04	entribution ID #	Amount of Contribution
Residential Street Address 240 Noroton Ave		City Darien		State CT	Zip Code 06820-4221	Date Re 03/31	eceived 1/2009	
Principal Occupation leasing agent		Name of Employer Seaboard Properties			Is this contribution associal fundraising event listed in the state of		Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate (Contributions \$375.00	\$375.00
Last Name Gershenson Stephen	First Name Amy		MI	Cash	contribution: X Personal Ch y Order Credit/Debi	neck 04	ntribution ID#	Amount of Contribution
Residential Street Address 322 Summer Hill Rd		City Madison		State CT	Zip Code 06443-1805		eceived 1/2009	
Principal Occupation corporate paralegal		Name of Employer Seaboard Properties		•	Is this contribution associal fundraising event listed in the second of the second second in the second sec		Yes	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate (Contributions \$375.00	\$375.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009
		B. Itemized Contribut	ions fron	Individu	ıals		•	
Last Name Kehoe	First Name Jeanne		MI	Cash	contribution: X Personal C	heck 043	ribution ID #	Amount of Contribution
Residential Street Address 10 City Pl Apt 23A		City White Plains		State NY	Zip Code 10601-3344	Date Reco		
Principal Occupation Chief of Finances		Name of Employer Fuller Development			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Co	\$375.00	\$375.00
Last Name Bora	First Name Douglas		MI A	Cash	contribution: X Personal Contribution: y Order Credit/Deb	heck 043	ribution ID #	Amount of Contribution
Residential Street Address 38 Nearwater Ln		City Darien		State CT	Zip Code 06820-5629	Date Rec 03/31/		
Principal Occupation real estate		Name of Employer Spinnaker Real Estate			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor of state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Co	sntributions \$100.00	\$100.00
Last Name Dempsey	First Name Gregory		MI	Cash	contribution: X Personal Contribution: y Order Credit/Deb	heck 043	ribution ID #	Amount of Contribution
Residential Street Address 1748 Shippan Ave		City Stamford		State CT	Zip Code 06902-8105	Date Rec 03/31/		
Principal Occupation Accountant		Name of Employer Ernst & Young		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Co	sntributions \$150.00	\$150.00
Last Name Grunberger	First Name James		MI M	Cash	contribution: X Personal City Order Credit/Deb	heck 043	ribution ID#	Amount of Contribution
Residential Street Address 79 High Ridge Rd		City Stamford		State CT	Zip Code 06905-3800	Date Rec 03/31/		
Principal Occupation property management		Name of Employer self			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor of state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Co	system \$375.00	\$375.00

		I. MO	NETARY REC	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 04/13/2009
		B. Item	ized Contributio	ons from	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Zullo	Frank				Cash Money	y Order X Personal C		0439		Contribution
Residential Street Address	•	City		•	State	Zip Code	Е	ate Received	l	
24 Sawmill Rd		Norwalk			СТ	06851-3807	0	3/31/200	9	
Principal Occupation		Name of Emplo	oyer			Is this contribution associ fundraising event listed in		J1?		
Attorney		NOI Walk		_		If yes, list Event#		<u> </u>	No	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis		Aggre	egate Contrib	utions	
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	I —	es x	-		\$	100.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Usman	Akhter				Cash Mone	y Order Responsible Credit/De		0440		Contribution
Residential Street Address		City			State	Zip Code	Б	ate Received	I	
77 Judy Ln		Stamford			СТ	06906-2102	0	3/31/200	9	
Principal Occupation		Name of Emplo				Is this contribution associ fundraising event listed in		J1?		
Financial Services		Self Employ	/ea			If yes, list Event #		<u> </u>	No	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis	-	Aggre	egate Contrib	utions	ĺ
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	1 —	child of a lob	-		:	\$50.00	\$50.00
Last Name	First Name			MI	Method of	contribution:	<u>'</u>	Contributi	on ID#	Amount of
Breault	Lucia				Cash Money	y Order Personal C		0441		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
184 Ponus Ave		Norwalk			СТ	06850-1838		3/31/200	9	ļ
Principal Occupation none		Name of Emplo	oyer			Is this contribution associ fundraising event listed in		J1?		
						If yes, list Event #			No No	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis child of a lob		Aggre	egate Contrib		+275.00
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		es x			\$.	375.00	\$375.00
Last Name	First Name			MI		contribution:	~1 1	Contributi	on ID#	Amount of
Discala	John				Cash Money	y Order X Personal C		0442		Contribution
Residential Street Address		City		•	State	Zip Code	Е	ate Received	l	
15 Creeping Hemlock Dr		Norwalk			СТ	06851-1014	0	3/31/200	9	
Principal Occupation		Name of Emplo				Is this contribution associ fundraising event listed in		J1?		
Property Manager		Sedona Gro				If yes, list Event #			No No	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis	-	Aggre	egate Contrib	utions	
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	1 —	res x	-		\$	375.00	\$375.00

		I. MONETARY R	ECEIPT	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009
		B. Itemized Contribu	itions fron	n Individu	ıals			
Last Name DiScala	First Name Mary		MI	Cash	contribution: X Personal C	heck 0443	ition ID#	Amount of Contribution
Residential Street Address 178 Ponus Ave		City Norwalk		State CT	Zip Code 06850-1838	Date Receive 03/31/20		
Principal Occupation n/a		Name of Employer retired			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	depender	butor a lobbyis at child of a lob Yes	byist?	Aggregate Contri	butions \$375.00	\$375.00
Last Name Jurgielewicz	First Name Patricia		MI	Cash	contribution: X Personal Contribution: y Order Credit/Deb	heck 0444	ition ID#	Amount of Contribution
Residential Street Address 220 Bibbins Rd		City Easton		State CT	Zip Code 06612-1313	Date Receive 03/31/20		
Principal Occupation Executive VP		Name of Employer Sedona Group			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	depender	butor a lobbyis at child of a lob Yes	byist?	Aggregate Contri	butions \$375.00	\$375.00
Last Name Webber	First Name Alan		MI	Cash	contribution: X Personal C	heck 0445	ition ID#	Amount of Contribution
Residential Street Address 13 Jean Ave		City Norwalk		State CT	Zip Code 06850-1809	Date Receive 03/31/20		
Principal Occupation CFO		Name of Employer First Mortgage Fund		•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No Executive Legislative	depender	butor a lobbyis at child of a lob Yes	byist?	Aggregate Contri	butions \$375.00	\$375.00
Last Name Weinstein	First Name Seth		MI G	Cash	contribution: X Personal Contribution: y Order Credit/Deb	heck 0447	ition ID#	Amount of Contribution
Residential Street Address 905 Rock Rimmon Rd		City Stamford		State CT	Zip Code 06903-1213	Date Receive 03/31/20		
Principal Occupation real estate developer		Name of Employer not listed		•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	depender	butor a lobbyis at child of a lob Yes	byist?	Aggregate Contri	butions \$375.00	\$375.00

		I. MONETA	ARY REC	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origina	al 04/13/2009
		B. Itemized C	ontributio	ons from	Individu	ıals				
Last Name Dale	First Name Robert			MI	Cash	contribution: X Personal C		Contribution 0448	on ID#	Amount of Contribution
Residential Street Address 237 Redstone Rdg		City Cherry Hill			State NJ	Zip Code 08034-2752		ate Received 3/31/2009	Ð	
Principal Occupation real estate developer		Name of Employer self				Is this contribution associ fundraising event listed in If yes, list Event #		11?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Executive Legisl	X No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribu	ations 375.00	\$375.00
Last Name Nolin	First Name Carol Bate	eson		MI	Cash	contribution: X Personal C y Order Credit/De		Contribution 0449	on ID #	Amount of Contribution
Residential Street Address 2 Douglas Dr		City Norwalk			State CT	Zip Code 06850-1730		ate Received 3/31/2009	Ð	
Principal Occupation Graphic artist		Name of Employer MBI				Is this contribution associ fundraising event listed in If yes, list Event #		11?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Executive Legisl	X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu	ations 375.00	\$375.00
Last Name Beem	First Name David			MI	Cash	contribution: X Personal C		Contribution 0450	on ID#	Amount of Contribution
Residential Street Address 628 N Park Ave		City Easton			State CT	Zip Code 06612-1222		ate Received 3/31/2009	9	
Principal Occupation architect		Name of Employer Roger Ferris + Par	tners			Is this contribution associ fundraising event listed in If yes, list Event #		H2 -	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Executive Legisl	X No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribu \$3	ations 375.00	\$375.00
Last Name McLaughlin	First Name Stephanie	•		MI	Cash	contribution: X Personal C y Order Credit/De		Contribution 0451	on ID #	Amount of Contribution
Residential Street Address 193 Rowayton Woods Dr		City Norwalk			State CT	Zip Code 06854-3945		ate Received 3/31/2009		
Principal Occupation attorney		Name of Employer Sandak Hennessey	/ & Greco Ll	LP		Is this contribution associ fundraising event listed in If yes, list Event #		11?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Executive Legisl	X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribu	itions 375.00	\$375.00

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILING	G DUE DATE			
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009			
		B. Itemized Contribut	ions fron	Individu	ıals						
Last Name Manocherian	First Name Gregory		MI	Cash	contribution: X Personal Cl	heck 0452	ution ID#	Amount of Contribution			
Residential Street Address 46 Westchester Ave		City Pound Ridge		State NY	Zip Code 10576-2147	Date Receiv 03/31/20					
Principal Occupation real estate		Name of Employer self			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Contr	\$375.00	\$375.00			
Last Name Kinol	First Name Paxton		MI B	Cash	contribution: X Personal Cl / Order Credit/Deb	heck 0453	ution ID#	Amount of Contribution			
Residential Street Address 7100 Loch Edin Ct		City Potomac		State MD	Zip Code 20854-4841	Date Receiv 03/31/20					
Principal Occupation investor		Name of Employer Stillwater Investment			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Contr	ibutions \$375.00	\$375.00			
Last Name Malloy	First Name Ronald		MI E	Cash	contribution: X Personal Cl	heck 0454	ution ID#	Amount of Contribution			
Residential Street Address 16 Stamford Ave		City Stamford		State CT	Zip Code 06902-8014	Date Receiv 03/31/20					
Principal Occupation Real Estate		Name of Employer self		•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Contr	ibutions \$375.00	\$375.00			
Last Name Malloy	First Name Sandra		MI C	Cash	contribution: X Personal Cl	heck 0455	ution ID#	Amount of Contribution			
Residential Street Address 16 Stamford Ave		City Stamford		State CT	Zip Code 00000-6902	Date Receiv 03/31/20					
Principal Occupation Volunteer Director		Name of Employer Waveny Care Network			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Contr	ibutions \$125.00	\$125.00			

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE									FILING	DUE DATE	
Dan Malloy For Connecticut (C	T)								Origin	al 04/13/2009	
		B. It	emized Contributi	ons from	Individ	uals					
Last Name Malloy	First Name Mary Gail			MI	Cash	contribution: X Personal or Order Credit/De		Contributi 0456	on ID#	Amount of Contribution	
Residential Street Address 87 Glenbrook Rd Apt 9G		City Stamford	d		State CT	Zip Code 06902-2922		Date Received			
Principal Occupation Real Estate		Name of E self	mployer		-	Is this contribution assoc fundraising event listed i If yes, list Event #		J1?	Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lo		Aggre	egate Contrib	utions 375.00	\$375.00	
Last Name Malloy	First Name William			MI F	Cash	contribution: X Personal y Order Credit/De		Contributi 0457	on ID#	Amount of Contribution	
Residential Street Address 119 Ralsey Rd		City Stamford	d		State CT	Zip Code 06902-7808		ate Received			
Principal Occupation insurance agent		Name of E self	mployer		•	Is this contribution assoc fundraising event listed i If yes, list Event #		J1?	Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lo		Aggre	egate Contrib	utions 375.00	\$375.00	
Last Name Malloy	First Name Kathleen			MI	Cash	contribution: X Personal or Order Credit/De		Contributi 0458	on ID#	Amount of Contribution	
Residential Street Address 119 Ralsey Rd		City Stamford	d		State CT	Zip Code 06902-7808		Date Received			
Principal Occupation attorney		Name of E Philip Ru	mployer ussell LLC			Is this contribution assoc fundraising event listed i If yes, list Event #		J1?	Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lo		Aggre	egate Contrib	utions 100.00	\$100.00	
Last Name Malloy	First Name Evon			MI D	Cash	contribution: X Personal or Order Credit/Dec		Contributi 0460	on ID#	Amount of Contribution	
Residential Street Address 119 Ralsey Rd		City Stamford	d		State CT	Zip Code 06902-7808		Date Received			
Principal Occupation School Nurse		Name of E	mployer Stamford		•	Is this contribution assoc fundraising event listed i If yes, list Event #		J1?	Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyi child of a lo		Aggre	egate Contrib	utions 375.00	\$375.00	

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILING	G DUE DATE			
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009			
		B. Itemized Contribut	ions fron	Individu	ıals						
Last Name Malloy	First Name Kerry		MI	Cash	contribution: X Personal Cl / Order Credit/Debi	heck 0459	ution ID #	Amount of Contribution			
Residential Street Address 96 Verplank Ave	•	City Stamford	•	State CT	Zip Code 06902-8237	Date Receiv					
Principal Occupation sales executive		Name of Employer Centric			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Cont	ributions \$100.00	\$100.00			
Last Name Fife	First Name Lynne		MI C	Cash	contribution: X Personal Cl / Order Credit/Debi	heck 0461	ution ID #	Amount of Contribution			
Residential Street Address 102 Strawberry Hill Ave Apt 3		City Stamford		State CT	Zip Code 06902-2566	Date Receiv 03/31/20					
Principal Occupation Asst. Registrar of Voters		Name of Employer City of Stamford		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Contr	ributions \$200.00	\$200.00			
Last Name Russell	First Name Philip		MI	Cash	contribution: X Personal Cl y Order Credit/Debi	heck 0463	ution ID#	Amount of Contribution			
Residential Street Address 98 Stamford Ave		City Stamford		State CT	Zip Code 06902-8016	Date Receiv					
Principal Occupation Attorney		Name of Employer Self		•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Conti	ributions \$375.00	\$375.00			
Last Name Russell	First Name Sally		MI	Cash	contribution: X Personal Cl	heck 0464	ution ID #	Amount of Contribution			
Residential Street Address 98 Stamford Ave		City Stamford		State CT	Zip Code 06902-8016	Date Receiv					
Principal Occupation Attorney		Name of Employer self		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Conti	ributions \$375.00	\$375.00			

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILIN	G DUE DATE			
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009			
		B. Itemized Contribu	utions fro	n Individu	ıals						
Last Name Russell	First Name Rachel		MI	Cash	contribution:	heck 0465	oution ID#	Amount of Contribution			
Residential Street Address 98 Stamford Ave		City Stamford		State CT	Zip Code 06902-8016	Date Recei					
Principal Occupation student		Name of Employer none			Is this contribution associa fundraising event listed in If yes, list Event #		Yes No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	depender	butor a lobbyis nt child of a lob Yes	byist?	Aggregate Cont	ributions \$375.00	\$375.00			
Last Name Selvaggio	First Name Joseph		MI	Cash	contribution: Personal C y Order X Credit/Deb	heck 0466	oution ID#	Amount of Contribution			
Residential Street Address 2 Riverside Dr		City Branford		State CT	Zip Code 06405-3923	Date Recei					
Principal Occupation Educator		Name of Employer State of CT		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	depender	butor a lobbyis at child of a lob Yes	byist?	Aggregate Cont	ributions \$25.00	\$25.00			
Last Name Stanton	First Name Gregory		MI	Cash	contribution: Personal C y Order X Credit/Deb	heck 0467	oution ID#	Amount of Contribution			
Residential Street Address 14 Pryer Ln		City Larchmont	-	State NY	Zip Code 10538-4021	Date Recei					
Principal Occupation Real Estate		Name of Employer Seaboard Properties			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	depender	butor a lobbyis nt child of a lob Yes	byist?	Aggregate Cont	ributions \$375.00	\$375.00			
Last Name Shanahan	First Name Carl		MI	Cash	contribution: Personal C y Order X Credit/Deb	heck 0468	oution ID#	Amount of Contribution			
Residential Street Address 280 Ocean Dr E		City Stamford		State CT	Zip Code 06902-8238	Date Recei					
Principal Occupation ceo		Name of Employer specialty wire and cable			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	depender	butor a lobbyis nt child of a lob Yes	byist?	Aggregate Cont	ributions \$375.00	\$375.00			

		I. MO	NETARY REC	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origina	al 04/13/2009
		B. Item	nized Contributio	ons from	Individu	ıals				
Last Name Shanahan	First Name Mary Ann			MI	Cash	contribution: X Personal 0 y Order Credit/De		Contribution 0482	on ID#	Amount of Contribution
Residential Street Address 280 Ocean Dr E		City Stamford			State CT	Zip Code 06902-8238		ate Received		
Principal Occupation producer		Name of Emplo	oyer			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribu	ations 375.00	\$375.00
Last Name Hynes	First Name Elizabeth			MI	Cash	contribution: X Personal of the property of t		Contribution 0483	on ID#	Amount of Contribution
Residential Street Address 280 Ocean Dr E		City Stamford			State CT	Zip Code 06902-8238		ate Received		
Principal Occupation merchandising manager/retail sales		Name of Emplo Purchase St	•			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribu	tions \$50.00	\$50.00
Last Name Gatton	First Name David			MI	Cash	contribution: Personal (y Order X Credit/De		Contribution 0469	on ID#	Amount of Contribution
Residential Street Address 1244 Colonial Rd		City McLean			State VA	Zip Code 22101-2965		ate Received		
Principal Occupation Government consultant		Name of Emplo Developme	oyer ent Initiatives			Is this contribution associ fundraising event listed in If yes, list Event #		11?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribu	utions 250.00	\$250.00
Last Name Metz	First Name Marie			MI F	Cash	contribution: Personal (y Order X Credit/De		Contribution 0470	on ID#	Amount of Contribution
Residential Street Address 49 Parry Ct		City Stamford			State CT	Zip Code 06907-1018		ate Received		
Principal Occupation Consultant		Name of Emplo	oyer			Is this contribution assoc fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribu	tions \$50.00	\$50.00

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE									FILING	G DUE DATE	
Dan Malloy For Connecticut (C	T)								Origin	al 04/13/2009	
		B. Itemized	Contributio	ons from	Individu	ıals					
Last Name Quinton	First Name Dan			MI B	Cash	contribution: Personal y Order X Credit/De		Contributi	on ID#	Amount of Contribution	
Residential Street Address 5968 Westgate Dr		City Orlando			State FL	Zip Code 32835-2075		Date Received			
Principal Occupation Sales Manager		Name of Employer American Manage	ement Servi	ces		Is this contribution assoc fundraising event listed i If yes, list Event #		J1?	Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Executive Legi	X No	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contribi	utions 250.00	\$250.00	
Last Name McGuinness	First Name Bill			MI	Cash	contribution: Personal y Order X Credit/De		Contributi 0472	on ID#	Amount of Contribution	
Residential Street Address 3 Memorial Ave		City Pawling			State NY	Zip Code 12564-1153		Date Received			
Principal Occupation Real Estate Developer		Name of Employer VOX Properties				Is this contribution assoc fundraising event listed i If yes, list Event #		J1?	Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Executive Legi	X No	dependent	utor a lobbyis child of a lob es X	bbyist?	Aggre	egate Contribi \$3	utions 375.00	\$375.00	
Last Name Kiley	First Name Gerard			MI J	Cash	contribution: Personal y Order X Credit/De		Contributi	on ID#	Amount of Contribution	
Residential Street Address 56 Indian Hill Rd		City Stamford			State CT	Zip Code 06902-2024		Date Received			
Principal Occupation Real Estate		Name of Employer Stone Harbour				Is this contribution assoc fundraising event listed i If yes, list Event #		J1?	Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective		X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contribi \$3	utions 375.00	\$375.00	
Last Name Waldman	First Name David			MI A	Cash	contribution: Personal y Order X Credit/De		Contributi	on ID#	Amount of Contribution	
Residential Street Address 16 Minute Man Hl		City Westport			State CT	Zip Code 06880-6522		Date Received			
Principal Occupation Real Estate Developer		Name of Employer Self		_		Is this contribution assoc fundraising event listed i If yes, list Event #		J1?	Yes No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective		X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	egate Contribi	utions 375.00	\$375.00	

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILING	G DUE DATE			
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009			
		B. Itemized Contribut	ions fron	ı Individu	ıals						
Last Name Gordon	First Name Steven		MI A	Cash	contribution: Personal C	heck 04	ntribution ID #	Amount of Contribution			
Residential Street Address 23 Clover Pl		City Cos Cob		State CT	Zip Code 06807-2202	Date Re 03/31	eceived 1/2009				
Principal Occupation Senior Director		Name of Employer Oppenheimer & Co., Inc.			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	utor a lobbyis child of a lob Yes	byist?	Aggregate (Contributions \$375.00	\$375.00			
Last Name Johnson	First Name Fotine		MI	Cash	contribution: Personal Contribution: y Order X Credit/Deb	heck 04	ntribution ID #	Amount of Contribution			
Residential Street Address 6212 Gilliam Rd		City Orlando		State FL	Zip Code 32818-1110	Date Re 03/31	eceived 1/2009				
Principal Occupation Senior Administrator		Name of Employer American Management Serv	ices, Inc.		Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	utor a lobbyis child of a lob Yes	byist?	Aggregate (Contributions \$375.00	\$375.00			
Last Name Kakoyiannis	First Name Theodore		MI M	Cash	contribution: Personal C y Order X Credit/Deb	heck 04	ntribution ID #	Amount of Contribution			
Residential Street Address 308 E 79th St Apt 5C		City New York		State NY	Zip Code 10075-0998	Date Re 03/31	eceived 1/2009				
Principal Occupation Real Estate Developer		Name of Employer Self-employed		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate (Contributions \$250.00	\$250.00			
Last Name Nanos	First Name Penelope		MI	Cash	contribution: X Personal Contribution: y Order Credit/Deb	heck 04	ntribution ID #	Amount of Contribution			
Residential Street Address 7 Briarwood Ln		City Stamford		State CT	Zip Code 06903-4502	Date Re 03/31	eceived 1/2009				
Principal Occupation retired		Name of Employer n/a		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	utor a lobbyis child of a lob	byist?	Aggregate (Contributions \$100.00	\$100.00			

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE									FILING	DUE DATE	
Dan Malloy For Connecticut (C	T)								Origina	al 04/13/2009	
		B. Itemized C	ontributio	ons from	Individu	ıals					
Last Name DiMenna	First Name John			MI J	Cash	contribution: X Personal C		Contribution	on ID#	Amount of Contribution	
Residential Street Address 19 Rockwell Ln		City Darien			State CT	Zip Code 06820-2023		ate Received 3/31/2009	9		
Principal Occupation Real Estate		Name of Employer Seaboard Propertie	es			Is this contribution associ fundraising event listed in If yes, list Event #		1?	Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Executive Legisl	X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu \$3	itions 375.00	\$375.00	
Last Name DiMenna	First Name Lynn			MI	Cash	contribution: X Personal (Contribution 0480	on ID#	Amount of Contribution	
Residential Street Address 19 Rockwell Ln		City Darien			State CT	Zip Code 06820-2023		ate Received 3/31/2009	9		
Principal Occupation n/a		Name of Employer n/a				Is this contribution associ fundraising event listed in If yes, list Event #		1?	Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Executive Legisl	X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribu \$3	ations 375.00	\$375.00	
Last Name Shanahan	First Name John			MI	Cash	contribution: X Personal C		Contribution 0481	on ID#	Amount of Contribution	
Residential Street Address 51 Auldwood Rd		City Stamford			State CT	Zip Code 06902-7815		ate Received 3/31/2009	Ð		
Principal Occupation loan officer		Name of Employer GE				Is this contribution associ fundraising event listed in If yes, list Event #		1?	Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Executive Legisl	X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu \$1	tions	\$100.00	
Last Name Barrett	First Name Susan			MI	Cash	contribution: X Personal (Contribution	on ID #	Amount of Contribution	
Residential Street Address 122 Wilton Rd		City Fairfield			State CT	Zip Code 06824-4043		ate Received 3/31/2009	Ð		
Principal Occupation Educator		Name of Employer retired		_	•	Is this contribution associ fundraising event listed in If yes, list Event #		1? _	Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Executive Legisl	X No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribu \$1	tions	\$100.00	

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILING	G DUE DATE			
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009			
		B. Itemized Contribut	ions fron	ı Individu	ıals						
Last Name Cabrera	First Name James		MI S	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 048	ribution ID #	Amount of Contribution			
Residential Street Address 150 Southfield Ave		City Stamford		State CT	Zip Code 06902-7756	Date Rec 03/31/					
Principal Occupation Realestate Agent		Name of Employer Cushman & Wakefield			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Co	system \$375.00	\$375.00			
Last Name Cornett	First Name Catherine		MI	Cash	contribution: X Personal Cl y Order Credit/Deb	heck 049	ribution ID #	Amount of Contribution			
Residential Street Address 29 Oak Ridge Dr		City Newtown		State CT	Zip Code 06470-2458	Date Rec 03/31/					
Principal Occupation homemaker		Name of Employer none		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes No				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Co	shaributions \$375.00	\$375.00			
Last Name Cornett	First Name David		MI	Cash	contribution: X Personal Cl y Order Credit/Deb	heck 050	ribution ID #	Amount of Contribution			
Residential Street Address 29 Oak Ridge Dr		City Newtown		State CT	Zip Code 06470-2458	Date Rec 03/31/					
Principal Occupation Consultant		Name of Employer E-Rate Online LLC		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Co	system \$375.00	\$375.00			
Last Name Murphy	First Name Hugh		MI F	Cash	contribution: X Personal Cl y Order Credit/Deb	heck 049	ribution ID #	Amount of Contribution			
Residential Street Address 235 Oak Ridge Ln		City Milford		State CT	Zip Code 06461-1881	Date Rec 03/31/					
Principal Occupation Fianance Director		Name of Employer Stamford Public Schools			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor of state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Co	sntributions \$125.00	\$125.00			

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILIN	G DUE DATE			
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009			
		B. Itemized Contribut	ions fron	Individu	ials						
Last Name Siladi	First Name Paul		MI	Cash	contribution: X Personal Cl	heck 0495	oution ID #	Amount of Contribution			
Residential Street Address PO Box 1105		City Darien		State CT	Zip Code 06820-1105	Date Recei					
Principal Occupation Real Estate		Name of Employer Self Employed			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Con	tributions \$200.00	\$200.00			
Last Name Siladi	First Name Mahvash		MI S	Cash	contribution: X Personal Cl / Order Credit/Deb	heck 0496	oution ID#	Amount of Contribution			
Residential Street Address 66 Wallacks Dr		City Stamford		State CT	Zip Code 06902-7125	Date Recei					
Principal Occupation central office administrator		Name of Employer Stamford Board of Education	1	•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Con	tributions \$200.00	\$200.00			
Last Name Meyers	First Name Mike		MI	Cash	contribution: X Personal Cl y Order Credit/Deb	heck 0497	oution ID #	Amount of Contribution			
Residential Street Address 127 Compo Rd		City Westport		State CT	Zip Code 06880-5010	Date Recei					
Principal Occupation Director		Name of Employer Stamford Public Schools			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Con	tributions \$175.00	\$175.00			
Last Name Mecca	First Name David		MI	Cash	contribution: X Personal Cl Order Credit/Deb	heck 0500	oution ID#	Amount of Contribution			
Residential Street Address 136 Kimberly Ln		City Watertown		State CT	Zip Code 06795-3158	Date Recei					
Principal Occupation Safety Director		Name of Employer Delmar Electrical			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Con	tributions \$150.00	\$150.00			

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE									FILING	G DUE DATE	
Dan Malloy For Connecticut (C	T)								Origin	al 04/13/2009	
		B. Itei	mized Contributio	ons from	Individu	ıals					
Last Name Garcia	First Name Maritza			MI	Cash	contribution: X Personal C y Order Credit/De		Contributi	on ID#	Amount of Contribution	
Residential Street Address 71 Greenleaf Ave		City Darien			State CT	Zip Code 06820-3208		3/31/200			
Principal Occupation administration		Name of Emp Stamford	bloyer Board of Education			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggre	egate Contribu	s50.00	\$50.00	
Last Name Poltrack	First Name Cheryl			MI	Cash	contribution: X Personal C y Order Credit/De		Contributi 0502	on ID#	Amount of Contribution	
Residential Street Address 205 Dartley St		City Stamford			State CT	Zip Code 06905-3510		ate Received			
Principal Occupation teacher		Name of Emp Stamford	oloyer Board of Education			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contrib	utions \$50.00	\$50.00	
Last Name Costantini	First Name Mark			MI	Cash	contribution: X Personal C		Contributi	on ID#	Amount of Contribution	
Residential Street Address 43 Crescent Pl		City Monroe			State CT	Zip Code 06468-1608		ate Received			
Principal Occupation environment		Name of Emp	oloyer			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	gate Contrib	utions 375.00	\$375.00	
Last Name Pillo	First Name Joseph			MI	Cash	contribution: X Personal C		Contributi	on ID#	Amount of Contribution	
Residential Street Address 73 Walnut St		City Milford			State CT	Zip Code 06461-2659		ate Received			
Principal Occupation consultant		Name of Emp E-Rate On	· · · ·			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contrib	utions 375.00	\$375.00	

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILING	G DUE DATE			
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009			
		B. Itemized Contribut	ions fron	Individu	ıals						
Last Name	First Name		MI	Method of	contribution:		ntribution ID#	Amount of			
Krom	Amy			Cash Money	y Order X Personal Cl	I 05	05	Contribution			
Residential Street Address		City		State	Zip Code	Date Re	eceived				
104 Stuart Dr		Southington		СТ	06489-3940	03/31	/2009				
Principal Occupation account manager		Name of Employer E-Rate Online			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No	dependent	utor a lobbyis child of a lob 'es	byist?	Aggregate C	Contributions \$375.00	\$375.00			
Last Name Thopsey	First Name Melissa		MI	Cash	contribution: X Personal Cl	heck 05	ntribution ID#	Amount of Contribution			
Residential Street Address 277 Unity Rd		City Trumbull		State CT	Zip Code 06611-4932	Date Re					
Principal Occupation Office Manager		Name of Employer E-Rate Online			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate C	Contributions \$375.00	\$375.00			
Last Name Gjelevic	First Name Anton		MI	Cash	contribution: X Personal Cl y Order Credit/Deb	heck 05	ntribution ID#	Amount of Contribution			
Residential Street Address 255 Strawberry Hill Ave Unit A2	•	City Stamford		State CT	Zip Code 06902-2549	Date Re 03/31					
Principal Occupation yes		Name of Employer Servpro		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate C	Contributions \$375.00	\$375.00			
Last Name Lyons	First Name Marc		MI A	Cash	contribution: X Personal Cl y Order Credit/Deb	heck 05	ntribution ID#	Amount of Contribution			
Residential Street Address 21 Leona Dr		City Stamford		State CT	Zip Code 06907-1145	Date Re 03/31					
Principal Occupation construction liason		Name of Employer self			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate C	Contributions \$375.00	\$375.00			

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE FILING										
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009		
		B. Itemized Contribu	tions fron	ı Individu	ıals		-			
Last Name Pelli	First Name Joseph		MI	Cash	contribution: X Personal Cl	heck 0510	oution ID #	Amount of Contribution		
Residential Street Address 59 Squires Ln		City New Canaan		State CT	Zip Code 06840-2035	Date Recei 03/31/2				
Principal Occupation yes		Name of Employer Servpro			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	utor a lobbyis child of a lob Yes	byist?	Aggregate Cont	ributions \$375.00	\$375.00		
Last Name Robichaud	First Name Elaine		MI	Cash	contribution: X Personal Cl y Order Credit/Deb	heck 0511	oution ID #	Amount of Contribution		
Residential Street Address 125 Doral Ln		City Southington		State CT	Zip Code 06489-1639	Date Recei 03/31/2				
Principal Occupation none		Is this contribution associated with a fundraising event listed in Section J1? If yes, list Event #								
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	utor a lobbyis child of a lob Yes	byist?	Aggregate Cont	ributions \$375.00	\$375.00		
Last Name Polo	First Name Steven		MI M	Cash	contribution: X Personal Cl	heck 0512	oution ID #	Amount of Contribution		
Residential Street Address 41 Old Wagon Rd		City Stamford		State CT	Zip Code 06903-1006	Date Recei 03/31/2				
Principal Occupation none listed		Name of Employer self		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Cont	ributions \$375.00	\$375.00		
Last Name Byrne	First Name Kyle		MI	Cash	contribution: X Personal Cl y Order Credit/Deb	heck 0513	oution ID #	Amount of Contribution		
Residential Street Address 100 State St Apt 11		City North Haven		State CT	Zip Code 06473-2210	Date Recei 03/31/2				
Principal Occupation electrician		Name of Employer Delmar Electric			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	utor a lobbyis child of a lob Yes	byist?	Aggregate Cont	ributions \$150.00	\$150.00		

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE FILING										
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009		
		B. Itemized Contribut	ions fron	Individu	ıals					
Last Name Pringle	First Name Erin		MI	Cash	contribution: X Personal Cl / Order	heck 0514	ution ID#	Amount of Contribution		
Residential Street Address 110 Rice Lane Ext		City Beacon Falls		State CT	Zip Code 06403-1289	Date Receiv 03/31/20				
Principal Occupation office manager		Name of Employer AMC Environmental			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Conti	sibutions \$375.00	\$375.00		
Last Name Pringle	First Name Jason		MI	Cash	contribution: X Personal Cl / Order Credit/Debi	heck 0515	ution ID#	Amount of Contribution		
Residential Street Address 110 Rice Lane Ext		City Beacon Falls		State CT	Zip Code 06403-1289	Date Receiv 03/31/20				
Principal Occupation Environmental Consultant		Name of Employer AMC TEchnology, INC		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor of state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Contr	sibutions \$375.00	\$375.00		
Last Name Rose	First Name Gregory		MI A	Cash	contribution: X Personal Cl	heck 0516	ution ID#	Amount of Contribution		
Residential Street Address 6 Strongs Ave		City Portland		State CT	Zip Code 06480-1426	Date Receiv				
Principal Occupation sales		Name of Employer SR Products			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Conti	sibutions \$375.00	\$375.00		
Last Name Saturski	First Name Luke		MI	Cash	contribution: X Personal Cl / Order Credit/Debi	heck 0517	ution ID #	Amount of Contribution		
Residential Street Address 365 Woodford Ave Apt 37		City Plainville		State CT	Zip Code 06062-2491	Date Receiv 03/31/20				
Principal Occupation project manager		Name of Employer Delmar Electric			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor of state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob ves	byist?	Aggregate Conti	sibutions \$150.00	\$150.00		

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE FILING										DUE DATE
Dan Malloy For Connecticut (C	T)								Origina	al 04/13/2009
		B. Itemizeo	l Contribution	ons from	Individu	ıals				
Last Name Marini	First Name Mario			MI	Cash	contribution: X Personal y Order Credit/De		Contribution 0518	on ID#	Amount of Contribution
Residential Street Address 135 Governor Trumbull Way		City Trumbull			State CT	Zip Code 06611-5605		ate Received		
Principal Occupation Partner		Name of Employer Marissia's Resta	aurant			Is this contribution assoc fundraising event listed i If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive Lo	egislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	gate Contribu	ations 375.00	\$375.00
Last Name Brown	First Name Timothy			MI J	Cash	contribution: X Personal y Order Credit/De		Contribution 0519	on ID#	Amount of Contribution
Residential Street Address 21 Pearl St		City Plainville			State CT	Zip Code 06062-2721		ate Received		
Principal Occupation electrician		Name of Employer Delmar Electric				Is this contribution assoc fundraising event listed i If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Ye Executive Le	x No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribu	utions 150.00	\$150.00
Last Name Schneider	First Name Steven			MI	Cash	contribution: X Personal y Order Credit/De		Contribution 0520	on ID#	Amount of Contribution
Residential Street Address 32 Windaway Rd		City Bethel			State CT	Zip Code 06801-1610		ate Received		
Principal Occupation transportation manager		Name of Employer Stamford PS Ci	ty of Stamford	i		Is this contribution assoc fundraising event listed i If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive Le	egislative	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribu	utions 100.00	\$100.00
Last Name Okon	First Name Jerry			MI	Cash	contribution: X Personal y Order Credit/De		Contribution 0521	on ID#	Amount of Contribution
Residential Street Address 37 Maple St		City Plainville			State CT	Zip Code 06062-2237		ate Received		
Principal Occupation electrician		Name of Employer Delmar Electric				Is this contribution assoc fundraising event listed i If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Ye Executive Le	s X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	egate Contribu	utions 150.00	\$150.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE FILING										
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009		
		B. Itemized Contribut	ions from	Individu	ials		•			
Last Name Dacruz	First Name Eduardo		MI	Cash	contribution: X Personal Cl	heck 0522	oution ID #	Amount of Contribution		
Residential Street Address 74 June St		City Naugatuck		State CT	Zip Code 06770-3452	Date Recei 03/31/2				
Principal Occupation electrician		Name of Employer Delmar Electric			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Con	tributions \$100.00	\$100.00		
Last Name Dunn	First Name Kevin		MI	Cash	contribution: X Personal Cl / Order Credit/Debi	heck 0523	oution ID #	Amount of Contribution		
Residential Street Address 1244 Guernseytown Rd		City Watertown		State CT	Zip Code 06795-1222	Date Recei 03/31/2				
Principal Occupation electrician		Name of Employer Delmar Electric		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Con	tributions \$250.00	\$250.00		
Last Name Buden	First Name Nicholas		MI	Cash	contribution: X Personal Cl y Order Credit/Debi	heck 0524	oution ID #	Amount of Contribution		
Residential Street Address 38 Pinnacle Rd		City Plainville		State CT	Zip Code 06062-1430	Date Recei 03/31/2				
Principal Occupation electrician		Name of Employer Delmar Electric			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Con	tributions \$150.00	\$150.00		
Last Name Latozas	First Name Donald		MI	Cash	contribution: X Personal Cl	heck 0525	oution ID#	Amount of Contribution		
Residential Street Address 264 S Eagle St		City Terryville		State CT	Zip Code 06786-6108	Date Recei 03/31/2				
Principal Occupation electrician		Name of Employer Delmar Electric	_	•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor of state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Con	tributions \$150.00	\$150.00		

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 04/13/2009
		B. It	emized Contributi	ons fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Wagner	Carl				Cash Money	y Order X Personal C		0526		Contribution
Residential Street Address	-	City			State	Zip Code	D	ate Received		
28 Caruso Dr		Watertow	/n		СТ	06795-3069	0	3/31/2009)	
Principal Occupation operations manager		Name of En				Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribu	tions 00.00	\$200.00
Last Name	First Name			MI	Method of	contribution:	-	Contributio	n ID#	Amount of
Holland	Wayne				Cash Money	y Order X Personal C		0499		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
193 Hamilton Ave # 18		Greenwic	h		СТ	06832	0	3/31/2009)	
Principal Occupation administrator		Name of Er	^{nployer} d Board of Education			Is this contribution associ fundraising event listed in		J1?	Yes	
administrator			2 2001 u 01 2uucuu.			If yes, list Event #		<u>x</u>	No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribu	tions .00.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Seitaridis	Harry				Cash Money	y Order		0373		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
1 Cypress Dr		Stamford	<u> </u>		СТ	06903-5033	0	3/31/2009)	
Principal Occupation Donut Delight Owner		Name of Er	nployer			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor	or prospective	<u> </u>	Yes X No	Is contrib	outor a lobbyis	t. spouse, or	Aggre	gate Contribu	tions	
state contractor? Is yes, indicate which branch or branches of		Executive	Legislative	dependent	t child of a lob	byist?	Aggic	-	75.00	\$375.00
government the contract is with: Last Name	First Name			MI	1	contribution:	<u> </u>	Contributio	ID #	
Skroubelos	Nick			IVII	Cash	y Order		0374	in ID#	Amount of Contribution
Residential Street Address	•	City			State	Zip Code	D	ate Received		
91 Dogwood Ln		Stamford	<u> </u>		СТ	06903-4512	0	3/31/2009)	
Principal Occupation		Name of Er	mployer			Is this contribution associ			Yes	
Dunkin Donuts Owner		self				fundraising event listed in If yes, list Event #	n Section .	x x	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		outor a lobbyis	-	Aggre	gate Contribu	tions	ĺ
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative		t child of a lob Yes	-		\$1	00.00	\$100.00
government the contract is with:					· <u>–</u>		1			1

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE FILING										G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 04/13/2009
		B. Itei	mized Contributio	ons from	Individ	uals				
Last Name Nanos	First Name Peter			MI C	Cash	contribution: X Personal or Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 12 Houston Ter		City Stamford			State CT	Zip Code 06902-4402		ate Received		
Principal Occupation n/a		Name of Emp	oloyer			Is this contribution assoc fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lol res		Aggre	gate Contribi	utions 375.00	\$375.00
Last Name Athanasiadis	First Name Pantelis			MI	Cash	contribution: X Personal of the personal		Contributi 0376	on ID#	Amount of Contribution
Residential Street Address 1003 Shippan Ave		City Stamford			State CT	Zip Code 06902-7419		ate Received		
Principal Occupation Donut Delight Owner		Name of Emp	oloyer			Is this contribution assoc fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lol es		Aggre	gate Contrib	utions 375.00	\$375.00
Last Name Nanos	First Name Theodore			MI	Cash	contribution: X Personal of the property Order Credit/Dec		Contributi	on ID#	Amount of Contribution
Residential Street Address 28 High Clear Dr		City Stamford			State CT	Zip Code 06905-3101		ate Received		
Principal Occupation Retired		Name of Emp None	oloyer			Is this contribution assoc fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lol res		Aggre	gate Contrib	utions 375.00	\$375.00
Last Name Nanos	First Name Paul			MI	Cash	contribution: X Personal of the property of t		Contributi	on ID#	Amount of Contribution
Residential Street Address 19 Warwick Ln		City Stamford			State CT	Zip Code 06902-8319		ate Received		
Principal Occupation Self Employed		Name of Emp Real Estat	-		•	Is this contribution assoc fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lol es		Aggre	gate Contrib	utions 375.00	\$375.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE FILING										DUE DATE
Dan Malloy For Connecticut (C	T)								Origina	al 04/13/2009
		B. Itemized	Contribution	ons from	Individu	ıals				
Last Name Nanos	First Name Thamie			MI	Cash	contribution: X Personal (y Order Credit/De		Contribution 0379	on ID#	Amount of Contribution
Residential Street Address 12 Houston Ter		City Stamford			State CT	Zip Code 06902-4457		ate Received 3/31/2009	9	
Principal Occupation n/a		Name of Employer retired				Is this contribution assoc fundraising event listed in If yes, list Event #		1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Leguire	x No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribu	ations 375.00	\$375.00
Last Name Ferro	First Name Bonnie			MI	Cash	contribution: X Personal of the property of t		Contribution 0380	on ID #	Amount of Contribution
Residential Street Address 89 Jeanne Ct		City Stamford			State CT	Zip Code 06903-5135		ate Received 3/31/2009	9	
Principal Occupation n/a		Name of Employer n/a			•	Is this contribution assoc fundraising event listed in If yes, list Event #		1? _	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Executive Leg	X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu \$3	itions 375.00	\$375.00
Last Name Ferro	First Name Michael			MI F	Cash	contribution: X Personal of the property of t		Contribution 0417	on ID#	Amount of Contribution
Residential Street Address 89 Jeanne Ct		City Stamford			State CT	Zip Code 06903-5135		ate Received 3/31/2009	9	
Principal Occupation Owner		Name of Employer City Carting				Is this contribution assoc fundraising event listed in If yes, list Event #		1? _	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective		X No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribu \$3	ations 375.00	\$375.00
Last Name Terenzio	First Name Anthony			MI	Cash	contribution: X Personal of the property of t		Contribution 0381	on ID #	Amount of Contribution
Residential Street Address 270 Frogtown Rd		City New Canaan			State CT	Zip Code 06840-4408		ate Received 3/31/2009	Ð	
Principal Occupation owner		Name of Employer City Carting Inc.				Is this contribution assoc fundraising event listed in If yes, list Event #		1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective		x No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu	ations 375.00	\$375.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE FILING										
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009		
		B. Itemized Contribut	ions fron	ı Individu	ıals		_			
Last Name Strout	First Name Joseph		MI F	Cash	contribution: X Personal C	heck 0382	ution ID#	Amount of Contribution		
Residential Street Address 119 Coolidge Ave		City Stamford		State CT	Zip Code 06906-2405	Date Receiv 03/31/20				
Principal Occupation accounting		Name of Employer City Carting Inc.			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Contr	ibutions \$375.00	\$375.00		
Last Name Oxer	First Name Robert		MI	Cash	contribution: X Personal Contribution: y Order Credit/Deb	heck 0383	ution ID#	Amount of Contribution		
Residential Street Address 166 Pear Tree Point Rd		City Darien		State CT	Zip Code 06820-5821	Date Receiv 03/31/20				
Principal Occupation Owner		Name of Employer City Carting Inc.			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Contr	ibutions \$375.00	\$375.00		
Last Name Russo	First Name Jocelyn		MI	Cash	contribution: X Personal C	heck 0384	ution ID#	Amount of Contribution		
Residential Street Address 19 Paul Rd		City Stamford		State CT	Zip Code 06902-1812	Date Receiv				
Principal Occupation Sales rep.		Name of Employer City Carting Inc.		•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Contr	ibutions \$375.00	\$375.00		
Last Name Russo	First Name Anthony		MI M	Cash	contribution: X Personal Contribution: y Order Credit/Deb	heck 0390	ution ID#	Amount of Contribution		
Residential Street Address 19 Paul Rd		City Stamford		State CT	Zip Code 06902-1812	Date Receiv 03/31/20				
Principal Occupation superintendent		Name of Employer Elderly Housing			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Contr	ibutions \$375.00	\$375.00		

I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTEE FILING									
Dan Malloy For Connecticut (C	T)						Origin	al 04/13/2009	
		B. Itemized Contribu	ıtions froi	n Individu	uals				
Last Name Soucy	First Name		MI	Method of Cash	contribution:	heck	tion ID#	Amount of Contribution	
,				Mone	y Order Credit/Deb	it Card 0385			
Residential Street Address 235 New Canaan Rd		City Wilton		State CT	Zip Code 06897-3319	Date Receive 03/31/20			
Principal Occupation homemaker		Name of Employer n/a		•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	depender	butor a lobbyis nt child of a lob Yes	obyist?	Aggregate Contri	butions \$375.00	\$375.00	
Last Name Soucy	First Name Stephen		MI	Cash	contribution: X Personal C y Order Credit/Deb	heck 0386	ition ID#	Amount of Contribution	
Residential Street Address 235 New Canaan Rd		City Wilton		State CT	Zip Code 06897-3319	Date Receive 03/31/20			
Principal Occupation CFO		Name of Employer City Carting Holding Co.		•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	depender	butor a lobbyis nt child of a lob Yes	-	Aggregate Contri	butions \$375.00	\$375.00	
Last Name Fanali	First Name Dana		MI	Cash	contribution: X Personal C y Order Credit/Deb	heck 0387	tion ID#	Amount of Contribution	
Residential Street Address 63 Buckingham Dr		City Stamford		State CT	Zip Code 06902-8308	Date Receive 03/31/20			
Principal Occupation food service		Name of Employer Sodexho		•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	depender	butor a lobbyis nt child of a lob Yes		Aggregate Contri	butions \$375.00	\$375.00	
Last Name Fanali	First Name Gary	,	MI	Cash	contribution: X Personal C y Order Credit/Deb	heck 0388	tion ID#	Amount of Contribution	
Residential Street Address 63 Buckingham Dr		City Stamford		State CT	Zip Code 06902-8308	Date Receive 03/31/20			
Principal Occupation sales manager		Name of Employer City Carting			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	depender	butor a lobbyis nt child of a lob Yes	obyist?	Aggregate Contri	butions \$375.00	\$375.00	

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE FILING										DUE DATE
Dan Malloy For Connecticut (C	T)								Origina	al 04/13/2009
		B. Itemized Co	ontributio	ons from	Individu	ıals				
Last Name DeFelice	First Name Stacey			MI	Cash	contribution: X Personal of Credit/Dec		Contribution 0389	on ID#	Amount of Contribution
Residential Street Address 120 Columbus Pl Apt 7		City Stamford			State CT	Zip Code 06907-1652		ate Received 3/31/2009)	
Principal Occupation PR representative		Name of Employer Conair Corp.				Is this contribution assoc fundraising event listed i If yes, list Event #		11?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Executive Legisla	X No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribu \$3	tions 375.00	\$375.00
Last Name Johnson	First Name Barbara			MI S	Cash	contribution: X Personal y Order Credit/De		Contributio	on ID#	Amount of Contribution
Residential Street Address 1051 Cedar Rd		City Southport			State CT	Zip Code 06890-1002		ate Received 3/31/2009)	
Principal Occupation homemaker		Name of Employer n/a				Is this contribution assoc fundraising event listed i If yes, list Event # 03	n Section J		Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Executive Legisla	X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu \$3	tions 375.00	\$375.00
Last Name Johnson	First Name Gary			MI	Cash	contribution: X Personal of the Credit/Decoration of the Credit/Decora		Contribution	on ID#	Amount of Contribution
Residential Street Address 1051 Cedar Rd		City Southport			State CT	Zip Code 06890-1002		ate Received 3/31/2009)	
Principal Occupation President		Name of Employer Vertrue				Is this contribution assoc fundraising event listed i If yes, list Event # 03	n Section J	11?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Executive Legisla	X No	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	gate Contribu \$3	tions 375.00	\$375.00
Last Name Tuite	First Name Kathleen			MI	Cash	contribution: X Personal of the Credit/December 2 Credit/December		Contribution	on ID #	Amount of Contribution
Residential Street Address 288 Watch Hill Rd		City Cortlandt Manor			State NY	Zip Code 10567-6441		ate Received 3/31/2009)	
Principal Occupation Marketing Executive		Name of Employer Vertrue Inc			•	Is this contribution assoc fundraising event listed i If yes, list Event # 03	n Section J		Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Executive Legisla	X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu \$2	tions 250.00	\$250.00

		I. MC	ONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Dan Malloy For Connecticut (C	T)								Origina	al 04/13/2009
		B. Iten	nized Contributi	ons from	Individu	ıals		'		
Last Name Bennett	First Name Tiffany			MI	Cash	contribution: X Personal C		Contribution	ı ID#	Amount of Contribution
Residential Street Address 3 Cat Rock Rd		City Cos Cob			State CT	Zip Code 06807-1702		Oate Received 03/31/2009		
Principal Occupation accountant	untant Vertrue						ated with Section J 302009	J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	child of a lob	byist?	Aggre	egate Contributi \$25	ions 50.00	\$250.00
Last Name Frey	First Name James			MI	Cash	contribution: X Personal C Order Credit/Del		Contribution 0395	n ID#	Amount of Contribution
Residential Street Address 24 Eunice Ave		City Fairfield			State CT	Zip Code 06824-6821		Date Received		
Principal Occupation VP Operations & Fulfillment		Name of Empl Adaptive M	-		-	Is this contribution associ- fundraising event listed in If yes, list Event # 03:			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggre	egate Contributi \$25	ions 50.00	\$250.00
Last Name Barry	First Name Marcella			MI	Cash	contribution: X Personal C Order Credit/Del		Contribution	ı ID#	Amount of Contribution
Residential Street Address 247 Sawmill Rd		City Stamford			State CT	Zip Code 06903-3510		Pate Received		
Principal Occupation HR executive		Name of Empl	loyer			Is this contribution associ- fundraising event listed in If yes, list Event # 03:	Section J	J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	_	Yes X No Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contributi \$25	ions 50.00	\$250.00
Last Name Disanto	First Name Lorraine			MI	Cash	contribution: X Personal C Order Credit/Del		Contribution 0397	n ID#	Amount of Contribution
Residential Street Address 222 Silver Spring Rd		City Wilton			State CT	Zip Code 06897-1022		Date Received		
Principal Occupation CFO		Name of Empl Vertrue	loyer			Is this contribution associfundraising event listed in If yes, list Event # 033			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contributi \$25	ions 50.00	\$250.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE FILING I										G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 04/13/2009
		B. Iten	nized Contributio	ons from	Individu	ıals				
Last Name Palmer	First Name Russell			MI S	Cash	contribution: X Personal C y Order Credit/De		Contributi 0462	on ID#	Amount of Contribution
Residential Street Address 490 Lower Ln		City Berlin			State CT	Zip Code 06037		Date Received		
Principal Occupation Attorney		Name of Empi Law Office	loyer of Averum J. Spen	de		Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggre	egate Contrib	utions 250.00	\$250.00
Last Name Tully	First Name Paul			MI	Cash	contribution: Personal (y Order X Credit/De		Contributi 0410	on ID#	Amount of Contribution
Residential Street Address 76 Elm St Ste 210		City New Canaa	ın		State CT	Zip Code 06840-5423		ate Received		
Principal Occupation Real Estate	loyer		•	Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	-	Yes X No Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggre	egate Contrib	utions 250.00	\$250.00
Last Name Hall	First Name Brandon			MI P	Cash	contribution: Personal C y Order X Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 104 Harbor Rd		City Westport			State CT	Zip Code 06880-6916		Date Received		
Principal Occupation Real Estate		Name of Empi Forstone C	-			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggre	egate Contrib	utions 250.00	\$250.00
Last Name Dale	First Name Eric			MI	Cash	contribution: Personal G y Order X Credit/De		Contributi 0406	on ID#	Amount of Contribution
Residential Street Address 55 The Knoll		City Southport			State CT	Zip Code 06890-1075		Date Received		
Principal Occupation Attorney		Name of Emp.	-		-	Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggre	egate Contrib	utions 250.00	\$250.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 04/13/2009
		B. Itemized Contri	butions f	from I	ndividu	als				
Last Name Rostov	First Name Gene		MI	[Method of c Cash Money	contribution: Personal C Order X Credit/De		Contribution 0400	on ID#	Amount of Contribution
Residential Street Address 456 Glenbrook Rd		City Stamford			State CT	Zip Code 06906-1800		ate Received 3/31/2009		
Principal Occupation N/A		Name of Employer Retired				Is this contribution associ fundraising event listed in If yes, list Event #		11?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X N Executive Legislative			or a lobbyist aild of a lobb	oyist?	Aggre	gate Contribu	itions	\$100.00
Last Name Stout	First Name Wesley		MI	[Method of c Cash Money	contribution: Personal C Order X Credit/De		Contribution 0401	on ID#	Amount of Contribution
Residential Street Address 239 Ridgefield Rd		City Wilton			State CT	Zip Code 06897-2432		ate Received 3/31/2009	9	
Principal Occupation Landscape Architect		Name of Employer Wesley Stout Associates				Is this contribution associ fundraising event listed in If yes, list Event #		_{11?}	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X N Executive Legislative			or a lobbyist aild of a lobb	byist?	Aggre	gate Contribu	itions 375.00	\$375.00
Last Name Hamilton	First Name Winifred		MI	[Method of c Cash Money	contribution: X Personal Conder Credit/De		Contribution 0498	on ID#	Amount of Contribution
Residential Street Address 11 Donohue Dr		City Norwalk			State CT	Zip Code 06851-1036		ate Received		
Principal Occupation educator		Name of Employer Stamford Board of Educa	ation			Is this contribution associ fundraising event listed in If yes, list Event #		H2 -	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X N Executive Legislative	Is co		or a lobbyist hild of a lobb	pyist?	Aggre	gate Contribu \$3	ations 300.00	\$200.00
Last Name Hynes	First Name Eileen		MI P	[Method of c Cash Money	ontribution: X Personal C Order Credit/De		Contribution 0437	on ID#	Amount of Contribution
Residential Street Address 67 Fawnfield Rd		City Stamford			State CT	Zip Code 06903-3727		ate Received 3/31/2009		
Principal Occupation Director		Name of Employer Grace J. Fippinger Found	lation	•		Is this contribution associ fundraising event listed in If yes, list Event #		u? 🗀	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X N Executive Legislative			or a lobbyist aild of a lobb	oyist?	Aggre	gate Contribu \$2	utions 250.00	\$250.00

I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTEE							FILING	DUE DATE	
Dan Malloy For Connecticut (C	T)						Origina	al 04/13/2009	
B. Itemized Contributions from Individuals									
Last Name Colatrella	First Name Kathryne		MI A	Cash	contribution: X Personal Cl y Order Credit/Debi	0416	ion ID#	Amount of Contribution	
Residential Street Address 302 Vine Rd		City Stamford		State CT	Zip Code 06905-2107	Date Received 03/31/200			
Principal Occupation realator		Name of Employer Country Club Properties		•	Is this contribution associa fundraising event listed in If yes, list Event # 032	Section J1?	Yes No		
			dependent	Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes X No			sutions \$25.00	\$25.00	
Last Name Heaphy	First Name Eileen		MI M	Cash	contribution: X Personal Cl	0446	ion ID#	Amount of Contribution	
Residential Street Address 247 Hamilton Ave Apt 4		City Stamford		State CT	Zip Code 06902-3484	Date Received 03/31/200			
Principal Occupation retired		Name of Employer none			Is this contribution associa fundraising event listed in If yes, list Event # 032	Section J1?	Yes No		
Is contributor a principal of a state contractor of state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Contrib	utions 100.00	\$50.00	
						Total of	Section B	\$129,675.00	
TOTAL OF ALL CONTRIBU	JTIONS FI	ROM INDIVIDUALS	(Section	ons A & B	(Total on Line 14	of Summary Page)		\$129,675.00	

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILING	DUE DATE		
Dan Malloy For Connecticut (CT)							Original	Original 04/13/2009		
C1. Contributions from Other Committees										
Name of Committee					Name of Treasurer					
Address			Is this contribution fundraising event			Yes If yes, list Event	t#	Amount of Contribution		
City	State	Zip	Code	Date R	eceived	Aggregate Contributions				
Total of Section C1										

I. MONETARY RECEIPTS (Section A-I)								
NAME OF COMMITTEE				FILIN	NG DUE DATE			
Dan Malloy For Connecticut (CT)	Origi	riginal 04/13/2009						
C2. Reimbursements or Payments from other Committees								
Name of Committee	Name of Treasurer							
Address			Date Received		Amount of Receipt			
City	State	Zip Code	Reimbursement for shared expense					
			Payment for goods and services					
Total of Section C2								

	I. MONETARY RECEIPTS (Section	on A-K)				
NAME OF COMMITTEE					FILING	DUE DATE	
Dan Malloy For Connecticut (CT)					Origina	1 04/13/2009	
	D. Loans Received this Period						
Name of Lender				Source of Loan:	Is there a cosigner or Guarantor of	Amount Received	
Street Address	City	State	Zip Code	Candidate Individual	this loan?		
Name of Cosigner/Guarantor	Other Committee	No					
Street Address	City	State	Zip Code	Date Received			
Total of Section D							

I. MONETARY RECEIPTS (Section A-I)								
NAME OF COMMITTEE FILING I								
Dan Malloy For Connecticut (CT) Original 04/13/2009								
E. Personal Funds of the Candidate Received this Period								
Date Received	Amount	Method of Payment Cash Personal Check Credit/Debit Card						
Total of Section E								

I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTE	FILING DUE DATE								
Dan Malloy For Conr	Original 04/13/2009								
Date Received	\$ 1 bills	\$ 5 bills	\$ 5 bills \$ 10 bill coins Amount						
_									

I. Monetary Receipts (Section A-I)									
NAME OF COMMITTEE	FILING DUE DATE								
Dan Malloy For Connecticut (CT)	Original 04/13/2009								
G. Interest from Deposits in Authorized Accounts									
Name of Institution		Date Received				Total Amount Received			
Street Address	City		State	Zip Code					

I. MONETARY RECEIPTS (Section A-K)									
NAME OF COMMITTEE				FILING DUE DATE					
Dan Malloy For Connecticut (CT)		Original 04/13/2009							
H. Public Grant Funds Received from the Citizen's Election Fund									
Purpose of Grant: Initial Primary General or Special Election	Supplemental/Independe Primary	nt Expenditure General or Special Election	Date Received	Amount					
Supplemental/Post Election Deficit General or Special Election	Supplemental/Excess Ex Primary	penditure General or Special Election							
			Total of Section	н					

I. MONETARY RECEIPTS (Section A-K)								
NAME OF COMMITTEE FILE								
Dan Malloy For Connecticut (CT)	Origi	nal 04/13/2009						
I. Miscellaneous Monetary Receipts not Considered Contributions								
Name			saction		Amount Received			
Street Address	City	State	Zip Code					
Description								
Total of Section I								

	II. FUNDRAISING	G EVENT ACTIVITY				
NAME OF					FILING DUE	DATE
COMMITTEE Dan Malloy For Co	nnecticut (CT)				Original 04/13	3/2009
	J1. Fundra	ising Event Information				
Fundraising Event # Date of Fundraiser Letter	Description	Location: Street Address	Ci	ity	State	Zip Code
03/24/2009 A	Home Fundraiser	39 Byrnes Ave .	L	itchfield	СТ	
Was this fundraising event ho	osted at a personal residence?		X Yes	No		
Did this fundraiser include ite items donated by an individua	ems donated by a business entity of up to \$100 or al of up to \$50?		Yes	X No		
Was this fundraiser a tag sale	auction, or other sale of donated items?		Yes	X No		
Fundraising Event # Date of Fundraiser Letter	Description	Location: Street Address	Ci	ity	State	Zip Code
03/29/2009 B	Cocktail Event	50 Arnold Dr .	s	stamford	СТ	06905
Was this fundraising event ho	osted at a personal residence?		X Yes	No		
Did this fundraiser include ite items donated by an individua	ems donated by a business entity of up to \$100 or al of up to \$50?		Yes	x No		
Was this fundraiser a tag sale	auction, or other sale of donated items?		Yes	X No		
Fundraising Event # Date of Fundraiser Letter	Description	Location: Street Address	Ci	ity	State	Zip Code
03/30/2009 C	Luncheon Event	20 Glover Ave .	N	lorwalk	СТ	06850
Was this fundraising event ho	osted at a personal residence?		Yes	X No		
Did this fundraiser include ite items donated by an individua	ems donated by a business entity of up to \$100 or al of up to \$50?		Yes	X No		
Was this fundraiser a tag sale	, auction, or other sale of donated items?		Yes	X No		

II. FUNDRAISING EVENT ACTIVITY									
NAME OF COMMITTEE						FILIN	G DUE DATE		
Dan Malloy For Connecticut (CT) Origina									
J2. Proceeds from Tag Sale, Auction, or Other Sale of Donated Items									
Name of the Purchaser Last Name (Individuals ONLY)	First Name	MI	Method of payment: Cash Personal Check Credit/Debit Card				Aggregate Amount of Purchases		
Residential Street Address	City	State	Zip Code	Date Received	Event #				
Items Purchased			•						
Total of Section J2									

	II. FUNDRAISING EVENT ACTI	VIT	Y					
NAME OF COMMITTEE							FILING	DUE DATE
Dan Malloy For Connecticut (CT)							Origin	al 04/13/2009
J3. In-Ki	nd Donations Not Considered Contribut	ions						
Name of the Donor Kevin Creed					Donation Gi		ess Entity	Fair Market Value of Donation
Street Address 39 Byrnes Ave .	City Litchfield		State CT	Zip	Code	Aggregate value for this even		
Description of Donation Food		1	Receive		Event # 032409A			\$45.00
		1	-			Total of Se	ection J3	\$45.00

	III. I	NON	IMO	NETARY RECEIPTS					
NAME OF COMMITTEE								FILING I	DUE DATE
Dan Malloy For Connecticu	t (CT)							Original	04/13/2009
	K.	In-K	ind (Contributions					
Name							Date Receive	ed	Fair Market Value of this Contribution
Street Address		(City		State	Zip Code			
Type of Contributor: Individual Committee	Is Contributor a lobbyist, spouse, or dependent child of a lobbyist?		Yes No	Is contributor a principal of a state contractor? If yes, indicate which branch or branches government the contract is with:		espective state		Yes No Legislative	
Is this contribution associated with a fundi listed in Section J1? If yes, list Event#		Yes No	Des	cription of In-Kind Contribution			Aggregate contr	ibutions	
							Total of	Section K	

III. Non Monetary Receipts											
NAME OF COMMITTEE	FILING DUE DATE										
Dan Malloy For Connecticut (CT)	Original 04/13/2009										
L. Refund	able Deposit to	Telephone Company									
Last Name (Individuals Only)	First Name		Amount of Deposit								
Street Address	City		State	Zip Code							
Name of Telephone company											
Street Address											
Total of Section L											

III. NONMONETA	ARY RECEIPT	'S								
NAME OF COMMITTEE						F.	LING DUE DATE			
Dan Malloy For Connecticut (CT)						О	riginal 04/13/2009			
M. Non-Monetary Receipts of Organization Expenditures Made By Legislative Leadership, Legislative Caucus, and Party Committee										
Name of Committee										
Street Address				Date N	otice Receive	ed	Fair Market Value of Donation			
City	State	Zip Code		Aggreg	ate Donation	S				
Description of Donation		Purpose of E	xpenditure B	C	D	Е				
				То	tal of Secti	on M				

	IV. EXPENDITURES	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 04/13/2009
	N. Expenses Paid By Commi	ttee				•	
Name of Payee Complete Campaigns Street Address 3635 Ruffin Rd Fl 3 Description	City San Diego	State CA	Zip Code 92123-1880	Date of Payment 02/04/2009 Purpose of Expenditure WEB	Method of Payn Check # X Debit Car Event #		Amount
Is this expenditure coordinated with another candidate for which reimbursement is sought? Yes No	r Other Candidate(s) N	ame		Office Sought			\$192.75
Name of Payee				Date of Payment	Method of Payı	ment	Amount
Complete Campaigns				02/08/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	_		
3635 Ruffin Rd Fl 3	San Diego	CA	92123-1880	WEB	X Debit Car	rd	
Description Is this expenditure coordinated with another candidate for	other Candidate(s) N	ame		Office Sought	Event #		
which reimbursement is sought? Yes No	One Candidate(s) is	anie		Office Sought			\$73.13
Name of Payee Complete Campaigns				Date of Payment 02/11/2009	Method of Paya	ment	Amount
Street Address	City	State	Zip Code	Purpose of Expenditure			
3635 Ruffin Rd Fl 3	San Diego	CA	92123-1880	WEB	X Debit Car	d d	
Description					Event#		
Is this expenditure coordinated with another candidate for which reimbursement is sought? Yes No.	Other Candidate(s) N	ame		Office Sought			\$56.25

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 04/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Matthew Gianquinto				02/13/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	_		
215 Oxford St	Hartford	СТ	06105-2249	WAGE	X Debit Car	d	
Description					Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought	l		
Yes X No							\$1,653.84
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Paychex				02/13/2009	_ `		
	City	G	7. 0.1		Check #		
Street Address 11 Riverbend Dr S	Stamford	State CT	Zip Code 06907-2524	Purpose of Expenditure WAGE	X Debit Car	d d	
Description	Stamoru	<u> - </u>	00307 2021	1	Event #		
payroll tax							
Is this expenditure coordinated with another candidate fo	r Other Candidate(s) N	lame		Office Sought			
which reimbursement is sought? Yes							
x _{No}							\$189.37
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Christopher Cooney				02/14/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	1001		
145 Ocean Dr W	Stamford	СТ	06902	RCW	Debit Car	d	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							\$752.58

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 04/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Complete Campaigns				02/15/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure			
3635 Ruffin Rd Fl 3	San Diego	CA	92123-1880	WEB	X Debit Car	d	
Description			•		Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?	r Other Candidate(s) N	ame		Office Sought			
Yes X No							\$285.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Complete Campaigns				02/18/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	Check #		
3635 Ruffin Rd Fl 3	San Diego	CA	92123-1880	WEB	X Debit Car	ď	
Description			<u> </u>	1	Event #		
Is this expenditure coordinated with another candidate for	r Other Candidate(s) N	ame		Office Sought			
which reimbursement is sought? Yes							
X No							\$88.13
Name of Payee				Date of Payment	Method of Payı	ment	Amount
Complete Campaigns				02/22/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u></u>		
3635 Ruffin Rd Fl 3	San Diego	CA	92123-1880	WEB	X Debit Car	ď	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	ame		Office Sought			
Yes X No							\$196.13

	IV. EXPENDITURES	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 04/13/2009
	N. Expenses Paid By Commi	ttee				•	
Name of Payee The Harty Press, Inc. Street Address PO Box 324 Description	City New Haven	State CT	Zip Code 06513-0324	Date of Payment 02/25/2009 Purpose of Expenditure PRNT	Method of Payr X Check # 1060 Debit Car Event #		Amount
Is this expenditure coordinated with another candidate for which reimbursement is sought? Yes No	Other Candidate(s) N	ame		Office Sought			\$1,233.61
Name of Payee				Date of Payment	Method of Payr	ment	Amount
Complete Campaigns				02/26/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	Check#		
3635 Ruffin Rd Fl 3	San Diego	CA	92123-1880	WEB	X Debit Car	·d	
Description	-		•		Event#		
Is this expenditure coordinated with another candidate for which reimbursement is sought? Yes No	Other Candidate(s) N	ame		Office Sought			\$71.25
Name of Payee The Harty Press, Inc.				Date of Payment 02/26/2009	Method of Payi	ment	Amount
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1003</u>		
PO Box 324	New Haven	СТ	06513-0324	PRNT	Debit Car	rd	
Description launch mailing			•	•	Event#		
Is this expenditure coordinated with another candidate for which reimbursement is sought? Yes No	Other Candidate(s) N	ame		Office Sought			\$1,706.60

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 04/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee Donna Callighan's Photo Design Street Address 652 Glenbrook Rd Bldg 3 Description	City Stamford	State CT	Zip Code 06906-1410	Date of Payment 02/26/2009 Purpose of Expenditure A-WEB	Method of Pays X Check # 1006 Debit Car Event #		Amount
Is this expenditure coordinated with another candidate for which reimbursement is sought? Yes No	r Other Candidate(s) N	ame		Office Sought			\$371.00
Name of Payee 341 Studios				Date of Payment 02/26/2009	Method of Paye	ment	Amount
Street Address	City	State	Zip Code	Purpose of Expenditure	1005 Debit Car	rd.	
2 Dogwood Ln Description	Darien	СТ	06820-5511	WEB	Event #	<u>.</u>	
Is this expenditure coordinated with another candidate for which reimbursement is sought? Yes No	r Other Candidate(s) N	lame		Office Sought			\$742.00
Name of Payee Impact Business Technology				Date of Payment 02/26/2009	Method of Paye	ment	Amount
Street Address PO Box 1603	City Fairfield	State CT	Zip Code 06825-6603	Purpose of Expenditure WEB	1004 Debit Car	⁻ d	
Description web site setup				•	Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought? Yes No	r Other Candidate(s) N	lame		Office Sought			\$505.00

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 04/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Matthew Gianquinto			_	02/27/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	_		
215 Oxford St	Hartford	СТ	06105-2249	WAGE	X Debit Car	⁻ d	
Description			•		Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							\$1,653.84
Name of Payee				Date of Payment	Method of Pay	ment	Amount
People's United Bank				02/27/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u> </u>		
350 Bedford St	Stamford	СТ	06901-1741	BNK	X Debit Car	d	
Description			•	•	Event #		
Is this expenditure coordinated with another candidate for	r Other Candidate(s) N	Jame		Office Sought	l .		
which reimbursement is sought? Yes	· · · · · · · · · · · · · · · · · · ·			· ·			
X No							\$0.06
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Paychex				02/27/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure			
11 Riverbend Dr S	Stamford	СТ	06907-2524	WAGE	X Debit Car	^r d	
Description					Event #		
payroll tax							
Is this expenditure coordinated with another candidate for which reimbursement is sought? Yes	r Other Candidate(s) N	lame		Office Sought			
x _{No}							\$189.37

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 04/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Complete Campaigns				03/02/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure]		
3635 Ruffin Rd Fl 3	San Diego	CA	92123-1880	WEB	X Debit Car	·d	
Description			•	•	Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							\$84.38
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Clarke American Checks, Inc.				03/04/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	Clieck#		
10931 Laureate Dr	San Antonio	TX	78249-3350	BNK	X Debit Car	d d	
Description				<u> </u>	Event #		
check book							
Is this expenditure coordinated with another candidate for	r Other Candidate(s) N	Iama		Office Sought			
which reimbursement is sought?	Other Candidate(s) is	anic		Office Sought			
Yes X No							\$74.38
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Complete Campaigns				03/05/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u> </u>		
3635 Ruffin Rd Fl 3	San Diego	CA	92123-1880	WEB	X Debit Car	d	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							\$31.88

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 04/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Complete Campaigns				03/09/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	1		
3635 Ruffin Rd Fl 3	San Diego	CA	92123-1880	WEB	X Debit Car	rd	
Description			•	•	Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought	I		
Yes X No							\$18.75
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Complete Campaigns				03/10/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	Check #		
3635 Ruffin Rd Fl 3	San Diego	CA	92123-1880	WEB	X Debit Car	·d	
Description			!		Event #		
Is this expenditure coordinated with another candidate for	r Other Candidate(s) N	lame		Office Sought			
which reimbursement is sought? Yes	3 3 (v) ·			5 5 g			
x No							\$19.25
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Paychex				03/10/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	1		
11 Riverbend Dr S	Stamford	СТ	06907-2524	BNK	X Debit Car	d	
Description					Event #		
processing fees							
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							\$126.71

	IV. EXPENDITURES	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 04/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee Complete Campaigns Street Address	City	State	Zip Code	Date of Payment 03/16/2009 Purpose of Expenditure	Method of Payr	ment	Amount
3635 Ruffin Rd Fl 3	San Diego	CA	92123-1880	WEB	X Debit Car	d	
Description processing fees	Sun Brego				Event #		
Is this expenditure coordinated with another candidate for Other Candidate(s) Name Office Sought which reimbursement is sought? Yes No							\$93.75
Name of Payee				Date of Payment	Method of Payr	ment	Amount
The Harty Press, Inc.				03/18/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	1051		
PO Box 324	New Haven	СТ	06513-0324	PRNT	Debit Car	d	
Description printing & ship			•	•	Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought? Yes	r Other Candidate(s) N	ame		Office Sought			\$4,241.99
X No				ı	1		\$4,241.99
Name of Payee				Date of Payment	Method of Payr	ment	Amount
Complete Campaigns				03/19/2009	Check #		
Street Address	City	State CA	Zip Code 92123-1880	Purpose of Expenditure WEB	X Debit Car	rd	
3635 Ruffin Rd Fl 3 Description	San Diego	CA	92123-1660	WEB	Event #		
Description					Event#		
Is this expenditure coordinated with another candidate for which reimbursement is sought? Yes	r Other Candidate(s) N	ame		Office Sought			\$242.50
x No							φ2π2.30

	IV. EXPENDITURE	s					
NAME OF COMMITTEE						FILI	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 04/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee				Date of Payment	Method of Pays	ment	Amount
Complete Campaigns		<u> </u>		03/23/2009	Check #		
Street Address 3635 Ruffin Rd Fl 3	City San Diego	State CA	Zip Code 92123-1880	Purpose of Expenditure OVHD	X Debit Car	d	
Description			•	•	Event #		
monthy fees							
this expenditure coordinated with another candidate for Other Candidate(s) Name Office Sought hich reimbursement is sought?							
Yes X No							\$750.00
Name of Payee				Date of Payment	Method of Payment		Amount
Complete Campaigns				03/24/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u> </u>		
3635 Ruffin Rd Fl 3	San Diego	CA	92123-1880	WEB	X Debit Car	d	
Description		-	•		Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	other Candidate(s) N	lame		Office Sought	-		
Yes X No							\$293.75
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Katharine S. Urbank				03/25/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	1052		
227 Brookdale Rd	Stamford	СТ	06903-4118	RCW	Debit Car	d	
Description					Event #		
expense report							
Is this expenditure coordinated with another candidate for which reimbursement is sought? Yes	r Other Candidate(s) N	lame		Office Sought			4145 40
X No							\$145.40

	IV. EXPENDITURE	S						
NAME OF COMMITTEE						FILI	NG DUE DATE	
Dan Malloy For Connecticut (CT)						Origi	nal 04/13/2009	
	N. Expenses Paid By Committee							
Name of Payee Date of Payment Mr. Thomas A. Sheridan 03/25/2009					Method of Pays	ment	Amount	
Street Address 318 Great Neck Rd Description	City Waterford	State CT	Zip Code 06385-3819	Purpose of Expenditure	X Debit Car	rd		
Description					Event#			
Is this expenditure coordinated with another candidate for which reimbursement is sought? Yes No	Yes						\$100.00	
Name of Payee				Date of Payment 03/26/2009	Method of Payment		Amount	
Complete Campaigns	Cit.	a	7: 6.1		Check #			
Street Address 3635 Ruffin Rd Fl 3	City San Diego	State CA	Zip Code 92123-1880	Purpose of Expenditure WEB	X Debit Car	d d		
Description	Sun Brege			l	Event #			
Is this expenditure coordinated with another candidate for which reimbursement is sought? Yes	r Other Candidate(s) N	ame		Office Sought			4240.25	
X No					1		\$310.25	
Name of Payee				Date of Payment	Method of Pay	ment	Amount	
Matthew Gianquinto				03/27/2009	Check #			
Street Address 215 Oxford St	City Hartford	State CT	Zip Code 06105-2249	Purpose of Expenditure WAGE	X Debit Car	rd		
Description St	Hartford	СТ	00103-2249	WAGL	Event #			
					Event "			
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	ame		Office Sought				
X No							\$1,653.84	

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 04/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee Paychex				Date of Payment 03/27/2009	Method of Pay	ment	Amount
	a:				Check #		
Street Address 11 Riverbend Dr S	City Stamford	State	Zip Code 06907-2524	Purpose of Expenditure WAGE	X Debit Car	·d	
Description Description	Stamoru	<u> </u>	00307 2321		Event #		
this expenditure coordinated with another candidate for Other Candidate(s) Name Office Sough nich reimbursement is sought?							
Yes X No							\$189.37
Name of Payee				Date of Payment	Method of Payment		Amount
Paychex				03/27/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure			
11 Riverbend Dr S	Stamford	СТ	06907-2524	BNK	X Debit Car	d	
Description			•		Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	or Other Candidate(s) N	lame		Office Sought			
Yes X No							\$100.11
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Dan Malloy For Connecticut				03/29/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1054</u>		
PO Box 110073	Stamford	СТ	06911-0073	PETTY	Debit Car	rd	
Description					Event #		
petty cash							
Is this expenditure coordinated with another candidate for which reimbursement is sought? Yes No	r Other Candidate(s) N	lame		Office Sought			\$100.00
No No							

	IV. EXPENDITURES	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 04/13/2009
	N. Expenses Paid By Commi	ttee				-	
Name of Payee Susan M Vogel Street Address 10 Linda Ln Description	City Darien	State CT	Zip Code 06820-2508	Date of Payment 03/29/2009 Purpose of Expenditure RCW	Method of Payr X Check # 1053 Debit Car Event #		Amount
Is this expenditure coordinated with another candidate for Other Candidate(s) Name Office Sought which reimbursement is sought? Yes No							\$261.99
Name of Payee Complete Campaigns				Date of Payment 03/30/2009	Method of Payı Check #	ment	Amount
Street Address 3635 Ruffin Rd Fl 3	City San Diego	State	Zip Code 92123-1880	Purpose of Expenditure WEB	X Debit Car	d	
Description Is this expenditure coordinated with another candidate for	City Continue			Office County	Event #		
which reimbursement is sought? Yes No	Other Candidate(s) N	ame		Office Sought			\$211.25
Name of Payee Impact Business Technology				Date of Payment 03/31/2009	Method of Payı	ment	Amount
Street Address PO Box 1603	City Fairfield	State CT	Zip Code 06825-6603	Purpose of Expenditure WEB	1059 Debit Car	d	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought? Yes No	Other Candidate(s) N	ame		Office Sought			\$464.50

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 04/13/2009
	N. Expenses Paid By Committee						
Name of Payee Matthew Gianquinto Street Address	City	State	Zip Code	Date of Payment 03/31/2009 Purpose of Expenditure	Method of Pays X Check # 1056		Amount
215 Oxford St	Hartford	СТ	06105-2249	RCW	Debit Car	rd	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought? Yes No	r Other Candidate(s) N	lame		Office Sought			\$813.75
Name of Payee				Date of Payment	Method of Payment		Amount
Mr. Clayton D Fowler		<u> </u>		03/31/2009	X Check # 1065		
Street Address 215 Upper Shad Rd	City	State NY	Zip Code 10576-2237	Purpose of Expenditure REF	Debit Car	rd	
Description	Pound Ridge	INI	10370-2237	KLI	Event #		
refunded contribution							
Is this expenditure coordinated with another candidate for which reimbursement is sought? Yes	or Other Candidate(s) N	lame		Office Sought			
x _{No}							\$375.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Desiree M Fowler	Γ			03/31/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1066</u>		
215 Upper Shad Rd	Pound Ridge	NY	10576-2237	REF	Debit Car	rd	
Description refunded contribution					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
X No							\$375.00

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 04/13/2009
	N. Expenses Paid By Committee						
Name of Payee The Harty Press, Inc. Street Address	City	State	Zip Code	Date of Payment 03/31/2009 Purpose of Expenditure	Method of Pays X Check #		Amount
PO Box 324	New Haven	СТ	06513-0324	PRNT	Debit Car	·d	
Description					Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought? Yes No	Yes						\$401.30
Name of Payee				Date of Payment	Method of Payment		Amount
Ms. Ellen P. Camhi	<u> </u>	ı —	1	03/31/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	1058		
50 Arnold Dr	Stamford	СТ	06905-1301	FNDR	Debit Car	d	
Description					Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought? Yes No	r Other Candidate(s) N	lame		Office Sought			\$661.66
No No				Γ	1		
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Mr. Irving Goldblum				03/31/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1062</u>		
76 N Lake Dr	Stamford	СТ	06903-1012	REF	Debit Car	^r d	
Description returned contribution			•		Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought? Yes	r Other Candidate(s) N	lame		Office Sought	•		
X No							\$375.00

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 04/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Ms. Marilyn F. Goldblum		Π		03/31/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	1064	vd.	
76 N Lake Dr	Stamford	СТ	06903-1012	REF		u	
Description returned contribution					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	- (/						
Yes X No							\$375.00
Name of Payee				Date of Payment	Method of Payment		Amount
Complete Campaigns	•		1	03/31/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure			
3635 Ruffin Rd Fl 3	San Diego	CA	92123-1880	WEB	X Debit Car	d .	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought	<u> </u>		
Yes X No							\$498.75
Name of Payee People's United Bank				Date of Payment 03/31/2009	Method of Paye	ment	Amount
Street Address	City	State	Zip Code	Purpose of Expenditure			
350 Bedford St	Stamford	СТ		BNK	X Debit Car	d d	
Description			<u> </u>	!	Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought? Yes	r Other Candidate(s) N	ame		Office Sought			* E0.02
X No							\$58.03

	IV. EXPENDITURES	S							
NAME OF COMMITTEE						FILI	NG DUE DATE		
Dan Malloy For Connecticut (CT)						Origi	nal 04/13/2009		
N. Expenses Paid By Committee									
Name of Payee City Of Stamford				Date of Payment 03/31/2009	Method of Pays	ment	Amount		
Street Address 888 Washington Blvd	City Stamford	State CT	Zip Code 06901-2902	Purpose of Expenditure	1069 Debit Car	rd			
Description reimbursement for city car					Event #				
Is this expenditure coordinated with another candidate for which reimbursement is sought? Yes No	r Other Candidate(s) N	ame		Office Sought			\$970.43		
					Total of Sec	ction N	\$24,377.88		

	IV.	EXPENDITURES						
NAME OF COMMITTE	EE .						FILING	DUE DATE
Dan Malloy For Conn	ecticut (CT)						Origina	1 04/13/2009
	O. Cam	paign Expenses Paid By Candidate						
Name of Payee Hon. Dannel P. Malloy				Date of Payme 03/31/200		Is Reimburg Claimed?		Amount
Street Address 277 Ocean Dr E		City Stamford	State CT	Zip Code 06902-82	19	X Yes No	S	
Purpose of Expenditure OVHD	Description				Event #	ŧ		\$189.00
						Total of	Section O	\$189.00

		IV. EXPENDITURES					
NAME OF COMMITTEE	FILING DUE DATE						
Dan Malloy For Connection	Ori	Original 04/13/2009					
	•						
Name of Issuing Institution			Type of Credit C	ard:			
Visa Master Card						Ameri	ican
			Other				
Name of Vendor					Date of Transaction		Amount
Street Address		City	State	Zip Code			
Purpose of Expenditure	Description		<u> </u>	!	Event #		
					Total of Section	ı P	

IV. EXPENDITURES											
NAME OF CO	MMITTEE				FILING DU	JE DATE					
Dan Malloy For Connecticut (CT) Original 04/13/2											
Q. Expenses Incurred By Committee but Not Paid During this Period											
Name of Creditor											
Street Address		City		State	Zip Code	(Estimate or Actual)					
Purpose of Expenditure	Description										
Is this expenditure of which reimbursement Yes	oordinated with another candidate for Other Candidate is sought?	ate(s) Name	Office Sought								
				Total of	Section Q						

IV. E	XPENDITURES						
NAME OF COMMITTEE					FILI	NG DUE DATE	
Dan Mallov For Connecticut (CT)					Origin	nal 04/13/2009	
R. Itemization of Reimbursements to Committee Workers and Consultants							
Name of Worker/Consultant Christopher Cooney Secondary Payee		Date of Payment 02/14/2009 Method of Pay X Check # 1001		1001		Amount	
The Harty Press, Inc.		POST		Debit Card	1		
Street Address PO Box 324	City New Haven		State CT	Zip Code 06513-0324	1		
Is this expenditure coordinated with another candidate for Other Candi which reimbursement is sought?	date(s) Name	Office	Sought	Event #			
Yes X No						\$752.58	
Name of Worker/Consultant Katharine S. Urbank		Date of P		Method of Paym	nent	Amount	
Secondary Payee Staples		Purpose of Expenditure OFFICE		diture 1052 Debit Can			
Street Address 51 Richards Ave	City Norwalk		State CT	Zip Code 06854-2309)		
Description expense report				Event#			
Is this expenditure coordinated with another candidate for which reimbursement is sought? Yes No	date(s) Name	Office	Sought			\$41.99	

IV. E	XPENDITURES					
NAME OF COMMITTEE					FILI	NG DUE DATE
Dan Malloy For Connecticut (CT)					Origin	nal 04/13/2009
R. Itemization of Reimburs	ements to Committee Work	ers and	Consultants			
Name of Worker/Consultant Katharine S. Urbank Secondary Payee High Ridge Copy	03/3 Purpo		Date of Payment 03/25/2009 Purpose of Expenditure POST		nent	Amount
Street Address 1009 High Ridge Rd	City Stamford	1	State CT	Zip Code 06905-1602		
Description expense report Is this expenditure coordinated with another candidate for Other Cand	idate(s) Name	Office	Sought	Event #		
which reimbursement is sought? Yes No						\$42.00
Name of Worker/Consultant Katharine S. Urbank		Date of P. 03/25/		Method of Paym	nent	Amount
Secondary Payee High Ridge Copy		Purpose of Expenditure POST		1052 Debit Card		
Street Address 1009 High Ridge Rd	City Stamford		State CT	Zip Code 06905-1602	2	
Description expense report				Event#		
Is this expenditure coordinated with another candidate for Which reimbursement is sought? Yes No	idate(s) Name	Office	Sought			\$43.26

IV. E	EXPENDITURES							
NAME OF COMMITTEE					FILI	NG DUE DATE		
Dan Mallov For Connecticut (CT)					Origin	nal 04/13/2009		
R. Itemization of Reimburs	ements to Committee Work	ers and	Consultants					
Name of Worker/Consultant Katharine S. Urbank Secondary Payee Pro Park	Date of Payment 03/25/2009 Method of Paym X Check # 1052 Purpose of Expenditure TDVI		03/25/2009 Purpose of Expenditure		03/25/2009			Amount
Street Address 1 Union Pl	City Hartford	1	State CT	Zip Code 06103-1490		•		
Description expense report Is this expenditure coordinated with another candidate for which reimbursement is sought? Other Candidate for which reimbursement is sought?	lidate(s) Name	Office	Sought	Event#				
Yes No						\$9.00		
Name of Worker/Consultant Katharine Urbank		Date of P. 03/25/		Method of Payn	nent	Amount		
Secondary Payee Name Secure		Purpose o	of Expenditure	1052 Debit Card				
Street Address 13861 Sunrise Valley Dr .	City Herndon		State VA	Zip Code 20171				
Is this expenditure coordinated with another candidate for Other Cand which reimbursement is sought?	lidate(s) Name	Office	Sought	Event #				
Yes X No						\$9.15		

IV. E	XPENDITURES					
NAME OF COMMITTEE					FII II	NG DUE DATE
Dan Malloy For Connecticut (CT)						nal 04/13/2009
Dan Manov For Connecticut (C1)					Oligii	13/2007
R. Itemization of Reimburs	ements to Committee Wor	kers and	Consultants			
Name of Worker/Consultant		Date of P	ayment	Method of Payment		Amount
Susan M Vogel		03/29/	2009	X Check #		
Secondary Payee Staples		Purpose of Expenditure OFFICE		1053 Debit Card	i	
Street Address	City	1 020.	State	Zip Code		
51 Richards Ave	Norwalk		СТ	06854-2309	9	
Description				Event #		
Is this expenditure coordinated with another candidate for Other Cand which reimbursement is sought?	idate(s) Name	Office	Sought			
Yes						1051.00
X No				+		\$261.99
Name of Worker/Consultant		Date of P	ayment	Method of Paym	nent	Amount
Ms. Ellen P. Camhi		03/31/	2009	X Check #		
Secondary Payee		Purpose o	of Expenditure	1058		
Bev Max		FOOD	•	Debit Card		
Street Address 835 E Main St	City Stamford	•	State CT	Zip Code 06902-3916	5	
Description				Event #		•
				Event#		
Is this expenditure coordinated with another candidate for Other Cand	idate(s) Name	Office	Sought	1		
which reimbursement is sought?						
Yes X No						\$281.83
						· · · · · · · · · · · · · · · · · · ·

IV. E	XPENDITURES						
NAME OF COMMITTEE					FILI	NG DUE DATE	
Dan Mallov For Connecticut (CT)					Origin	nal 04/13/2009	
R. Itemization of Reimbursements to Committee Workers and Consultants							
Name of Worker/Consultant Ms. Ellen P. Camhi Secondary Payee Costco Wholesale Club	03/31/2009		Method of Paym X Check # 1058 Debit Care		Amount		
Street Address 799 Connecticut Ave	City Norwalk	l l	State CT	Zip Code 06854-1615			
Is this expenditure coordinated with another candidate for Other Cand which reimbursement is sought?	idate(s) Name	Office	Sought	Event #			
Yes X No						\$316.52	
Name of Worker/Consultant Ms. Ellen P. Camhi		Date of P. 03/31/		009 X Check #		Amount	
Secondary Payee A&P		Purpose o	f Expenditure				
Street Address 1201 High Ridge Rd	City Stamford		State CT	Zip Code 06905-1214	1		
Description				Event#			
Is this expenditure coordinated with another candidate for Which reimbursement is sought? Yes No	idate(s) Name	Office	Sought			\$63.31	

IV. EXPENDITURES							
NAME OF COMMITTEE					FILI	NG DUE DATE	
Dan Mallov For Connecticut (CT)					Origin	nal 04/13/2009	
R. Itemization of Reimbursements to Committee Workers and Consultants							
Name of Worker/Consultant Matthew Gianquinto Secondary Payee Sprint	Date of Payment 03/31/2009 Purpose of Expenditure OVHD		Method of Paym X Check # 1056 Debit Card		Amount		
Street Address 307 Connecticut Ave	City Norwalk		State CT	Zip Code 06854-1805			
Is this expenditure coordinated with another candidate for which reimbursement is sought?	didate(s) Name	Office	Sought	Event#			
Yes X No						\$694.57	
Name of Worker/Consultant Matthew Gianquinto			Date of Payment 03/31/2009 Method of Payment X Check # 1056 Purpose of Expenditure OFFICE Debit Card		ent	Amount	
Secondary Payee Staples	_				i		
Street Address 51 Richards Ave	City Norwalk		State CT	Zip Code 06854-2309)		
Description Is this expenditure coordinated with another candidate for Other Can	didate(s) Name	Office	Sought	Event#			
which reimbursement is sought? Yes No	() " ·					\$95.17	

IV. E	XPENDITURES					
NAME OF COMMITTEE					FILI	NG DUE DATE
Dan Mallov For Connecticut (CT)					Origin	nal 04/13/2009
R. Itemization of Reimburse	ements to Committee Work	ers and	Consultants			
Name of Worker/Consultant Matthew Gianquinto		Date of Pa		Method of Paym	nent	Amount
Secondary Payee Walmart		Purpose of Expenditure OFFICE		1056 Debit Card		
Street Address 1155 Waterford Pkwy N	City Waterford		State CT	Zip Code 06385		
Description				Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought? Yes No	date(s) Name	Office	Sought			\$24.01
				Total of Se	ection R	\$2,635.38

IV. EXPE	ENDITURES				
NAME OF COMMITTEE				FII	LING DUE DATE
Dan Malloy For Connecticut (CT)				Ori	ginal 04/13/2009
S. Surplus Distril	bution of Equipment and Furniture				
Name of Recipient					Original Purchase Amount of Item
Street Address	City	State	Zip Code		
Description					
			Total of Section	on S	