

SEEC FORM 20Itemized Campaign Finance Disclosure Statement
CONNECTICUT STATE ELECTIONS ENFORCEMENT COMMISSION

Rev. 1/08



Electronic Filing

Office Use Only

Page 1 of 141

SUMMARY PAGE

1. NAME OF COMMITTEE				
South Windsor Republican Town Committee				
2. TREASURER NAME				
Title	First	MI	Last	Suffix
	Richard	J.	Cullen	
3. TREASURER ADDRESS				
Street Address	City	State	Zip Code	
218 Lisa Dr	South Windsor	CT	06074	
4. ELECTION DATE	5. OFFICE SOUGHT (if applicable)			6. DISTRICT CODE (if applicable)
7. CANDIDATE NAME				
Title	First	MI	Last	Suffix
8. TYPE OF REPORT				
July 10 Filing - Amendment				
9. PERIOD COVERED				
	Beginning Date		Ending Date	
	04/01/2011	thru	06/30/2011	
10. CERTIFICATION				
<input checked="" type="checkbox"/>	I hereby certify and state, under penalties of false statement, that all of the information set forth on this Itemized Campaign Finance Disclosure Statement for the period covered is true, accurate and complete.			
Electronic Filing	Richard Cullen	09/22/2011 6:58:05 am		
SIGNATURE	PRINT NAME OF THE SIGNER	DATE 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 20

Itemized Campaign Finance Disclosure Statement

CONNECTICUT STATE ELECTIONS ENFORCEMENT COMMISSION

Rev. 1/08

**SUMMARY PAGE
TOTALS**

NAME OF COMMITTEE	FILING DUE DATE	
South Windsor Republican Town Committee	Amended 07/11/2011	
	COLUMN A This Period	COLUMN B Aggregate
11. Balance on hand January 1 of current year for Ongoing and Party Committees OR Balance on hand from day Committee was formed for all other		\$12,158.43
12. Balance on hand at the beginning of Reporting Period	\$9,796.91	
13. Contributions received from Individuals (Section A and B)	\$12,880.00	\$12,952.00
14. Receipts from Other Committees (Sections C1 + C2)	\$0.00	\$0.00
15. Other Monetary Receipts (Section D-K)	\$1,867.50	\$1,867.50
16a. Total Small Food and Beverage Receipts at Fair (Section L1)	\$15,803.00	\$15,803.00
16b. Total Proceeds from Small purchases at Tag Sales, Auctions or Other Sales (Section L2)	\$0.00	\$0.00
16c. Total Purchases of Advertising in a Program Book (Section L3)	\$2,050.00	\$2,050.00
17. Total Monetary Receipts (add totals for lines 13-16c)	\$32,600.50	\$32,672.50
18. Subtotals (add totals in line 12 + line 17 in Column A and in line 11 + 17 in Column B)	\$42,397.41	\$44,830.93
19. Expenses Paid by Committee (Section P)	\$20,256.18	\$22,689.70
20. Balance on hand at close of Reporting Period (Subtract line 19 from line 18)	\$22,141.23	\$22,141.23
21. In-Kind Donations not Considered Contributions Received (Section L4)	\$80.00	\$80.00
22. In-Kind Contributions Received (Section M)	\$335.00	\$335.00
23. Refundable Deposit to Telephone Company (Section N)	\$0.00	\$0.00
24. Receipts of Organization Expenditures (Section O)	\$0.00	\$0.00
25. Beginning Loan Balance	\$0.00	\$0.00
25a. + Loans Received (Section D)	\$0.00	\$0.00
25b. + Interest and Penalties on Loan(s)	\$0.00	\$0.00
25c. - Payments on Loan(s)	\$0.00	\$0.00
25d. Total Outstanding Loan Amount	\$0.00	\$0.00
26. Campaign Expenses Paid By Candidate (Section Q)	\$0.00	\$0.00
27. Expenses Incurred on Committee Credit Card (Section R)	\$0.00	\$0.00
28. Expenses Incurred by Committee During this Period but Not Paid (Section S)	\$1,479.28	
28a. Total Outstanding Expenses Incurred by Committee still Unpaid (Section S)	\$1,479.28	

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE							FILING DUE DATE		
South Windsor Republican Town Committee							Amended 07/11/2011		
A. Total Contributions from Small Contributors-Received this Period ONLY									
<i>(See instructions for definition of Small Contributor)</i>							Subtotal Section		
							\$0.00		
B. Itemized Contributions from Individuals									
Last Name Koboski		First Name Philip		MI	Name of Employer			Amount of Contribution	
Residential Street Address 141 Woodland Dr		City South Windsor		State CT	Zip Code 06074	Principal Occupation			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No							
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative					<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				Date Received 04/01/2011		Aggregate Contribution \$48.00			\$48.00
Last Name Daugherty		First Name Kathleen		MI	Name of Employer RGIS			Amount of Contribution	
Residential Street Address 12 Roy Rd		City South Windsor		State CT	Zip Code 06074	Principal Occupation Adm Asst			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No							
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative					<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				Date Received 04/01/2011		Aggregate Contribution \$48.00			\$48.00
Last Name Graham		First Name Katie		MI	Name of Employer Town of So. Windsor			Amount of Contribution	
Residential Street Address 246 Quarry Brook Dr		City South Windsor		State CT	Zip Code 06074	Principal Occupation Deputy Registrar			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No							
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative					<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				Date Received 04/01/2011		Aggregate Contribution \$80.00			\$80.00

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Mirek	First Name Carolyn	MI	Name of Employer			Amount of Contribution
Residential Street Address 48 Sele Dr .		City South Windsor	State CT	Zip Code 06066	Principal Occupation	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event #		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:				
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 04/29/2011	Aggregate Contribution \$104.00	\$24.00	
Last Name Mirek	First Name Carolyn	MI	Name of Employer Benco Dental			Amount of Contribution
Residential Street Address 48 Sele Dr .		City South Windsor	State CT	Zip Code 06066	Principal Occupation Sales Rep	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event #		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:				
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 04/29/2011	Aggregate Contribution \$104.00	\$80.00	
Last Name Carey	First Name Carolyn	MI	Name of Employer			Amount of Contribution
Residential Street Address 145 Abbe Rd		City South Windsor	State CT	Zip Code 06074	Principal Occupation	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event #		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:				
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 04/29/2011	Aggregate Contribution \$24.00	\$24.00	

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Davis	First Name Michael	MI	Name of Employer Desijaz Cards & Gifts			Amount of Contribution \$80.00
Residential Street Address 535 Norwich Rd	City Plainfield	State CT	Zip Code 06374	Principal Occupation Sales		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 04/29/2011	Aggregate Contribution \$80.00		
Last Name Turek	First Name John	MI	Name of Employer			Amount of Contribution \$50.00
Residential Street Address 9 Circle Dr	City Windsor Locks	State CT	Zip Code 06096	Principal Occupation		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 04/29/2011	Aggregate Contribution \$50.00		
Last Name Paine	First Name Nancy	MI	Name of Employer			Amount of Contribution \$50.00
Residential Street Address 61 Old Meadow Pln	City Simsbury	State CT	Zip Code 06070	Principal Occupation		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 04/29/2011	Aggregate Contribution \$50.00		

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Merrow	First Name Joan	MI	Name of Employer			Amount of Contribution
Residential Street Address 141 Huntington Dr		City Vernon		State CT	Zip Code 06066	Principal Occupation
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # 06112011A <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				Date Received 04/29/2011	Aggregate Contribution \$40.00	\$40.00
Last Name Paquette	First Name Theresa	MI	Name of Employer Retired			Amount of Contribution
Residential Street Address 10 Frederic St		City Springfield		State MA	Zip Code 01119	Principal Occupation Retired
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # 06112011A <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				Date Received 04/29/2011	Aggregate Contribution \$60.00	\$60.00
Last Name Kronenberger	First Name Gael	MI	Name of Employer			Amount of Contribution
Residential Street Address 9 Fiano Rd		City Bolton		State CT	Zip Code 06043	Principal Occupation
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # 06112011A <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				Date Received 04/29/2011	Aggregate Contribution \$50.00	\$50.00

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Aylward	First Name Tanya	MI	Name of Employer			Amount of Contribution	
Residential Street Address 19 Great Hill Rd		City East Hartford		State CT	Zip Code 06108		Principal Occupation
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				Date Received 04/29/2011	Aggregate Contribution \$40.00		\$40.00
Last Name Skaff	First Name Katherine	MI	Name of Employer			Amount of Contribution	
Residential Street Address 1750 Ellington Rd		City South Windsor		State CT	Zip Code 06074		Principal Occupation
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				Date Received 04/29/2011	Aggregate Contribution \$40.00		\$40.00
Last Name Fiohman	First Name Stuart	MI	Name of Employer Balloons Etc			Amount of Contribution	
Residential Street Address 15 Brandywine Dr		City Westerly		State RI	Zip Code 02891		Principal Occupation Sales
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Method of Contribution <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input checked="" type="checkbox"/> Money Order				Date Received 04/29/2011	Aggregate Contribution \$60.00		\$60.00

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name DeFlaviis	First Name Shirley	MI	Name of Employer Retired			Amount of Contribution
Residential Street Address 45 Skinner Hill Rd		City Andover	State CT	Zip Code 06232	Principal Occupation Retired	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 04/29/2011	Aggregate Contribution \$80.00	\$80.00	
Last Name Baker	First Name Susan	MI	Name of Employer			Amount of Contribution
Residential Street Address 45 Rhonda Dr		City Mystic	State CT	Zip Code 06355	Principal Occupation	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 04/29/2011	Aggregate Contribution \$50.00	\$50.00	
Last Name Vallides	First Name Debra	MI	Name of Employer			Amount of Contribution
Residential Street Address 295 Silver St		City Agauam	State MA	Zip Code 01001	Principal Occupation	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 04/29/2011	Aggregate Contribution \$40.00	\$40.00	

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Colonna		First Name Ulrike		MI	Name of Employer			Amount of Contribution
Residential Street Address 11 Cooper St		City Springfield		State MA	Zip Code 01108	Principal Occupation		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000?			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u>		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				Date Received 04/29/2011		Aggregate Contribution \$50.00		
Last Name Balokosiabi		First Name Thomas		MI	Name of Employer			Amount of Contribution
Residential Street Address 30 B Thompson Ct		City Enfield		State CT	Zip Code 06082	Principal Occupation		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000?			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u>		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	
Method of Contribution <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input checked="" type="checkbox"/> Money Order				Date Received 04/29/2011		Aggregate Contribution \$40.00		
Last Name Gowdy		First Name Rosemary		MI	Name of Employer Retired			Amount of Contribution
Residential Street Address 352 Valley View Dr		City Westfield		State MA	Zip Code 01085	Principal Occupation Retired		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000?			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u>		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				Date Received 04/29/2011		Aggregate Contribution \$60.00		

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Cribben		First Name Janice		MI	Name of Employer		Amount of Contribution	
Residential Street Address 39 Duncaster Ln		City Vernon		State CT	Zip Code 06066	Principal Occupation		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No					Aggregate Contribution \$40.00	\$40.00
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order					Date Received 04/29/2011			
Last Name Pooler		First Name Nancy		MI	Name of Employer		Amount of Contribution	
Residential Street Address 96 Mayflower Rd		City Springfield		State MA	Zip Code 01118	Principal Occupation		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No					Aggregate Contribution \$40.00	\$40.00
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order					Date Received 04/29/2011			
Last Name Ross		First Name Doris		MI	Name of Employer		Amount of Contribution	
Residential Street Address 18 Kipling St		City Springfield		State MA	Zip Code 01118	Principal Occupation		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No					Aggregate Contribution \$50.00	\$50.00
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order					Date Received 04/29/2011			

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Kleinman	First Name Sara	MI	Name of Employer			Amount of Contribution
Residential Street Address 6 North Rd		City East Granby	State CT	Zip Code 06026	Principal Occupation	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 04/29/2011	Aggregate Contribution \$50.00		\$50.00
Last Name MacDonald	First Name Elizabeth	MI	Name of Employer			Amount of Contribution
Residential Street Address 670 Rye St		City South Windsor	State CT	Zip Code 06074	Principal Occupation	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 05/09/2011	Aggregate Contribution \$48.00		\$48.00
Last Name Streeter	First Name Lincoln	MI	Name of Employer			Amount of Contribution
Residential Street Address 56 Bramblebrae		City South Windsor	State CT	Zip Code 06074	Principal Occupation	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 05/09/2011	Aggregate Contribution \$24.00		\$24.00

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Mabey	First Name Richard	MI J	Name of Employer West Hartford Schools			Amount of Contribution
Residential Street Address 30 Dogwood Ln		City South Windsor	State CT	Zip Code 06074	Principal Occupation Teacher	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 05/09/2011	Aggregate Contribution \$128.00	\$80.00	
Last Name Delnicki	First Name Thomas	MI	Name of Employer			Amount of Contribution
Residential Street Address 130 Felt Rd		City South Windsor	State CT	Zip Code 06074	Principal Occupation	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 05/09/2011	Aggregate Contribution \$48.00	\$48.00	
Last Name Peterson	First Name Mark	MI	Name of Employer			Amount of Contribution
Residential Street Address 33 Eagle Run		City South Windsor	State CT	Zip Code 06074	Principal Occupation	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 05/09/2011	Aggregate Contribution \$24.00	\$24.00	

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Etter	First Name Mary	MI	Name of Employer			Amount of Contribution \$48.00
Residential Street Address 36 Auston Cir	City South Windsor	State CT	Zip Code 06074	Principal Occupation		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000?			<input type="checkbox"/> Yes <input type="checkbox"/> No		
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 05/09/2011	Aggregate Contribution \$48.00		
Last Name Samsel	First Name Theresa	MI	Name of Employer			Amount of Contribution \$24.00
Residential Street Address 304 Abbe Road Ext	City South Windsor	State CT	Zip Code 06074	Principal Occupation		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000?			<input type="checkbox"/> Yes <input type="checkbox"/> No		
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 05/09/2011	Aggregate Contribution \$24.00		
Last Name Jodice	First Name William	MI	Name of Employer			Amount of Contribution \$48.00
Residential Street Address 32 Green Ln	City South Windsor	State CT	Zip Code 06074	Principal Occupation		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000?			<input type="checkbox"/> Yes <input type="checkbox"/> No		
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 05/09/2011	Aggregate Contribution \$48.00		

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Ferrero		First Name Frank		MI	Name of Employer			Amount of Contribution
Residential Street Address 801 Dzen Way			City South Windsor	State CT	Zip Code	Principal Occupation		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000?			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event #		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	
Method of Contribution					Date Received	Aggregate Contribution	\$24.00	
<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check	<input type="checkbox"/> Credit/Debit Card	<input type="checkbox"/> Payroll Deduction	<input type="checkbox"/> Money Order	05/09/2011	\$24.00	\$24.00	
Last Name Kelley		First Name Carol		MI	Name of Employer			Amount of Contribution
Residential Street Address 49 Rosemary Ln			City South Windsor	State CT	Zip Code 06074	Principal Occupation		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000?			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event #		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	
Method of Contribution					Date Received	Aggregate Contribution	\$24.00	
<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check	<input type="checkbox"/> Credit/Debit Card	<input type="checkbox"/> Payroll Deduction	<input type="checkbox"/> Money Order	05/09/2011	\$24.00	\$24.00	
Last Name Normen		First Name Nancy		MI	Name of Employer Retired			Amount of Contribution
Residential Street Address 158 Homestead Dr			City South Windsor	State CT	Zip Code 06074	Principal Occupation Retired		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000?			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event #		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	
Method of Contribution					Date Received	Aggregate Contribution	\$104.00	
<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check	<input type="checkbox"/> Credit/Debit Card	<input type="checkbox"/> Payroll Deduction	<input type="checkbox"/> Money Order	05/09/2011	\$104.00	\$24.00	

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Zaino	First Name Lisa	MI	Name of Employer			Amount of Contribution
Residential Street Address 28 Stephanie Ln		City South Windsor	State CT	Zip Code 06074	Principal Occupation	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 05/09/2011	Aggregate Contribution \$24.00		\$24.00
Last Name Mabey	First Name Richard	MI J	Name of Employer West Hartford Schools			Amount of Contribution
Residential Street Address 30 Dogwood Ln		City South Windsor	State CT	Zip Code 06074	Principal Occupation Teacher	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 05/09/2011	Aggregate Contribution \$128.00		\$48.00
Last Name Samsel	First Name Theresa	MI	Name of Employer			Amount of Contribution
Residential Street Address 304 Abbe Road Ext		City South Windsor	State CT	Zip Code 06074	Principal Occupation	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 05/13/2011	Aggregate Contribution \$48.00		\$24.00

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Loukellis	First Name Athena	MI	Name of Employer			Amount of Contribution
Residential Street Address 135 Ridgefield Dr	City South Windsor	State CT	Zip Code 06074	Principal Occupation		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 05/13/2011	Aggregate Contribution \$48.00		\$48.00
Last Name Cullen	First Name Richard	MI	Name of Employer			Amount of Contribution
Residential Street Address 218 Lisa Dr	City South Windsor	State CT	Zip Code 06074	Principal Occupation		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 05/13/2011	Aggregate Contribution \$128.00		\$48.00
Last Name Cullen	First Name Richard	MI	Name of Employer Retired			Amount of Contribution
Residential Street Address 218 Lisa Dr	City South Windsor	State CT	Zip Code 06074	Principal Occupation Retired		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 06112011A		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 05/13/2011	Aggregate Contribution \$128.00		\$80.00

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE

FILING DUE DATE

South Windsor Republican Town Committee

Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Borgida		First Name Edward		MI	Name of Employer			Amount of Contribution	
Residential Street Address 179 Homestead St # G-7		City Manchester		State CT	Zip Code 06042	Principal Occupation			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No							
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No							
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order					Date Received 05/13/2011		Aggregate Contribution \$50.00		\$50.00
Last Name Gustafson		First Name Margaret		MI	Name of Employer			Amount of Contribution	
Residential Street Address 106 Latici St		City Putnam		State CT	Zip Code 06260	Principal Occupation			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No							
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No							
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order					Date Received 05/13/2011		Aggregate Contribution \$50.00		\$50.00
Last Name Pluchino		First Name Joanne		MI	Name of Employer			Amount of Contribution	
Residential Street Address 173 Russo Ave Unit 206		City East Haven		State CT	Zip Code 06512	Principal Occupation			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No							
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No							
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order					Date Received 05/13/2011		Aggregate Contribution \$50.00		\$50.00

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Murkette	First Name Stacey	MI	Name of Employer			Amount of Contribution
Residential Street Address 126 Conklin Rd		City Stafford Springs	State CT	Zip Code 06076	Principal Occupation	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000?				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # 06112011A		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 05/13/2011	Aggregate Contribution \$50.00		\$50.00	

Last Name Novikov	First Name Sergei	MI	Name of Employer			Amount of Contribution
Residential Street Address 28 Brainard Ave Apt 310		City Medford	State MA	Zip Code 02155	Principal Occupation	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000?				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # 06112011A		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 05/13/2011	Aggregate Contribution \$50.00		\$50.00	

Last Name Goldman	First Name Yale	MI	Name of Employer			Amount of Contribution
Residential Street Address 86 Dunne Ave		City Collinsville	State CT	Zip Code 06019	Principal Occupation	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000?				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # 06112011A		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 05/13/2011	Aggregate Contribution \$50.00		\$50.00	

I. MONETARY RECEIPTS (Section A-K)											
NAME OF COMMITTEE							FILING DUE DATE				
South Windsor Republican Town Committee							Amended 07/11/2011				
B. Itemized Contributions from Individuals											
Last Name Suchcki		First Name Melissa		MI	Name of Employer					Amount of Contribution	
Residential Street Address 150 Federal St			City Belchertown		State MA	Zip Code 01007	Principal Occupation				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000?					<input type="checkbox"/> Yes <input type="checkbox"/> No		
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u>		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:					<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order					Date Received 05/13/2011		Aggregate Contribution \$50.00				\$50.00
Last Name Romeo		First Name Marie		MI	Name of Employer					Amount of Contribution	
Residential Street Address 16 Looking Glass Cir			City Uncasville		State CT	Zip Code 06382	Principal Occupation				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000?					<input type="checkbox"/> Yes <input type="checkbox"/> No		
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u>		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:					<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order					Date Received 05/13/2011		Aggregate Contribution \$50.00				\$50.00
Last Name Millot		First Name Carol		MI	Name of Employer					Amount of Contribution	
Residential Street Address 8 Cheryl Dr			City Farmington		State CT	Zip Code 06032	Principal Occupation				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000?					<input type="checkbox"/> Yes <input type="checkbox"/> No		
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u>		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:					<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order					Date Received 05/13/2011		Aggregate Contribution \$50.00				\$50.00

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Zinn	First Name Allison	MI	Name of Employer	Amount of Contribution
Residential Street Address 28 Peach Tree Ln	City South Windsor	State CT	Zip Code 06074	Principal Occupation
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 05/13/2011	Aggregate Contribution \$40.00
\$40.00				
Last Name Grady	First Name Linda	MI	Name of Employer	Amount of Contribution
Residential Street Address 5 N Green St Apt 3	City Vergennes	State VT	Zip Code 05491	Principal Occupation
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 05/13/2011	Aggregate Contribution \$50.00
\$50.00				
Last Name Franchino	First Name Lois	MI	Name of Employer	Amount of Contribution
Residential Street Address 76 Berrios Hill Rd	City Windsor	State CT	Zip Code 06095	Principal Occupation
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 05/13/2011	Aggregate Contribution \$50.00
\$50.00				

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Paradis	First Name Kevin	MI	Name of Employer			Amount of Contribution \$50.00	
Residential Street Address 82 Country View Dr		City South Windsor		State CT	Zip Code 06074		Principal Occupation
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order					Date Received 05/13/2011	Aggregate Contribution \$50.00	

Last Name Choquette	First Name Donald	MI	Name of Employer			Amount of Contribution \$50.00	
Residential Street Address PO Box 112		City Ware		State MA	Zip Code 01082		Principal Occupation
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Method of Contribution <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input checked="" type="checkbox"/> Money Order					Date Received 05/13/2011	Aggregate Contribution \$50.00	

Last Name Wilson	First Name Maureen	MI	Name of Employer			Amount of Contribution \$50.00	
Residential Street Address 28 Colony Dr		City East Longmeadow		State MA	Zip Code 01028		Principal Occupation
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order					Date Received 05/13/2011	Aggregate Contribution \$50.00	

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Leach	First Name Steven	MI	Name of Employer			Amount of Contribution
Residential Street Address 414 Talcottville Rd		City Vernon	State CT	Zip Code 06066	Principal Occupation	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 05/13/2011	Aggregate Contribution \$50.00		\$50.00
Last Name Pelkey	First Name Joan	MI	Name of Employer			Amount of Contribution
Residential Street Address 4225 VT Route 100 S .		City Mount Holly	State VT	Zip Code 05758	Principal Occupation	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 05/13/2011	Aggregate Contribution \$50.00		\$50.00
Last Name Dickinson	First Name Robert	MI	Name of Employer			Amount of Contribution
Residential Street Address 19 Birch Rd		City South Windsor	State CT	Zip Code 06074	Principal Occupation	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 05/20/2011	Aggregate Contribution \$48.00		\$48.00

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Choate	First Name Suzanne	MI	Name of Employer			Amount of Contribution	
Residential Street Address 176 Margaret Dr		City South Windsor		State CT	Zip Code 06074		Principal Occupation
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				Date Received 05/20/2011	Aggregate Contribution \$24.00		\$24.00
Last Name Joy	First Name David	MI	Name of Employer			Amount of Contribution	
Residential Street Address 100 Bramblebrae		City South Windsor		State CT	Zip Code 06074		Principal Occupation
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				Date Received 05/20/2011	Aggregate Contribution \$24.00		\$24.00
Last Name Rose	First Name Susan	MI	Name of Employer			Amount of Contribution	
Residential Street Address 17 Karen Way		City South Windsor		State CT	Zip Code 06074		Principal Occupation
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				Date Received 05/20/2011	Aggregate Contribution \$24.00		\$24.00

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Aman	First Name William	MI	Name of Employer				Amount of Contribution	
Residential Street Address 878 Strong Rd		City South Windsor		State CT	Zip Code 06074	Principal Occupation		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No						
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event #		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				Date Received 05/20/2011		Aggregate Contribution \$48.00		
\$48.00								
Last Name Ryan	First Name Richard	MI	Name of Employer				Amount of Contribution	
Residential Street Address 703 Kebalo Ln		City South Windsor		State CT	Zip Code 06074	Principal Occupation		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No						
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event #		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				Date Received 05/25/2011		Aggregate Contribution \$24.00		
\$24.00								
Last Name Evans	First Name Louise	MI	Name of Employer				Amount of Contribution	
Residential Street Address 1678 Main St		City South Windsor		State CT	Zip Code 06074	Principal Occupation		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No						
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event #		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				Date Received 05/25/2011		Aggregate Contribution \$40.00		
\$40.00								

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Klenke				First Name Barbara		MI	Name of Employer			Amount of Contribution \$40.00
Residential Street Address 179 Foster St			City South Windsor			State CT	Zip Code 06074	Principal Occupation		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000?				<input type="checkbox"/> Yes <input type="checkbox"/> No		
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # 06112011A		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:				<input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order						Date Received 05/25/2011		Aggregate Contribution \$40.00		
Last Name Pilver				First Name Elaine		MI	Name of Employer			Amount of Contribution \$40.00
Residential Street Address 68 Fairview Dr			City South Windsor			State CT	Zip Code 06074	Principal Occupation		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000?				<input type="checkbox"/> Yes <input type="checkbox"/> No		
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # 06112011A		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:				<input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order						Date Received 05/25/2011		Aggregate Contribution \$40.00		
Last Name Warren				First Name Robert		MI	Name of Employer			Amount of Contribution \$40.00
Residential Street Address 494 Abbe Rd			City South Windsor			State CT	Zip Code 06074	Principal Occupation		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000?				<input type="checkbox"/> Yes <input type="checkbox"/> No		
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # 06112011A		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:				<input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order						Date Received 05/25/2011		Aggregate Contribution \$40.00		

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Westbrook	First Name Warren	MI	Name of Employer			Amount of Contribution
Residential Street Address 67 Oakwood Dr	City South Windsor	State CT	Zip Code 06074	Principal Occupation		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 05/25/2011	Aggregate Contribution \$40.00		\$40.00
Last Name Streeter	First Name Janet	MI	Name of Employer			Amount of Contribution
Residential Street Address 56 Bramblebrae	City South Windsor	State CT	Zip Code 06074	Principal Occupation		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 05/25/2011	Aggregate Contribution \$80.00		\$80.00
Last Name Aman	First Name William	MI	Name of Employer State of CT			Amount of Contribution
Residential Street Address 878 Strong Rd	City South Windsor	State CT	Zip Code 06074	Principal Occupation Legislator		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 05/25/2011	Aggregate Contribution \$128.00		\$80.00

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Carroll	First Name William	MI	Name of Employer			Amount of Contribution
Residential Street Address 188 Scott Dr		City South Windsor	State CT	Zip Code 06074	Principal Occupation	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 05/25/2011	Aggregate Contribution \$80.00		\$80.00
Last Name Delnicki	First Name Thomas	MI	Name of Employer MDC			Amount of Contribution
Residential Street Address 130 Felt Rd		City South Windsor	State CT	Zip Code 06074	Principal Occupation Project Manager	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 05/25/2011	Aggregate Contribution \$128.00		\$80.00
Last Name Etter	First Name Joseph	MI	Name of Employer			Amount of Contribution
Residential Street Address 36 Austin Cir		City South Windsor	State CT	Zip Code 06074	Principal Occupation	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 05/25/2011	Aggregate Contribution \$80.00		\$80.00

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Ferrero	First Name Frank	MI	Name of Employer Retired			Amount of Contribution
Residential Street Address 801 Dzen Way		City South Windsor	State CT	Zip Code 06074	Principal Occupation Retired	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 05/25/2011	Aggregate Contribution \$104.00	\$80.00	
Last Name Fitts	First Name Howard	MI	Name of Employer Travelers			Amount of Contribution
Residential Street Address 239 Oak St		City South Windsor	State CT	Zip Code 06074	Principal Occupation Insurance	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 05/25/2011	Aggregate Contribution \$104.00	\$24.00	
Last Name Fitts	First Name Howard	MI	Name of Employer Travelers			Amount of Contribution
Residential Street Address 239 Oak St		City South Windsor	State CT	Zip Code 06074	Principal Occupation Insurance	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 05/25/2011	Aggregate Contribution \$104.00	\$80.00	

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Joy	First Name David	MI	Name of Employer Mass Mutual Life Ins			Amount of Contribution
Residential Street Address 100 Bramblebrae	City South Windsor	State CT	Zip Code 06074	Principal Occupation Manager		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 05/25/2011	Aggregate Contribution \$104.00		
\$80.00						
Last Name Kelley	First Name Richard	MI	Name of Employer			Amount of Contribution
Residential Street Address 49 Rosemary Ln	City South Windsor	State CT	Zip Code 06074	Principal Occupation		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 05/25/2011	Aggregate Contribution \$80.00		
\$80.00						
Last Name Normen	First Name Nancy	MI	Name of Employer Retired			Amount of Contribution
Residential Street Address 158 Homestead Dr	City South Windsor	State CT	Zip Code 06074	Principal Occupation Retired		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 05/25/2011	Aggregate Contribution \$184.00		
\$80.00						

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Oates	First Name Paul	MI	Name of Employer			Amount of Contribution	
Residential Street Address 935 Main St			City South Windsor	State CT	Zip Code 06074		Principal Occupation
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 05/25/2011	Aggregate Contribution \$80.00			\$80.00
Last Name Rose	First Name Susan	MI	Name of Employer Travelers			Amount of Contribution	
Residential Street Address 17 Karen Way			City South Windsor	State CT	Zip Code 06074		Principal Occupation IT Director
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 05/25/2011	Aggregate Contribution \$104.00			\$80.00
Last Name Samsel	First Name Theresa	MI	Name of Employer Town of South Windsor			Amount of Contribution	
Residential Street Address 304 Abbe Road Ext			City South Windsor	State CT	Zip Code 06074		Principal Occupation Assistant Town Clerk
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 05/25/2011	Aggregate Contribution \$128.00			\$80.00

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Bazzano	First Name Gary	MI	Name of Employer			Amount of Contribution
Residential Street Address 53 Spinners Run	City South Windsor	State CT	Zip Code 06074	Principal Occupation		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No			Amount of Contribution	
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # 06112011A <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 05/25/2011	Aggregate Contribution \$80.00	\$80.00	
Last Name McCann	First Name Kevin	MI	Name of Employer			Amount of Contribution
Residential Street Address 170 Lisa Dr	City South Windsor	State CT	Zip Code 06074	Principal Occupation		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No			Amount of Contribution	
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 05/27/2011	Aggregate Contribution \$50.00	\$50.00	
Last Name Heffler	First Name Carol	MI	Name of Employer			Amount of Contribution
Residential Street Address 81 Colony Rd	City South Windsor	State CT	Zip Code 06074	Principal Occupation		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No			Amount of Contribution	
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # 06112011A <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 05/27/2011	Aggregate Contribution \$40.00	\$40.00	

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Prague	First Name Cary	MI	Name of Employer			Amount of Contribution	
Residential Street Address 60 Krawski Dr			City South Windsor	State CT	Zip Code 06074		Principal Occupation
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event #		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:					
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Executive <input type="checkbox"/> Legislative					
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				Date Received 05/27/2011	Aggregate Contribution \$128.00	\$48.00	
Last Name Prague	First Name Cary	MI	Name of Employer Database Creations			Amount of Contribution	
Residential Street Address 60 Krawski Dr			City South Windsor	State CT	Zip Code 06074		Principal Occupation Software Developer
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event #		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:					
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Executive <input type="checkbox"/> Legislative					
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				Date Received 05/27/2011	Aggregate Contribution \$128.00	\$80.00	
Last Name Oates	First Name Paul	MI	Name of Employer CIGNA			Amount of Contribution	
Residential Street Address 935 Main St			City South Windsor	State CT	Zip Code 06074		Principal Occupation IT
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event #		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:					
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Executive <input type="checkbox"/> Legislative					
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				Date Received 05/27/2011	Aggregate Contribution \$152.00	\$72.00	

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Gagnat		First Name John		MI	Name of Employer Retired			Amount of Contribution
Residential Street Address 30 Devonshire Dr		City South Windsor		State CT	Zip Code 06074	Principal Occupation Retired		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No						Amount of Contribution
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order					Date Received 06/09/2011	Aggregate Contribution \$48.00		\$48.00
Last Name Asplund		First Name Herbert		MI	Name of Employer Retired			Amount of Contribution
Residential Street Address 56 Trumblebrook Dr		City South Windsor		State CT	Zip Code 06074	Principal Occupation Retired		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No						Amount of Contribution
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order					Date Received 06/09/2011	Aggregate Contribution \$128.00		\$48.00
Last Name Futtner		First Name Edwina		MI	Name of Employer State of CT			Amount of Contribution
Residential Street Address 203 Sand Stone Dr		City South Windsor		State CT	Zip Code 06074	Principal Occupation Deputy Clerk		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No						Amount of Contribution
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order					Date Received 06/09/2011	Aggregate Contribution \$128.00		\$48.00

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Murphy	First Name Joan	MI	Name of Employer			Amount of Contribution
Residential Street Address 133 Greenwood Dr	City South Windsor	State CT	Zip Code 06074	Principal Occupation		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000?			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	
Method of Contribution			Date Received	Aggregate Contribution		
<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			06/09/2011	\$40.00		
\$40.00						
Last Name Cottle	First Name Dorothy	MI	Name of Employer			Amount of Contribution
Residential Street Address 166 Clinton Dr	City South Windsor	State CT	Zip Code 06074	Principal Occupation		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000?			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	
Method of Contribution			Date Received	Aggregate Contribution		
<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			06/09/2011	\$40.00		
\$40.00						
Last Name Dickey	First Name Theresa	MI	Name of Employer			Amount of Contribution
Residential Street Address 30 Devonshire Dr	City South Windsor	State CT	Zip Code 06074	Principal Occupation Retired		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000?			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	
Method of Contribution			Date Received	Aggregate Contribution		
<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			06/09/2011	\$40.00		
\$40.00						

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Futtner	First Name Edwina	MI	Name of Employer State of CT	Amount of Contribution	
Residential Street Address 203 Sand Stone Dr	City South Windsor	State CT	Zip Code 06074	Principal Occupation Deputy Clerk	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 06/09/2011	Aggregate Contribution \$128.00	\$80.00
Last Name Wilson	First Name Robert	MI	Name of Employer Retired	Amount of Contribution	
Residential Street Address 161 Bayberry Trl	City South Windsor	State CT	Zip Code 06074	Principal Occupation Retired	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 06/09/2011	Aggregate Contribution \$80.00	\$80.00
Last Name Jodice	First Name William	MI	Name of Employer PDS	Amount of Contribution	
Residential Street Address 32 Green Ln	City South Windsor	State CT	Zip Code 06074	Principal Occupation Engineer	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 06/09/2011	Aggregate Contribution \$128.00	\$80.00

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Lillis		First Name Lisa		MI	Name of Employer		Amount of Contribution
Residential Street Address 667 Griffin Rd		City South Windsor		State CT	Zip Code 06074	Principal Occupation	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order					Date Received 06/09/2011	Aggregate Contribution \$80.00	
Last Name McCann		First Name Kevin		MI	Name of Employer Hinckley Allen & Snyder		Amount of Contribution
Residential Street Address 170 Lisa Dr		City South Windsor		State CT	Zip Code 06074	Principal Occupation Attorney	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order					Date Received 06/09/2011	Aggregate Contribution \$130.00	
Last Name Asplund		First Name Herbert		MI	Name of Employer Retired		Amount of Contribution
Residential Street Address 56 Trumblebrook Dr		City South Windsor		State CT	Zip Code 06074	Principal Occupation Retired	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order					Date Received 06/09/2011	Aggregate Contribution \$128.00	

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Loukellis	First Name Athena	MI	Name of Employer			Amount of Contribution
Residential Street Address 135 Ridgefield Dr	City South Windsor	State CT	Zip Code 06074	Principal Occupation		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 06/15/2011	Aggregate Contribution \$80.00		
\$32.00						
Last Name Burnham	First Name Paul	MI	Name of Employer			Amount of Contribution
Residential Street Address 25 Pear Tree Ln	City South Windsor	State CT	Zip Code 06074	Principal Occupation		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Method of Contribution <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 06/15/2011	Aggregate Contribution \$40.00		
\$40.00						
Last Name MacDonald	First Name Elizabeth	MI	Name of Employer			Amount of Contribution
Residential Street Address 670 Rye St	City South Windsor	State CT	Zip Code 06074	Principal Occupation		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 06/15/2011	Aggregate Contribution \$68.00		
\$20.00						

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Roberts		First Name Karen		MI	Name of Employer		Amount of Contribution	
Residential Street Address 87 Natsisky Farm Rd		City South Windsor		State CT	Zip Code 06074	Principal Occupation		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No						
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # 06112011A <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order					Date Received 06/15/2011	Aggregate Contribution \$16.00	\$16.00	
Last Name Maneeley		First Name Lisa		MI	Name of Employer East Hartford BOE		Amount of Contribution	
Residential Street Address 326 Quarry Brk		City South Windsor		State CT	Zip Code 06074	Principal Occupation Teacher		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No						
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # 06112011A <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order					Date Received 06/15/2011	Aggregate Contribution \$80.00	\$80.00	
Last Name Snyder		First Name Janice		MI	Name of Employer State of CT		Amount of Contribution	
Residential Street Address 191 Bourbon St		City South Windsor		State CT	Zip Code 06074	Principal Occupation Purchase Manager		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No						
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # 06112011A <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order					Date Received 06/15/2011	Aggregate Contribution \$160.00	\$80.00	

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Berstene	First Name Thomas	MI	Name of Employer Workforce Planning Assoc			Amount of Contribution
Residential Street Address 95 Rimfield Dr	City South Windsor	State CT	Zip Code 06074	Principal Occupation Mgmt Consulting		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 06/15/2011	Aggregate Contribution \$104.00		
\$80.00						
Last Name Koboski	First Name Philip	MI	Name of Employer Travelers Ins			Amount of Contribution
Residential Street Address 141 Woodland Dr	City South Windsor	State CT	Zip Code 06074	Principal Occupation Accountant		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 06/15/2011	Aggregate Contribution \$128.00		
\$80.00						
Last Name Burnham	First Name Susan	MI	Name of Employer Town of South Windsor			Amount of Contribution
Residential Street Address 301 Sand Stone Dr	City South Windsor	State CT	Zip Code 06074	Principal Occupation Registrar of Voters		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 06/15/2011	Aggregate Contribution \$80.00		
\$80.00						

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Kennedy	First Name Patrick	MI	Name of Employer Self			Amount of Contribution
Residential Street Address 9 Tuttle Cir		City South Windsor	State CT	Zip Code 06074	Principal Occupation Attorney	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 06/15/2011	Aggregate Contribution \$80.00	\$80.00	
Last Name Menard	First Name Denise	MI	Name of Employer Town of East Windsor			Amount of Contribution
Residential Street Address 10 Rye St		City Broad Brook	State CT	Zip Code 06016	Principal Occupation Selectman	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 06/15/2011	Aggregate Contribution \$50.00	\$50.00	
Last Name Kostant	First Name Joan	MI	Name of Employer			Amount of Contribution
Residential Street Address 64 Hilltop Rd		City Tolland	State CT	Zip Code 06084	Principal Occupation	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 06/15/2011	Aggregate Contribution \$50.00	\$50.00	

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Fonner		First Name James		MI	Name of Employer		Amount of Contribution
Residential Street Address 35 Janice Ln		City Griswold		State CT	Zip Code 06351	Principal Occupation	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order					Date Received 06/15/2011	Aggregate Contribution \$50.00	\$50.00
Last Name Miranda		First Name Deane		MI	Name of Employer		Amount of Contribution
Residential Street Address 271 Oak St		City South Windsor		State CT	Zip Code 06074	Principal Occupation	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order					Date Received 06/15/2011	Aggregate Contribution \$50.00	\$50.00
Last Name Madrak		First Name Sandi		MI	Name of Employer		Amount of Contribution
Residential Street Address 130 Cook Rd		City Tolland		State CT	Zip Code 06084	Principal Occupation	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order					Date Received 06/15/2011	Aggregate Contribution \$70.00	\$70.00

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Goodrich	First Name Eve	MI	Name of Employer			Amount of Contribution
Residential Street Address 30 Devonshire Dr		City South Windsor	State CT	Zip Code 06074	Principal Occupation	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input checked="" type="checkbox"/> Money Order			Date Received 06/15/2011	Aggregate Contribution \$40.00		\$40.00
Last Name Waseem	First Name Ashir	MI	Name of Employer			Amount of Contribution
Residential Street Address 25 Saddle Hill Rd		City Manchester	State CT	Zip Code 06040	Principal Occupation	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 06/15/2011	Aggregate Contribution \$50.00		\$50.00
Last Name Wilson	First Name Robert	MI	Name of Employer			Amount of Contribution
Residential Street Address 161 Bayberry Trl		City South Windsor	State CT	Zip Code 06074	Principal Occupation Retired	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 06/15/2011	Aggregate Contribution \$104.00		\$24.00

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Van Horn	First Name Daniel	MI	Name of Employer Retired			Amount of Contribution \$160.00
Residential Street Address 35 Stone Xing		City South Windsor	State CT	Zip Code 06074	Principal Occupation Retired	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 06/15/2011	Aggregate Contribution \$208.00		

Last Name Van Horn	First Name Daniel	MI	Name of Employer Retired			Amount of Contribution \$48.00
Residential Street Address 35 Stone Xing		City South Windsor	State CT	Zip Code 06074	Principal Occupation Retired	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 06/15/2011	Aggregate Contribution \$208.00		

Last Name Wilson	First Name Lavina	MI	Name of Employer Self			Amount of Contribution \$80.00
Residential Street Address 264 Lefoll Blvd		City South Windsor	State CT	Zip Code 06074	Principal Occupation Day Care Provider	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 06/17/2011	Aggregate Contribution \$128.00		

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Mabey	First Name Richard	MI J	Name of Employer West Hartford Schools			Amount of Contribution
Residential Street Address 30 Dogwood Ln		City South Windsor	State CT	Zip Code 06074	Principal Occupation Teacher	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 06/17/2011	Aggregate Contribution \$208.00	\$80.00	
Last Name Peterson	First Name Mark	MI	Name of Employer Retired			Amount of Contribution
Residential Street Address 33 Eagle Run		City South Windsor	State CT	Zip Code 06074	Principal Occupation Retired	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 06/17/2011	Aggregate Contribution \$104.00	\$80.00	
Last Name Burnham	First Name Bruce	MI	Name of Employer			Amount of Contribution
Residential Street Address 1909 Main St		City South Windsor	State CT	Zip Code 06074	Principal Occupation	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 06/17/2011	Aggregate Contribution \$40.00	\$40.00	

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Carey	First Name Carolyn	MI	Name of Employer Aetna			Amount of Contribution
Residential Street Address 145 Abbe Rd		City South Windsor	State CT	Zip Code 06074	Principal Occupation Insurance	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 06/17/2011	Aggregate Contribution \$104.00	\$80.00	
Last Name Wilson	First Name Lavina	MI	Name of Employer Self			Amount of Contribution
Residential Street Address 264 Lefoll Blvd		City South Windsor	State CT	Zip Code 06074	Principal Occupation Day Care Provider	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 06/17/2011	Aggregate Contribution \$128.00	\$48.00	
Last Name Burnham	First Name Susan	MI	Name of Employer Town of South Windsor			Amount of Contribution
Residential Street Address 301 Sand Stone Dr		City South Windsor	State CT	Zip Code 06074	Principal Occupation Registrar of Voters	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 06/17/2011	Aggregate Contribution \$128.00	\$48.00	

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Munley	First Name Robin	MI	Name of Employer Self			Amount of Contribution \$120.00	
Residential Street Address 533 Greenfield Ave		City Stratford		State CT	Zip Code 06614		Principal Occupation Crafts
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				Date Received 06/20/2011	Aggregate Contribution \$120.00		

Last Name Reilly	First Name Davene	MI	Name of Employer			Amount of Contribution \$50.00	
Residential Street Address 19 Farview Ave		City East Haven		State CT	Zip Code 06512		Principal Occupation
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				Date Received 06/20/2011	Aggregate Contribution \$50.00		

Last Name Cox	First Name Terry	MI	Name of Employer			Amount of Contribution \$50.00	
Residential Street Address 363 Hilton Dr		City South Windsor		State CT	Zip Code 06074		Principal Occupation
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				Date Received 06/20/2011	Aggregate Contribution \$50.00		

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Merrill	First Name Lisa	MI	Name of Employer			Amount of Contribution \$50.00
Residential Street Address 162 Snakehill Rd	City Coventry	State CT	Zip Code 06238	Principal Occupation		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000?				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u>		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 06/20/2011	Aggregate Contribution \$50.00		\$50.00	

Last Name Cleary	First Name Karen	MI	Name of Employer			Amount of Contribution \$50.00
Residential Street Address 22 Barber Hill Rd	City Broad Brook	State CT	Zip Code 06016	Principal Occupation		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000?				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u>		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 06/20/2011	Aggregate Contribution \$50.00		\$50.00	

Last Name Carlson	First Name Linda	MI	Name of Employer			Amount of Contribution \$60.00
Residential Street Address 40 Olcott St Apt 210	City Manchester	State CT	Zip Code 06040	Principal Occupation		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000?				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>06112011A</u>		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 06/20/2011	Aggregate Contribution \$60.00		\$60.00	

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

B. Itemized Contributions from Individuals

Last Name Carroll	First Name William	MI	Name of Employer General Dynamics	Amount of Contribution	
Residential Street Address 188 Scott Dr	City South Windsor	State CT	Zip Code 06074	Principal Occupation Sales	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 06/24/2011	Aggregate Contribution \$128.00	\$48.00
Last Name Seypura	First Name Daniel	MI W	Name of Employer Rogo Distributors	Amount of Contribution	
Residential Street Address 37 Carson Way	City South Windsor	State CT	Zip Code 06074	Principal Occupation Salesman	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 06/24/2011	Aggregate Contribution \$48.00	\$48.00
Last Name Beaulieu	First Name Cynthia	MI	Name of Employer	Amount of Contribution	
Residential Street Address 19 Cody Cir	City South Windsor	State CT	Zip Code 06074	Principal Occupation	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Method of Contribution <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 06/24/2011	Aggregate Contribution \$24.00	\$24.00
Total of Section B					\$12,880.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Total on Line 14 of Summary Page)					\$12,880.00

I. MONETARY RECEIPTS (Section A-I)					
NAME OF COMMITTEE					FILING DUE DATE
South Windsor Republican Town Committee					Amended 07/11/2011
C1. Contributions from Other Committees					
Name of Committee				Name of Treasurer	
Address			Is this contribution associated with a fundraising event listed in Section L1?		Amount of Contribution
			Yes If yes, list Event # No		
City	State	Zip Code	Date Received	Aggregate Contributions	
Total of Section C1					

I. MONETARY RECEIPTS (Section A-I)			
NAME OF COMMITTEE	FILING DUE DATE		
South Windsor Republican Town Committee	Amended 07/11/2011		
C2. Reimbursements, Payments, or Surplus Distributions 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 Surplus Distribution
Total of Section C2			

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

D. Loans Received this Period

Name of Lender				Source of Loan:	Is there a cosigner or Guarantor of this loan?	Amount Received
Street Address	City	State	Zip Code	Bank	Yes	
Name of Cosigner/Guarantor				Candidate	No	
Street Address	City	State	Zip Code	Individual		
				Other		
				Committee		
				Date Received		

Total of Section D

I. MONETARY RECEIPTS (Section A-K)				
NAME OF COMMITTEE				FILING DUE DATE
South Windsor Republican Town Committee				Amended 07/11/2011
E. Receipts from Entities other than Individuals or Other Committees (<i>Referendum Committees ONLY</i>)				
Name				
Street Address			Date Received	Amount Received
City	State	Zip Code	Aggregate Contributions	
Total of Section E				

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE		FILING DUE DATE
South Windsor Republican Town Committee		Amended 07/11/2011
F. Amount Transferred from Affiliated Business Treasury (<i>Business Entity Committees ONLY</i>)		
Is this transaction associated with a fundraising event listed in Section L1?	Date of Receipt	Amount
Yes No If yes, list Event #		
Total of Section F		

I. MONETARY RECEIPTS (Section A-I)	
NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011
G. Amount Transferred from Affiliated Labor Union or Other Organization Treasury (<i>Organization Committees ONLY</i>)	
Date of Receipt	Amount
Total of Section G	

I. MONETARY RECEIPTS (Section A-K)		
NAME OF COMMITTEE	FILING DUE DATE	
South Windsor Republican Town Committee	Amended 07/11/2011	
H. Personal Funds of the Candidate Received this Period (<i>Candidate Committees ONLY</i>)		
Date Received	Amount	Method of Payment
		Cash Personal Check Credit/Debit Card
		Total of Section H

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE					FILING DUE DATE
South Windsor Republican Town Committee					Amended 07/11/2011
I. Anonymous Contributions					
Date Received	\$ 1 bills	\$ 5 bills	\$ 10 bill	coins	Amount
Total of Section I					

I. Monetary Receipts (Section A-I)				
NAME OF COMMITTEE	FILING DUE DATE			
South Windsor Republican Town Committee	Amended 07/11/2011			
J. Interest from Deposits in Authorized Accounts				
Name of Institution	Date Received	Amount Received		
Street Address	City	State	Zip Code	Amount Received
Total of Section J				

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

K. Miscellaneous Monetary Receipts not Considered Contributions

Name	Date of Transaction		Amount Received
Philip E. Koboski	06/13/2011		
Street Address	City	State	Zip Code
141 Woodland Dr	South Windsor	CT	06074
Description			\$1,700.00
Return of cash for change box see check 1386 in section P			
Name	Date of Transaction		Amount Received
Group Ticket Sales	06/24/2011		
Street Address	City	State	Zip Code
226 W 47th St	New York	NY	10036
Description			\$167.50
Refund on ticket price			
Total of Section K			\$1,867.50

II. FUNDRAISING EVENT ACTIVITY

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

L1. Fundraiser Event Information

Fundraising Event # Date of Fundraiser	Letter	Description	Location: Street Address	City	State	Zip Code
06/11/2011	A	Fair Event	Nevers Road Park	South Windsor	CT	06074

Subpart 1: (All Committees)

Was this fundraising event hosted at a personal residence? Yes No *If yes, go to Section L4*

Did this fundraiser include items donated by a business entity of up to \$100 or items donated by an individual of up to \$50? Yes No *If yes, go to Section L4*

Was this fundraiser a tag sale, auction, or other sale of donated items? Yes No *If yes, go to Section L2*

Subpart 2: (Town Committees and Municipal Candidate Committees ONLY)

Were there purchases of advertising space in a program book associated with this fundraiser? Yes No *If yes, go to Section L3*

Subpart 3: (Town Committees ONLY)

Did your committee sell food or beverage at a fair or similar mass gathering held within the state? Yes No *If yes, enter Total Receipts from small purchases* \$15,803.00

Fundraising Event # Date of Fundraiser	Letter	Description	Location: Street Address	City	State	Zip Code
12/10/2011	A	Theatre Event	226 W 47th St	New York	NY	10036

Subpart 1: (All Committees)

Was this fundraising event hosted at a personal residence? Yes No *If yes, go to Section L4*

Did this fundraiser include items donated by a business entity of up to \$100 or items donated by an individual of up to \$50? Yes No *If yes, go to Section L4*

Was this fundraiser a tag sale, auction, or other sale of donated items? Yes No *If yes, go to Section L2*

Subpart 2: (Town Committees and Municipal Candidate Committees ONLY)

Were there purchases of advertising space in a program book associated with this fundraiser? Yes No *If yes, go to Section L3*

Subpart 3: (Town Committees ONLY)

Did your committee sell food or beverage at a fair or similar mass gathering held within the state? Yes No *If yes, enter Total Receipts from small purchases* \$0.00

Total of Section L1

\$15,803.00

II. FUNDRAISING EVENT ACTIVITY							
NAME OF COMMITTEE						FILING DUE DATE	
South Windsor Republican Town Committee						Amended 07/11/2011	
L2. Proceeds from Tag Sale, Auction, or Other Sale of Donated Items							
Name of the Purchaser <i>(Individuals ONLY)</i> Last Name	First Name	MI	Method of payment:			Aggregate Amount of Purchases	
			Cash	Personal Check	Credit/Debit Card		
Residential Street Address	City	State	Zip Code	Date Received	Event #		
Items Purchased							
Total of Section L2							

II. FUNDRAISING EVENT ACTIVITY

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

L3. Purchases of Advertising in a Program Book (Municipal Candidate and Town Committees ONLY)

Name of Purchaser for All Events	Business Entity <input type="checkbox"/> Yes <input type="checkbox"/> No	Event #	Date Received	Amount of Purchase
GEISSLER'S SUPERMARKET	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	06112011A	05/13/2011	\$100.00
Street Address 100 Bridge St	City East Windsor	State CT	Zip Code 06088	
SMARTER INSTALLATIONS	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	06112011A	05/25/2011	\$250.00
Street Address 14 Eastern Park Rd	City East Hartford	State CT	Zip Code 06108	
THE J E SHEPARD CO	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	06112011A	05/25/2011	\$250.00
Street Address 124 Brookfield St	City South Windsor	State CT	Zip Code 06074	
RSK/KELLCO INC	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	06112011A	05/25/2011	\$150.00
Street Address 1744 Ellington Rd	City South Windsor	State CT	Zip Code 06074	
PUE CHICK LEIBOWITZ BLEZA	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	06112011A	05/25/2011	\$250.00
Street Address 76 S Frontage Rd	City Vernon	State CT	Zip Code 06066	
ANDRE FURNITURE INDUSTRY	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	06112011A	05/25/2011	\$150.00
Street Address 55 Sandra Dr	City South Windsor	State CT	Zip Code 06074	
ATC INC	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	06112011A	05/27/2011	\$250.00
Street Address 36 Judge	City South Windsor	State CT	Zip Code 06074	

II. FUNDRAISING EVENT ACTIVITY

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

L3. Purchases of Advertising in a Program Book *(Municipal Candidate and Town Committees ONLY)*

Name of Purchaser for All Events	Business Entity	Event #	Date Received	Amount of Purchase
CAMP BOW WOW	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	06112011A	06/15/2011	\$250.00
Street Address 1145 John Fitch Blvd	City South Windsor	State CT	Zip Code 06074	
MITCHELL FUEL CO	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	06112011A	06/15/2011	\$250.00
Street Address 1209 Sullivan Ave	City South Windsor	State CT	Zip Code 06074	
JULIES BARKS & BUBBLES	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	06112011A	06/15/2011	\$150.00
Street Address 1678 Ellington Rd	City South Windsor	State CT	Zip Code 06074	
Total of Section L3				\$2,050.00

II. FUNDRAISING EVENT ACTIVITY

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

L4. In-Kind Donations Not Considered Contributions

Name of the Donor Topstone Golf Course				Donation given by: <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Business Entity		Fair Market Value of Donation
Street Address 516A Griffin Rd	City South Windsor	State CT	Zip Code 06074	Aggregate value for this event \$80.00		
Description of Donation Use of Golf Carts at S.F.			Date Received 06/11/2011	Event # 061111A		
Total of Section L4						\$80.00

III. NONMONETARY RECEIPTS

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

M. In-Kind Contributions

Name Oates Paul		Type of Contributor: <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Committee <input type="checkbox"/> Other		Fair Market Value of this Contribution
Street Address 935 Main St		City South Windsor		
State CT	Zip Code 06074	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more <input type="checkbox"/> Yes <input type="checkbox"/> No	Date Received 06/11/2011	
Is Contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Description of In-Kind Contribution Use of Farm Tractor	Aggregate contributions \$210.00	\$210.00
If yes, list Event# 06112011A				
Name Oates Paul		Type of Contributor: <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Committee <input type="checkbox"/> Other		Fair Market Value of this Contribution
Street Address 935 Main St		City South Windsor		
State CT	Zip Code 06074	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more <input type="checkbox"/> Yes <input type="checkbox"/> No	Date Received 06/11/2011	
Is Contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Description of In-Kind Contribution Use of Kiddie Train	Aggregate contributions \$125.00	\$125.00
If yes, list Event# 06112011A				
Total of Section M				\$335.00

III. NONMONETARY RECEIPTS

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

N. Refundable Deposit to Telephone Company

Last Name (Individuals Only)	First Name	MI	Date Received	Amount of Deposit
Residential Street Address	City	State	Zip Code	
Name of Telephone company				
Street Address	City	State	Zip Code	
Total of Section N				

III. NONMONETARY RECEIPTS

III. NONMONETARY RECEIPTS			
NAME OF COMMITTEE			FILING DUE DATE
South Windsor Republican Town Committee			Amended 07/11/2011
O. Non-Monetary Receipts of Organization Expenditures Made By Legislative Leadership, Legislative Caucus, and Party Committee			
Name of Committee		Name of Treasurer	
Street Address		Date Notice Received	Fair Market Value of Donation
City	State	Zip Code	
Description of Donation		Purpose of Expenditure	
		A	B
		C	D
		E	
Total of Section O			

IV. EXPENDITURES

NAME OF COMMITTEE							FILING DUE DATE	
South Windsor Republican Town Committee							Amended 07/11/2011	
P. Expenses Paid By Committee								
Name of Payee				Date of Payment		Method of Payment		Amount
Group Sales Box Office				04/03/2011		<input checked="" type="checkbox"/> Check # 1368		
Street Address		City		State	Zip Code	Purpose of Expenditure (bv code)		
226 W 47th St		New York		NY	10036	FNRD		<input type="checkbox"/> Debit Card
Description							Event #	
Show Tickets for New York City Bus Trip							12102011A	
Type of Expenditure (if applicable)			Candidate(s) Name (if applicable)		Office Sought		<input type="checkbox"/> Supported <input type="checkbox"/> Opposed	
<input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E								
								\$1,748.50
Name of Payee				Date of Payment		Method of Payment		Amount
Philip E. Koboski				04/03/2011		<input checked="" type="checkbox"/> Check # 1369		
Street Address		City		State	Zip Code	Purpose of Expenditure (bv code)		
141 Woodland Dr		South Windsor		CT	06074	POST		<input type="checkbox"/> Debit Card
Description							Event #	
PO Box Rental Fee								
Type of Expenditure (if applicable)			Candidate(s) Name (if applicable)		Office Sought		<input type="checkbox"/> Supported <input type="checkbox"/> Opposed	
<input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E								
								\$15.00
Name of Payee				Date of Payment		Method of Payment		Amount
Philip E. Koboski				04/03/2011		<input checked="" type="checkbox"/> Check # 1369		
Street Address		City		State	Zip Code	Purpose of Expenditure (bv code)		
141 Woodland Dr		South Windsor		CT	06074	RCW		<input type="checkbox"/> Debit Card
Description							Event #	
PO Box Rental Fee								
Type of Expenditure (if applicable)			Candidate(s) Name (if applicable)		Office Sought		<input type="checkbox"/> Supported <input type="checkbox"/> Opposed	
<input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E								
								\$15.00

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

P. Expenses Paid By Committee

Name of Payee Tonsha		Date of Payment 04/26/2011		Method of Payment <input checked="" type="checkbox"/> Check # 1370		Amount
Street Address 81 Commerce Way		City South Windsor	State CT	Zip Code 06074	Purpose of Expenditure (bv code) FNR <input type="checkbox"/> Debit Card	
Description Printing of Tickets						Event # 06112011A
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)		Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed		\$205.64

Name of Payee Life Publications		Date of Payment 05/19/2011		Method of Payment <input checked="" type="checkbox"/> Check # 1372		Amount
Street Address PO Box 331342		City West Hartford	State CT	Zip Code 06133-1342	Purpose of Expenditure (bv code) FNR <input type="checkbox"/> Debit Card	
Description Festival Advertising						Event #
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)		Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed		\$540.00

Name of Payee Reminder Media, Inc.		Date of Payment 05/19/2011		Method of Payment <input checked="" type="checkbox"/> Check # 1373		Amount
Street Address 130 Nold Town Rd		City Vernon	State CT	Zip Code 06066	Purpose of Expenditure (bv code) FNR <input type="checkbox"/> Debit Card	
Description Festival Advertising						Event #
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)		Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed		\$626.40

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

P. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment	Amount
Joseph DiDonna	05/19/2011	<input checked="" type="checkbox"/> Check # 1374	
Street Address 115 9th St	City Saratoga	State NY	Zip Code 12866
Purpose of Expenditure (by code) FNRD			<input type="checkbox"/> Debit Card
Description Festival Entertainment			Event # 06112011A
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Candidate(s) Name (if applicable)		Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed
			\$250.00
Dee Zee Ice	05/26/2011	<input checked="" type="checkbox"/> Check # 1375	
Street Address Chapel Road	City South Windsor	State CT	Zip Code 06074
Purpose of Expenditure (by code) FNRD			<input type="checkbox"/> Debit Card
Description Ice			Event # 06112011A
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Candidate(s) Name (if applicable)		Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed
			\$215.00
Instantwhip	05/26/2011	<input checked="" type="checkbox"/> Check # 1376	
Street Address 49 N Plains Industrial Rd	City Wallingford	State CT	Zip Code 06492
Purpose of Expenditure (by code) FNRD			<input type="checkbox"/> Debit Card
Description Whipped Cream			Event # 06112011A
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Candidate(s) Name (if applicable)		Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed
			\$310.00

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

P. Expenses Paid By Committee

Name of Payee Journal Inquirer		Date of Payment 05/26/2011		Method of Payment <input checked="" type="checkbox"/> Check # 1377		Amount
Street Address 300 Progress Dr .		City Manchester	State CT	Zip Code 06045	Purpose of Expenditure (by code) FNDR	
Description Festival Advertising						Event # 06112011A
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)		Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed		\$981.15

Name of Payee Feri Dickey Gagnat		Date of Payment 06/02/2011		Method of Payment <input checked="" type="checkbox"/> Check # 1405		Amount
Street Address 30 Devonshire Dr		City South Windsor	State CT	Zip Code 06074	Purpose of Expenditure (by code) FNDR	
Description Vendor Printing and Postage						Event # 06112011A
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)		Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed		\$377.24

Name of Payee John Mitchell		Date of Payment 06/05/2011		Method of Payment <input checked="" type="checkbox"/> Check # 1380		Amount
Street Address 40 Windy Hill Rd		City South Windsor	State CT	Zip Code 06074	Purpose of Expenditure (by code) FNDR	
Description Water Bottles						Event # 06112011A
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)		Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed		\$426.72

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

P. Expenses Paid By Committee

Name of Payee Holy Family Church		Date of Payment 06/05/2011		Method of Payment <input checked="" type="checkbox"/> Check # 1381		Amount
Street Address Simon Rd	City Enfield	State CT	Zip Code 06074	Purpose of Expenditure (bv code) FNDR	<input type="checkbox"/> Debit Card	
Description Donation					Event # 06112011A	
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)		Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed		\$200.00

Name of Payee John Mitchell		Date of Payment 06/05/2011		Method of Payment <input checked="" type="checkbox"/> Check # 1380		Amount
Street Address 40 Windy Hill Rd	City South Windsor	State CT	Zip Code 06074	Purpose of Expenditure (bv code) RCW	<input type="checkbox"/> Debit Card	
Description Water for sale at festival					Event # 06112011A	
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)		Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed		\$426.72

Name of Payee Philip E. Koboski		Date of Payment 06/09/2011		Method of Payment <input checked="" type="checkbox"/> Check # 1386		Amount
Street Address 141 Woodland Dr	City South Windsor	State CT	Zip Code 06074	Purpose of Expenditure (bv code) Misc *	<input type="checkbox"/> Debit Card	
Description cash for change boxes at festival					Event # 06112011A	
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)		Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed		\$1,700.00

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

P. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment	Amount
Travelers Insurance Co	06/09/2011	<input checked="" type="checkbox"/> Check # 1383	
Street Address 1 Tower Sq	City Hartford	State CT	Zip Code 06183
Description General Liability Insurance			Event #
Type of Expenditure (if applicable)			
<input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E			
Candidate(s) Name (if applicable)			Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed
			\$264.00
Philip E. Koboski	06/09/2011	<input checked="" type="checkbox"/> Check # 1386	
Street Address 141 Woodland Dr	City South Windsor	State CT	Zip Code 06074
Description Petty Cash for cash boxes			Event # 06112011A
Type of Expenditure (if applicable)			
<input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E			
Candidate(s) Name (if applicable)			Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed
			\$1,700.00
Joseph DiDonna	06/11/2011	<input checked="" type="checkbox"/> Check # 1384	
Street Address 115 9th St	City Saratoga	State NY	Zip Code 12866
Description Festival Entertainment			Event # 06112011A
Type of Expenditure (if applicable)			
<input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E			
Candidate(s) Name (if applicable)			Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed
			\$250.00

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

P. Expenses Paid By Committee

Name of Payee Dennis Sheridan		Date of Payment 06/11/2011		Method of Payment <input checked="" type="checkbox"/> Check # 1385		Amount
Street Address 96 Hebron Rd		City Bolton	State CT	Zip Code 06046	Purpose of Expenditure (by code) FNDR	
Description Festival Entertainment						Event # 06112011A
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)		Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed		\$650.00

Name of Payee Dennis Sheridan		Date of Payment 06/11/2011		Method of Payment <input checked="" type="checkbox"/> Check # 1385		Amount
Street Address 96 Hebron Rd		City Bolton	State CT	Zip Code 06046	Purpose of Expenditure (by code) FNDR	
Description Festival Entertainment						Event # 06112011A
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)		Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed		\$600.00

Name of Payee June Cottle		Date of Payment 06/12/2011		Method of Payment <input checked="" type="checkbox"/> Check # 1387		Amount
Street Address 166 Clinton Dr		City South Windsor	State CT	Zip Code 06074	Purpose of Expenditure (by code) RCW	
Description Printing and Postage						Event # 06112011A
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)		Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed		\$56.08

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

P. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment	Amount
Kathy Daugherty	06/12/2011	<input checked="" type="checkbox"/> Check # 1388	
Street Address 12 Roy Rd	City South Windsor	State CT	Zip Code 06074
Description Festival Pageant Supplies		Purpose of Expenditure (by code) RCW	Event # 06112011A
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed
			\$198.29
Gary Bazzano	06/12/2011	<input checked="" type="checkbox"/> Check # 1391	
Street Address 56 Spinners Run	City South Windsor	State CT	Zip Code 06074
Description Stamps		Purpose of Expenditure (by code) RCW	Event #
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed
			\$22.00
Jane Cottle	06/12/2011	<input checked="" type="checkbox"/> Check # 1387	
Street Address 166 Clinton Dr	City South Windsor	State CT	Zip Code 06074
Description Printing and Postage		Purpose of Expenditure (by code) FNDR	Event # 06112011A
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed
			\$56.08

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

P. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment	Amount
Kathy Daugherty	06/12/2011	<input checked="" type="checkbox"/> Check # 1388	
Street Address 12 Roy Rd	City South Windsor	State CT	Zip Code 06074
Description Festival Pageant Supplies		Purpose of Expenditure (by code) FNDR	Event # 06112011A
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Candidate(s) Name (if applicable)	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$198.29
XL Color	06/12/2011	<input checked="" type="checkbox"/> Check # 1389	
Street Address 16 Southwood Rd	City Bloomfield	State CT	Zip Code 06002
Description Festival Sign and banner		Purpose of Expenditure (by code) FNDR	Event # 06112011A
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Candidate(s) Name (if applicable)	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$101.71
Frame Design	06/12/2011	<input checked="" type="checkbox"/> Check # 1390	
Street Address 1720 Ellington Rd	City South Windsor	State CT	Zip Code 06074
Description Sign Lettering		Purpose of Expenditure (by code) FNDR	Event # 06112011A
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Candidate(s) Name (if applicable)	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$193.98

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

P. Expenses Paid By Committee

Name of Payee Gary Bazzano		Date of Payment 06/12/2011		Method of Payment <input checked="" type="checkbox"/> Check # 1391		Amount
Street Address 56 Spinners Run	City South Windsor	State CT	Zip Code 06074	Purpose of Expenditure (by code) POST	<input type="checkbox"/> Debit Card	
Description Stamps						Event #
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)		Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed		\$22.00

Name of Payee Geisslers Supermarket		Date of Payment 06/13/2011		Method of Payment <input checked="" type="checkbox"/> Check # 1393		Amount
Street Address 965 Sullivan Ave	City South Windsor	State CT	Zip Code 06074	Purpose of Expenditure (by code) FNDR	<input type="checkbox"/> Debit Card	
Description Food						Event # 06112011A
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)		Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed		\$932.50

Name of Payee Sals Pizza		Date of Payment 06/13/2011		Method of Payment <input checked="" type="checkbox"/> Check # 1394		Amount
Street Address 1735 Ellington Rd	City South Windsor	State CT	Zip Code 06074	Purpose of Expenditure (by code) FNDR	<input type="checkbox"/> Debit Card	
Description Fried Dough and Sauce						Event # 06112011A
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)		Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed		\$350.00

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

P. Expenses Paid By Committee

Name of Payee South Windsor Rotary		Date of Payment 06/13/2011		Method of Payment <input checked="" type="checkbox"/> Check # 1397		Amount
Street Address P.O. Box		City South Windsor	State CT	Zip Code 06074	Purpose of Expenditure (bv code) FNR	
Description Burgers						Event # 06112011A
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)		Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed		\$115.16

Name of Payee XL Color		Date of Payment 06/16/2011		Method of Payment <input checked="" type="checkbox"/> Check # 1398		Amount
Street Address 16 Southwood Rd		City Bloomfield	State CT	Zip Code 06002	Purpose of Expenditure (bv code) FNR	
Description Festival Signs						Event # 06112011A
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)		Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed		\$234.98

Name of Payee Highland Park Market		Date of Payment 06/16/2011		Method of Payment <input checked="" type="checkbox"/> Check # 1399		Amount
Street Address 317 Highland St		City Manchester	State CT	Zip Code 06040	Purpose of Expenditure (bv code) FNR	
Description Biscuits						Event # 06112011A
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)		Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed		\$600.00

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

P. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment	Amount
Hap Fitts	06/17/2011	<input checked="" type="checkbox"/> Check # 1400 <input type="checkbox"/> Debit Card	
Street Address 239 Oak St	City South Windsor	State CT	Zip Code 06074
Description Mailings			Event #
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed
			\$88.05
Dick Cullen	06/17/2011	<input checked="" type="checkbox"/> Check # 1401 <input type="checkbox"/> Debit Card	
Street Address 218 Lisa Dr	City South Windsor	State CT	Zip Code 06074
Description Copies of Checks			Event #
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed
			\$10.80
XL Color	06/17/2011	<input checked="" type="checkbox"/> Check # 1402 <input type="checkbox"/> Debit Card	
Street Address 16 Southwood Rd	City Bloomfield	State CT	Zip Code 06002
Description Festival Signs			Event # 06112011A
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed
			\$491.84

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

P. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment	Amount
Bill Aman	06/17/2011	<input checked="" type="checkbox"/> Check # 1403	
Street Address 078 Strong Rd	City South Windsor	State CT	Zip Code 06074
Description Festival Supplies			Event # 06112011A
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed
			\$35.15
XL Color	06/17/2011	<input checked="" type="checkbox"/> Check # 1404	
Street Address 16 Southwood Rd	City Bloomfield	State CT	Zip Code 06002
Description Festival Signs			Event # 06112011A
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed
			\$261.03
Dzen Bros Inc	06/17/2011	<input checked="" type="checkbox"/> Check # 1406	
Street Address 87 Windsorville Rd	City Ellington	State CT	Zip Code 06029
Description Strawberries for Festival			Event # 06112011A
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed
			\$4,205.00

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

P. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment	Amount
Mitchell Fuel Co	06/17/2011	<input checked="" type="checkbox"/> Check # 1407	
Street Address 1209 Sullivan Ave	City South Windsor	State CT	Zip Code 06074
Description Propane and Diesel Fuel		Purpose of Expenditure (by code) FNRD	Event # 06112011A
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed
			\$156.99
Windsor Ave Donuts Inc	06/17/2011	<input checked="" type="checkbox"/> Check # 1408	
Street Address 503 Windsor Ave	City Windsor	State CT	Zip Code 06095
Description Doughnuts for Festival		Purpose of Expenditure (by code) FNRD	Event # 06112011A
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed
			\$158.15
Hap Fitts	06/17/2011	<input checked="" type="checkbox"/> Check # 1400	
Street Address 239 Oak St	City South Windsor	State CT	Zip Code 06074
Description Mailings		Purpose of Expenditure (by code) RCW	Event #
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed
			\$88.05

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

P. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment	Amount
Dick Cullen	06/17/2011	<input checked="" type="checkbox"/> Check # 1401	
Street Address 218 Lisa Dr	City South Windsor	State CT	Zip Code 06074
Description Copies of Checks		Purpose of Expenditure (by code) RCW	<input type="checkbox"/> Debit Card
Type of Expenditure (if applicable)			Event #
<input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E			
Candidate(s) Name (if applicable)			Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed
			\$10.80
Bill Aman	06/17/2011	<input checked="" type="checkbox"/> Check # 1403	
Street Address 878 Strong Rd	City South Windsor	State CT	Zip Code 06074
Description Festival Supplies		Purpose of Expenditure (by code) RCW	<input type="checkbox"/> Debit Card
Type of Expenditure (if applicable)			Event #
<input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E			06112011A
Candidate(s) Name (if applicable)			Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed
			\$35.15
Teri Dickey-Gagnat	06/17/2011	<input checked="" type="checkbox"/> Check # 1405	
Street Address 30 Devonshire Dr	City South Windsor	State CT	Zip Code 06074
Description Vendor Printing and Postage		Purpose of Expenditure (by code) RCW	<input type="checkbox"/> Debit Card
Type of Expenditure (if applicable)			Event #
<input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E			06112011A
Candidate(s) Name (if applicable)			Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed
			\$377.24

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

P. Expenses Paid By Committee

Name of Payee	Date of Payment	Method of Payment	Amount	
SWHS Friends of the Performing Arts	06/21/2011	<input checked="" type="checkbox"/> Check # 1409 <input type="checkbox"/> Debit Card	\$300.00	
Street Address 141 Woodland Dr	City South Windsor	State CT		Zip Code 06074
Description Fried Dough Booth		Event # 06112011A		
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)		
		Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed		
David Prague	06/21/2011	<input checked="" type="checkbox"/> Check # 1410 <input type="checkbox"/> Debit Card	\$100.00	
Street Address 60 Krawski Dr	City South Windsor	State CT		Zip Code 06074
Description Festival Security		Event # 06112011A		
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)		
		Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed		
Karen Prague	06/21/2011	<input checked="" type="checkbox"/> Check # 1411 <input type="checkbox"/> Debit Card	\$88.46	
Street Address 60 Krawski Dr	City South Windsor	State CT		Zip Code 06074
Description Food for Festival		Event # 06112011A		
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)		
		Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed		

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

P. Expenses Paid By Committee

Name of Payee Bill Carroll		Date of Payment 06/23/2011		Method of Payment <input checked="" type="checkbox"/> Check # 1412		Amount
Street Address 188 Scott Dr	City South Windsor	State CT	Zip Code 06074	Purpose of Expenditure (by code) FNDR <input type="checkbox"/> Debit Card		
Description Soda for Festival					Event # 06112011A	
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)		Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed		\$55.60

Name of Payee Cary Prague		Date of Payment 06/23/2011		Method of Payment <input checked="" type="checkbox"/> Check # 1392		Amount
Street Address 60 Krawski Dr	City South Windsor	State CT	Zip Code 06074	Purpose of Expenditure (by code) FNDR <input type="checkbox"/> Debit Card		
Description Food and Supplies for Festival					Event # 06112011A	
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)		Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed		\$2,770.76

Name of Payee Bill Carroll		Date of Payment 06/23/2011		Method of Payment <input checked="" type="checkbox"/> Check # 1412		Amount
Street Address 188 Scott Dr	City South Windsor	State CT	Zip Code 06074	Purpose of Expenditure (by code) RCW <input type="checkbox"/> Debit Card		
Description Soda for Festival					Event # 06112011A	
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)		Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed		\$55.60

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

P. Expenses Paid By Committee

Name of Payee Cary Prague		Date of Payment 06/23/2011		Method of Payment <input checked="" type="checkbox"/> Check # 1392		Amount
Street Address 60 Krawski Dr	City South Windsor	State CT	Zip Code 06074	Purpose of Expenditure (by code) RCW	<input type="checkbox"/> Debit Card	
Description Food and Supplies for Festival						Event # 06112011A
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)		Office Sought	<input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$2,790.76
Total of Section P						\$20,256.18

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

Q. Campaign Expenses Paid By Candidate

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

IV. EXPENDITURES

NAME OF COMMITTEE						FILING DUE DATE	
South Windsor Republican Town Committee						Amended 07/11/2011	
R. Expenses Incurred on Committee Credit Card							
Name of Issuing Institution				Type of Credit Card:			
				<input type="checkbox"/> Visa <input type="checkbox"/> Master Card <input type="checkbox"/> Discover <input type="checkbox"/> American Express			
				<input type="checkbox"/> Other			
Name of Vendor			Purpose of Expenditure (by code)		Date of Transaction		Amount
Street Address		City		State	Zip Code	Event #	
Description							
Total of Section R							

IV. EXPENDITURES

IV. EXPENDITURES				
NAME OF COMMITTEE				FILING DUE DATE
South Windsor Republican Town Committee				Amended 07/11/2011
S. Expenses Incurred By Committee but Not Paid During this Period				
Name of Creditor Keifer's Kettle Korn			Event # 06112011A	Date Incurred 06/11/2011
Street Address 21 Shore Dr		City Griswold	State CT	Zip Code 06351
Purpose of Expenditure (by code) FNDR				
Description Food - Italian Ice				
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)		Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed
				\$140.00
Name of Creditor TonSha			Event # 06112011A	Date Incurred 06/11/2011
Street Address 81 Commerce Way		City South Windsor	State CT	Zip Code 06074
Purpose of Expenditure (by code) FNDR				
Description Placemats				
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)		Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed
				\$408.10

IV. EXPENDITURES

NAME OF COMMITTEE					FILING DUE DATE
South Windsor Republican Town Committee					Amended 07/11/2011
S. Expenses Incurred By Committee but Not Paid During this Period					
Name of Creditor USA Hauling			Event # 06112011A	Date Incurred 06/11/2011	Amount Incurred (Estimate or Actual)
Street Address PO Box 808	City East Windsor	State CT	Zip Code 06088	Purpose of Expenditure (by code) FNDR	
Description Dumpster for SF					
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)		Office Sought	<input type="checkbox"/> Supported <input type="checkbox"/> Opposed
					\$84.80
Name of Creditor J.T. & S Truck Rental			Event # 06112011A	Date Incurred 06/11/2011	Amount Incurred (Estimate or Actual)
Street Address 130 Brainard Rd	City Hartford	State CT	Zip Code 06114	Purpose of Expenditure (by code) FNDR	
Description Rented a truck					
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)		Office Sought	<input type="checkbox"/> Supported <input type="checkbox"/> Opposed
					\$106.00

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

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

Name of Creditor Mitchell Fuel Co. Inc			Event # 06112011A	Date Incurred 06/11/2011	Amount Incurred (Estimate or Actual) \$315.12
Street Address 1209 Sullivan Ave	City South Windsor	State CT	Zip Code 06074	Purpose of Expenditure (by code) FNDR	
Description Propane					
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)		Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed	

Name of Creditor Environmental Services			Event # 06112011A	Date Incurred 06/11/2011	Amount Incurred (Estimate or Actual) \$335.26
Street Address 90 Brookfield St	City South Windsor	State CT	Zip Code 06074	Purpose of Expenditure (by code) FNDR	
Description Pottie Rental					
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)		Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed	

IV. EXPENDITURES

IV. EXPENDITURES				
NAME OF COMMITTEE				FILING DUE DATE
South Windsor Republican Town Committee				Amended 07/11/2011
S. Expenses Incurred By Committee but Not Paid During this Period				
Name of Creditor Design Professionals			Event # 06112011A	Date Incurred 06/11/2011
Street Address 425 Sullivan Ave		City South Windsor	State CT	Zip Code 06074
Purpose of Expenditure (by code) FNDR				
Description Colored Exhibits				
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)		Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed
				\$90.00
Total of Section S				\$1,479.28

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

T. Itemization of Reimbursements to Committee Workers and Consultants

Name of Worker/Consultant Philip E. Koboski	Date of Payment 04/03/2011	Method of Payment <input checked="" type="checkbox"/> Check # 1369	Amount
Secondary Payee USPS	Purpose of Expenditure POST	<input type="checkbox"/> Debit Card	
Street Address clark street	City South Windsor	State CT	Zip Code 06074
Description PO Box Rental Fee			
Type of Expenditure (<i>if applicable</i>) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (<i>see Instructions</i>) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Other Candidate(s) Name	Office Sought	<input type="checkbox"/> Supported <input type="checkbox"/> Opposed \$15.00
Name of Worker/Consultant Teri Dickey-Gaignat	Date of Payment 06/02/2011	Method of Payment <input checked="" type="checkbox"/> Check # 1405	Amount
Secondary Payee Staples	Purpose of Expenditure FNDR	<input type="checkbox"/> Debit Card	
Street Address 35 Talcottville Rd	City Vernon	State CT	Zip Code 06066
Description Vendor Supplies			
Type of Expenditure (<i>if applicable</i>) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (<i>see Instructions</i>) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Other Candidate(s) Name	Office Sought	<input type="checkbox"/> Supported <input type="checkbox"/> Opposed \$113.24

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

T. Itemization of Reimbursements to Committee Workers and Consultants

Name of Worker/Consultant Teri Dickey-Gaignat	Date of Payment 06/02/2011	Method of Payment <input checked="" type="checkbox"/> Check # 1405	Amount
Secondary Payee USPS	Purpose of Expenditure FNDR	<input type="checkbox"/> Debit Card	
Street Address 850 Clark St	City South Windsor	State CT	Zip Code 06074
Description Vendor Postage			
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Other Candidate(s) Name	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$264.00

Name of Worker/Consultant John Mitchell	Date of Payment 06/05/2011	Method of Payment <input checked="" type="checkbox"/> Check # 1380	Amount
Secondary Payee Sam's Club	Purpose of Expenditure FNDR	<input type="checkbox"/> Debit Card	
Street Address 69 Pavilions Dr	City Manchester	State CT	Zip Code 06040
Description Water Bottles			
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Other Candidate(s) Name	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$426.72

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

T. Itemization of Reimbursements to Committee Workers and Consultants

Name of Worker/Consultant June Cottle	Date of Payment 06/12/2011	Method of Payment <input checked="" type="checkbox"/> Check # 1387	Amount
Secondary Payee USPS	Purpose of Expenditure FNDR	<input type="checkbox"/> Debit Card	
Street Address 850 Clark St	City South Windsor	State CT	Zip Code 06074
Description Postage			
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Other Candidate(s) Name	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$26.40
Name of Worker/Consultant June Cottle	Date of Payment 06/12/2011	Method of Payment <input checked="" type="checkbox"/> Check # 1387	Amount
Secondary Payee Jay's Print & Copy Center	Purpose of Expenditure FNDR	<input type="checkbox"/> Debit Card	
Street Address 607 Burnside Ave	City East Hartford	State CT	Zip Code 06108
Description Printing			
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Other Candidate(s) Name	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$29.68

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

T. Itemization of Reimbursements to Committee Workers and Consultants

Name of Worker/Consultant Kathy Daugherty	Date of Payment 06/12/2011	Method of Payment <input checked="" type="checkbox"/> Check # 1388	Amount
Secondary Payee AC Moore	Purpose of Expenditure FNDR	<input type="checkbox"/> Debit Card	
Street Address 179C Hale Rd	City Manchester	State CT	Zip Code 06040
Description Pageant Supplies			
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Other Candidate(s) Name	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$89.49
Name of Worker/Consultant Kathy Daugherty	Date of Payment 06/12/2011	Method of Payment <input checked="" type="checkbox"/> Check # 1388	Amount
Secondary Payee Dollar Store	Purpose of Expenditure FNDR	<input type="checkbox"/> Debit Card	
Street Address 35-26 Talcottville Rd	City Vernon	State CT	Zip Code 06066
Description Pageant Supplies			
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Other Candidate(s) Name	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$22.26

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

T. Itemization of Reimbursements to Committee Workers and Consultants

Name of Worker/Consultant Kathy Daugherty	Date of Payment 06/12/2011	Method of Payment <input checked="" type="checkbox"/> Check # 1388	Amount
Secondary Payee I Party	Purpose of Expenditure FNDR	<input type="checkbox"/> Debit Card	
Street Address 1444 Pleasant Valley Rd	City Manchester	State CT	Zip Code 06040
Description Pageant Supplies			
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Other Candidate(s) Name	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$86.54
Name of Worker/Consultant Gary Bazzano	Date of Payment 06/12/2011	Method of Payment <input checked="" type="checkbox"/> Check # 1391	Amount
Secondary Payee USPS	Purpose of Expenditure POST	<input type="checkbox"/> Debit Card	
Street Address 850 Clark St	City South Windsor	State CT	Zip Code 06074
Description Stamps			
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Other Candidate(s) Name	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$22.00

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

T. Itemization of Reimbursements to Committee Workers and Consultants

Name of Worker/Consultant Cary Prague	Date of Payment 06/13/2011	Method of Payment <input checked="" type="checkbox"/> Check # 1392	Amount
Secondary Payee Oriental Trading Co	Purpose of Expenditure FNDR	<input type="checkbox"/> Debit Card	
Street Address 11201 Giles Rd	City La Vista	State NE	Zip Code 68128
Description American Flags			
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Other Candidate(s) Name	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$131.99
Name of Worker/Consultant Cary Prague	Date of Payment 06/13/2011	Method of Payment <input checked="" type="checkbox"/> Check # 1392	Amount
Secondary Payee Geisslers Supermarket	Purpose of Expenditure FNDR	<input type="checkbox"/> Debit Card	
Street Address 965 Sullivan Ave	City South Windsor	State CT	Zip Code 06074
Description Food			
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Other Candidate(s) Name	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$15.16

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

T. Itemization of Reimbursements to Committee Workers and Consultants

Name of Worker/Consultant Cary Prague	Date of Payment 06/13/2011	Method of Payment <input checked="" type="checkbox"/> Check # 1392	Amount
Secondary Payee Dicks Sporting Goods	Purpose of Expenditure FNDR	<input type="checkbox"/> Debit Card	
Street Address 179 Buckland Hills Dr	City Manchester	State CT	Zip Code 06040
Description Tents			
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Other Candidate(s) Name	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$127.16
Name of Worker/Consultant Cary Prague	Date of Payment 06/13/2011	Method of Payment <input checked="" type="checkbox"/> Check # 1392	Amount
Secondary Payee Sam's Club	Purpose of Expenditure FNDR	<input type="checkbox"/> Debit Card	
Street Address 69 Pavilions Dr	City Manchester	State CT	Zip Code 06040
Description Feed			
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Other Candidate(s) Name	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$483.59

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

T. Itemization of Reimbursements to Committee Workers and Consultants

Name of Worker/Consultant Cary Prague	Date of Payment 06/13/2011	Method of Payment <input checked="" type="checkbox"/> Check # 1392	Amount
Secondary Payee Restaurant Depot	Purpose of Expenditure FNDR	<input type="checkbox"/> Debit Card	
Street Address 91 Brainard Rd	City Hartford	State CT	Zip Code 06114
Description Food			
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Other Candidate(s) Name	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$380.45
Name of Worker/Consultant Cary Prague	Date of Payment 06/13/2011	Method of Payment <input checked="" type="checkbox"/> Check # 1392	Amount
Secondary Payee M&R Liquors	Purpose of Expenditure FNDR	<input type="checkbox"/> Debit Card	
Street Address Sullivan Avenue	City South Windsor	State CT	Zip Code 06074
Description Drinks			
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Other Candidate(s) Name	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$178.68

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

T. Itemization of Reimbursements to Committee Workers and Consultants

Name of Worker/Consultant Cary Prague	Date of Payment 06/13/2011	Method of Payment <input checked="" type="checkbox"/> Check # 1392	Amount
Secondary Payee Lots & More	Purpose of Expenditure FNDR	<input type="checkbox"/> Debit Card	
Street Address 770 Sullivan Ave	City South Windsor	State CT	Zip Code 06074
Description Supplies			
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Other Candidate(s) Name	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$61.41

Name of Worker/Consultant Cary Prague	Date of Payment 06/13/2011	Method of Payment <input checked="" type="checkbox"/> Check # 1392	Amount
Secondary Payee Big Y World Class Market	Purpose of Expenditure FNDR	<input type="checkbox"/> Debit Card	
Street Address 234 Tolland Tpke	City Manchester	State CT	Zip Code 06040
Description Feed			
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Other Candidate(s) Name	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$191.96

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

T. Itemization of Reimbursements to Committee Workers and Consultants

Name of Worker/Consultant Cary Prague	Date of Payment 06/13/2011	Method of Payment <input checked="" type="checkbox"/> Check # 1392	Amount
Secondary Payee ToysRus	Purpose of Expenditure FNDR	<input type="checkbox"/> Debit Card	
Street Address Pleasant Valley Rd	City Manchester	State CT	Zip Code 06040
Description Pageant Prizes			
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Other Candidate(s) Name	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$100.00

Name of Worker/Consultant Cary Prague	Date of Payment 06/13/2011	Method of Payment <input checked="" type="checkbox"/> Check # 1392	Amount
Secondary Payee True Value Hardware/Staples	Purpose of Expenditure FNDR	<input type="checkbox"/> Debit Card	
Street Address 30 Devonshire Dr	City South Windsor	State CT	Zip Code 06074
Description Supplies			
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Other Candidate(s) Name	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$75.42

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

T. Itemization of Reimbursements to Committee Workers and Consultants

Name of Worker/Consultant Gary Prague	Date of Payment 06/13/2011	Method of Payment <input checked="" type="checkbox"/> Check # 1392	Amount
Secondary Payee Flexo Label Solutions	Purpose of Expenditure FNDR	<input type="checkbox"/> Debit Card	
Street Address 52 Granby St	City Bloomfield	State CT	Zip Code 06002
Description Soda Labels			
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Other Candidate(s) Name	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$35.00

Name of Worker/Consultant Gary Prague	Date of Payment 06/13/2011	Method of Payment <input checked="" type="checkbox"/> Check # 1392	Amount
Secondary Payee Avery Beverages	Purpose of Expenditure FNDR	<input type="checkbox"/> Debit Card	
Street Address 520 CORBIN Ave	City New Britain	State CT	Zip Code 06052
Description Soda			
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Other Candidate(s) Name	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$441.80

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

T. Itemization of Reimbursements to Committee Workers and Consultants

Name of Worker/Consultant Cary Prague	Date of Payment 06/13/2011	Method of Payment <input checked="" type="checkbox"/> Check # 1392	Amount
Secondary Payee GoDaddy.com Inc	Purpose of Expenditure WEB	<input type="checkbox"/> Debit Card	
Street Address 60 Krawski Dr	City South Windsor	State CT	Zip Code 06074
Description Domain Name			
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Other Candidate(s) Name	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$30.34

Name of Worker/Consultant Cary Prague	Date of Payment 06/13/2011	Method of Payment <input checked="" type="checkbox"/> Check # 1392	Amount
Secondary Payee Avery Beverages	Purpose of Expenditure FNDR	<input type="checkbox"/> Debit Card	
Street Address 520 CORBIN Ave	City New Britain	State CT	Zip Code 06052
Description Soda			
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Other Candidate(s) Name	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$414.85

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

T. Itemization of Reimbursements to Committee Workers and Consultants

Name of Worker/Consultant Cary Prague	Date of Payment 06/13/2011	Method of Payment <input checked="" type="checkbox"/> Check # 1392	Amount
Secondary Payee Sam's Club	Purpose of Expenditure FNDR	<input type="checkbox"/> Debit Card	
Street Address 69 Pavilions Dr	City Manchester	State CT	Zip Code 06040
Description Food			
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Other Candidate(s) Name	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$507.65

Name of Worker/Consultant Cary Prague	Date of Payment 06/13/2011	Method of Payment <input checked="" type="checkbox"/> Check # 1392	Amount
Secondary Payee Big Y World Class Market	Purpose of Expenditure FNDR	<input type="checkbox"/> Debit Card	
Street Address 234 Tolland Tpke	City Manchester	State CT	Zip Code 06040
Description Food			
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Other Candidate(s) Name	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$196.68

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

T. Itemization of Reimbursements to Committee Workers and Consultants

Name of Worker/Consultant Cary Prague	Date of Payment 06/13/2011	Method of Payment <input checked="" type="checkbox"/> Check # 1392	Amount
Secondary Payee Flexo Label Solutions	Purpose of Expenditure FNDR	<input type="checkbox"/> Debit Card	
Street Address 52 Granby St	City Bloomfield	State CT	Zip Code 06002
Description Soda Labels			
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Other Candidate(s) Name	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$210.10

Name of Worker/Consultant Cary Prague	Date of Payment 06/13/2011	Method of Payment <input checked="" type="checkbox"/> Check # 1392	Amount
Secondary Payee Office Depot	Purpose of Expenditure FNDR	<input type="checkbox"/> Debit Card	
Street Address 49 Pavilion Dr	City Manchester	State CT	Zip Code 06040
Description photo paper and envelopes			
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Other Candidate(s) Name	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$50.87

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

T. Itemization of Reimbursements to Committee Workers and Consultants

Name of Worker/Consultant Cary Prague	Date of Payment 06/13/2011	Method of Payment <input checked="" type="checkbox"/> Check # 1392	Amount
Secondary Payee Laura Chevalier	Purpose of Expenditure FNDR	<input type="checkbox"/> Debit Card	
Street Address 3882 Marion Ave	City Memphis	State TN	Zip Code 38111
Description Artwork with rights for Label			
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Other Candidate(s) Name	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$200.00
Name of Worker/Consultant Cary Prague	Date of Payment 06/13/2011	Method of Payment <input checked="" type="checkbox"/> Check # 1392	Amount
Secondary Payee The Red Cabin	Purpose of Expenditure FNDR	<input type="checkbox"/> Debit Card	
Street Address 976 Sullivan Ave	City South Windsor	State CT	Zip Code 06074
Description Strawberry Salad Dressing			
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Other Candidate(s) Name	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$20.00

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

T. Itemization of Reimbursements to Committee Workers and Consultants

Name of Worker/Consultant Cary Prague	Date of Payment 06/13/2011	Method of Payment <input checked="" type="checkbox"/> Check # 1392	Amount
Secondary Payee LD Products	Purpose of Expenditure FNDR	<input type="checkbox"/> Debit Card	
Street Address 2500 Grand Ave	City Long Beach	State CA	Zip Code 90815
Description Ink used for Signs			
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Other Candidate(s) Name	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$90.00
Name of Worker/Consultant Hap Fitts	Date of Payment 06/17/2011	Method of Payment <input checked="" type="checkbox"/> Check # 1400	Amount
Secondary Payee USPS	Purpose of Expenditure FNDR	<input type="checkbox"/> Debit Card	
Street Address 850 Clark St	City South Windsor	State CT	Zip Code 06074
Description Ticket Mailings			
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Other Candidate(s) Name	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$88.05

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
South Windsor Republican Town Committee	Amended 07/11/2011

T. Itemization of Reimbursements to Committee Workers and Consultants

Name of Worker/Consultant Dick Cullen	Date of Payment 06/17/2011	Method of Payment <input checked="" type="checkbox"/> Check # 1401	Amount
Secondary Payee Staples	Purpose of Expenditure PRNT	<input type="checkbox"/> Debit Card	
Street Address 35 Talcottville Rd	City Vernon	State CT	Zip Code 06066
Description Copies			
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Other Candidate(s) Name	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$10.80
Name of Worker/Consultant Bill Aman	Date of Payment 06/17/2011	Method of Payment <input checked="" type="checkbox"/> Check # 1403	Amount
Secondary Payee The Home Depot	Purpose of Expenditure FNDR	<input type="checkbox"/> Debit Card	
Street Address 60 Buckland Hills Dr	City Manchester	State CT	Zip Code 06040
Description Gloves			
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	Other Candidate(s) Name	Office Sought <input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$27.16

IV. EXPENDITURES

NAME OF COMMITTEE						FILING DUE DATE		
South Windsor Republican Town Committee						Amended 07/11/2011		
T. Itemization of Reimbursements to Committee Workers and Consultants								
Name of Worker/Consultant Bill Aman				Date of Payment 06/17/2011		Method of Payment <input checked="" type="checkbox"/> Check # 1403		Amount
Secondary Payee Lowe's Home Center				Purpose of Expenditure FNDR		<input type="checkbox"/> Debit Card		
Street Address 31 Buckland Hills Dr			City Manchester			State CT	Zip Code 06040	
Description Tape								
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E			Other Candidate(s) Name		Office Sought		<input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$7.99
Name of Worker/Consultant Bill Carroll				Date of Payment 06/23/2011		Method of Payment <input checked="" type="checkbox"/> Check # 1412		Amount
Secondary Payee Stop & Shop				Purpose of Expenditure FNDR		<input type="checkbox"/> Debit Card		
Street Address 1739 Ellington Rd			City South Windsor			State CT	Zip Code 06074	
Description Soda for Festival								
Type of Expenditure (if applicable) <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E			Other Candidate(s) Name		Office Sought		<input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$55.60
Total of Section T						\$4,075.69		