

SEEC FORM 20

Itemized Campaign Finance Disclosure Statement
 CONNECTICUT STATE ELECTIONS ENFORCEMENT COMMISSION
 Rev. 3/11



Do Not Mark in This Space For Official Use Only

Page 1 of 17

COVER PAGE

1. NAME OF COMMITTEE				
Committee to Elect Cloud for Treasurer				
2. TREASURER NAME				
Title	First	MI	Last	Suffix
Mr.	Ray		Gilkes	
3. TREASURER ADDRESS				
Street Address		City	State	Zip Code
77 Fuller Drive		West Hartford	CT	06117
4. ELECTION/REFERENDUM DATE		5. OFFICE SOUGHT (Complete only if Candidate Committee)		6. DISTRICT NUMBER
(mm/dd/yyyy)				(if applicable)
11/08/11		Treasurer		
7. CANDIDATE NAME (Complete only if Candidate or Exploratory Committee)				
Title	First	MI	Last	Suffix
Mr.	Adam	M	Cloud	
8. TYPE OF REPORT (Check One Box)				
<div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"> <input type="checkbox"/> January 10 filing <input type="checkbox"/> April 10 filing <input type="checkbox"/> July 10 filing <input type="checkbox"/> October 10 filing <input type="checkbox"/> Independent Expenditure <input type="radio"/> Primary <input type="radio"/> Election </div> <div style="width: 33%;"> <input type="checkbox"/> 7th day preceding primary <input type="checkbox"/> 30 days following primary <input type="checkbox"/> 7th day preceding election <input type="checkbox"/> 12th day preceding election (State Central Committees Only) <input type="checkbox"/> 45 days following election not held in November </div> <div style="width: 33%;"> <input type="checkbox"/> 7th day preceding referendum <input type="checkbox"/> 45 days following referendum <input type="checkbox"/> Deficit <input checked="" type="checkbox"/> Termination </div> <div style="width: 33%;"> <input type="checkbox"/> Initial Contribution or Disbursement (PACs ONLY) <input type="checkbox"/> Amendment to Type of Report: </div> </div>				
<div style="position: relative;"> <div style="position: absolute; right: 0; top: 0; transform: rotate(90deg); transform-origin: right top;"> TOWN & CITY CLERK HARTFORD </div> <div style="position: absolute; left: 0; bottom: 0; transform: rotate(-90deg); transform-origin: left bottom;"> 12 JAN 10 A 8:37 John D. Dwyer, Sec. </div> </div>				
9. PERIOD COVERED				
Beginning Date		Ending Date		
10/26/11		thru 12/31/11		
10. CERTIFICATION				
<p>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.</p>				
 TREASURER OR DEPUTY TREASURER (SIGNATURE)		ANTHONY A. HEALS PRINT NAME OF SIGNER		1/9/12 DATE (mm/dd/yyyy)
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. 3/11

Page 2 of 17

SUMMARY PAGE TOTALS

NAME OF COMMITTEE	TYPE OF REPORT	
	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 committees		25.00
12. Balance on hand at the beginning of Reporting Period	855.20	
13. Contributions received from Individuals (Sections A and B)	6,600.00	42,390.00
14. Receipts from Other Committees (Sections C1 and C2)	250.00	1,375.00
15. Other Monetary Receipts (Sections D-K)	-0-	-0-
16a. Total Small Food and Beverage Receipts at Fair (Section L1) <i>Town Committees ONLY</i>	-0-	-0-
16b. Total Proceeds from Small Purchases at Tag Sales, Auctions or Other Sales (Section L2)	-0-	-0-
16c. Total Purchases of Advertising in a Program Book (Section L3) <i>Municipal and Town Committees ONLY</i>	-0-	-0-
17. Total Monetary Receipts (add totals for lines 13-16c)	6,850.00	43,765.00
18. Subtotals (add totals in line 12 + line 17 in Column A; and in line 11 + 17 in Column B)	7,705.20	43,790.00
19. Expenses Paid by Committee (Section P)	6,303.02	42,387.82
20. Balance on hand at close of Reporting Period (Subtract line 19 from line 18 in both Columns)	1,402.18	1,402.18
21. In-Kind Donations not Considered Contributions Received (Section L4)	-0-	-0-
22. In-Kind Contributions Received (Section M)	-0-	200.00
23. Refundable Deposit to Telephone Company (Section N)	-0-	-0-
24. Receipts of Organization Expenditures (Section O)	-0-	-0-
25. Beginning Loan Balance	-0-	
25a. + Loans Received (Section D)	-0-	-0-
25b. + Interest and Penalties on Loan	-0-	-0-
25c. - Payments on Loan	-0-	-0-
25d. Total Outstanding Loan Amount	-0-	
26. Campaign Expenses Paid by Candidate (Section Q)	-0-	-0-
27. Expenses Incurred on Committee Credit Card (Section R)	-0-	-0-
28. Expenses Incurred by Committee During this Period but Not Paid (Section S)	-0-	-0-
28a. Total Outstanding Expenses Incurred by Committee still Unpaid (Section S)	-0-	-0-

I. MONETARY RECEIPTS

Section B. Additional Page

NAME OF COMMITTEE						TYPE OF REPORT	
B. Itemized Contributions from Individuals							
Last Name Bosworth			First James		MI	Principal Occupation Business Owner	
Residential Street Address 4 Apple Lane			City Simsbury	State CT	Zip Code 06092	Name of Employer Backnine	
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 is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Amount of Contribution 250.00
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 a 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 checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 10/27/11		Aggregate contributions 250.00		
Last Name Gorman			First Reid		MI	Principal Occupation Business Owner	
Residential Street Address 4 Apple Lane			City Simsbury	State CT	Zip Code 06092	Name of Employer Backnine	
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 is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Amount of Contribution 250.00
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 a 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 checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 10/30/11		Aggregate contributions 250.00		
Last Name Burris			First Jerry		MI	Principal Occupation Business Executive	
Residential Street Address 45 Westland Rd			City Avon	State CT	Zip Code 06001	Name of Employer Barnes Group	
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 is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Amount of Contribution 250.00
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 a 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 checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 10/28/11		Aggregate contributions 250.00		
Last Name Moore			First Ana		MI	Principal Occupation Real Estate Investor	
Residential Street Address 3 Buckingham Lane			City W. Hartford	State CT	Zip Code 06117	Name of Employer Self	
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 is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Amount of Contribution 250.00
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 a 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 checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received 10/28/11		Aggregate contributions 250.00		
SUBTOTAL Section B						1,000.00	

NAME OF COMMITTEE						TYPE OF REPORT	
A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor)						SUBTOTAL SECTION A \$ 50.00	
B. Itemized Contributions from Individuals							
Last Name <i>Moore</i>			First <i>Wayne</i>		MI	Principal Occupation <i>Asst. Dir of Investments</i>	
Residential Street Address <i>3 Buckingham Lane</i>			City <i>W. Hartford</i>		State <i>CT</i>	Zip Code <i>06117</i>	Name of Employer <i>City of Hartford</i>
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 is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Amount of Contribution 250.00
Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, list Event # _____			Is contributor a principal of a state contractor or prospective state contractor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 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 type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received <i>10/28/11</i>		Aggregate contributions		
Last Name <i>Libassi</i>			First <i>Peter</i>		MI	Principal Occupation <i>Retired</i>	
Residential Street Address <i>20 Loeffler Rd</i>			City <i>Blomfield</i>		State <i>CT</i>	Zip Code <i>06002</i>	Name of Employer
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 is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Amount of Contribution 250.00
Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, list Event # _____			Is contributor a principal of a state contractor or prospective state contractor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 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 <i>10/22/11</i>		Aggregate contributions		
Last Name <i>Dibella</i>			First <i>Marc</i>		MI	Principal Occupation <i>Lobbyist</i>	
Residential Street Address <i>1 Gold St</i>			City <i>Hartford</i>		State <i>CT</i>	Zip Code <i>06103</i>	Name of Employer <i>Self</i>
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input checked="" type="checkbox"/> Yes <input 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 is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Amount of Contribution 250.00
Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, list Event # _____			Is contributor a principal of a state contractor or prospective state contractor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 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 <i>10/25/11</i>		Aggregate contributions 500.00		
Last Name <i>Lazowski</i>			First <i>Alan</i>		MI	Principal Occupation <i>Business Owner</i>	
Residential Street Address <i>170 Scarborough St</i>			City <i>Hartford</i>		State <i>CT</i>	Zip Code <i>06105</i>	Name of Employer <i>LAZ Parking</i>
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 is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Amount of Contribution 250.00
Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, list Event # _____			Is contributor a principal of a state contractor or prospective state contractor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 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 <i>9/28/11</i>		Aggregate contributions 500.00		
SUBTOTAL Section B-This Page							1,000.00
TOTAL of additional Section B Pages							
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 13 of Summary Page)							

NAME OF COMMITTEE						TYPE OF REPORT	
A. Total Contributions from Small Contributors-Received this Period ONLY <small>(See instructions for definition of Small Contributor)</small>						\$	
B. Itemized Contributions from Individuals							
Last Name <i>Shipman</i>			First <i>Sonia</i>		MI	Principal Occupation <i>Retired</i>	
Residential Street Address <i>63 Kenmore Rd</i>			City <i>Bloomfield</i>	State <i>CT</i>	Zip Code <i>06002</i>	Name of Employer	
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 is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Amount of Contribution <div style="font-size: 1.2em;">250.00</div>
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 a 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 checked="" type="checkbox"/> No				
Method of contribution: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received <i>10/6/11</i>		Aggregate contributions		
Last Name <i>Keaveny</i>			First <i>Brian</i>		MI	Principal Occupation <i>Requested</i>	
Residential Street Address <i>33 Abar Lane</i>			City <i>S. Windsor</i>	State	Zip Code <i>06074</i>	Name of Employer	
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 is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Amount of Contribution <div style="font-size: 1.2em;">75.00</div>
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 a 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 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 <i>10/7/11</i>		Aggregate contributions		
Last Name <i>Halloran</i>			First <i>Robert</i>		MI	Principal Occupation <i>Attorney</i>	
Residential Street Address <i>791 Prospect Ave</i>			City <i>W. Hartford</i>	State <i>CT</i>	Zip Code <i>06105</i>	Name of Employer <i>Self</i>	
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 is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Amount of Contribution <div style="font-size: 1.2em;">250.00</div>
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 a 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 checked="" type="checkbox"/> No				
Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received <i>11/3/11</i>		Aggregate contributions		
Last Name <i>Beccaro</i>			First <i>William</i>		MI	Principal Occupation <i>Attorney</i>	
Residential Street Address <i>12 New City Street</i>			City <i>Essex</i>	State <i>CT</i>	Zip Code <i>06424</i>	Name of Employer <i>Self</i>	
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 is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Amount of Contribution <div style="font-size: 1.2em;">250.00</div>
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 a 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 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 <i>11/1/11</i>		Aggregate contributions		
SUBTOTAL Section B-This Page						825.00	
TOTAL of additional Section B-Pages							
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 13 of Summary Page)							

NAME OF COMMITTEE						TYPE OF REPORT	
A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor)						SUBTOTAL SECTION A \$	
B. Itemized Contributions from Individuals							
Last Name Hamilton		First Samuel		MI	Principal Occupation President		
Residential Street Address 309 Kennedy Rd		City Manchester	State CT	Zip Code 06042	Name of Employer HEDCO		
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 is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Amount of Contribution 250.00	
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 a 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 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 11/3/11		Aggregate contributions			
Last Name Carnilliere		First Anne		MI	Principal Occupation N/A		
Residential Street Address 60 Old Common Rd.		City Wethersfield	State CT	Zip Code 06099	Name of Employer		
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 is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Amount of Contribution 250.00	
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 a 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 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 11/3/11		Aggregate contributions			
Last Name Joseph		First Mearney		MI	Principal Occupation Attorney		
Residential Street Address 8 West Borough Dr.		City Weatogue	State CT	Zip Code 06089	Name of Employer Granmore, FitzGerald & Mearney		
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 is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Amount of Contribution 250.00	
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 a 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 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 11/1/11		Aggregate contributions			
Last Name Cloud		First Christopher		MI	Principal Occupation Lobbyist		
Residential Street Address 242 Talcott Natch		City Farmington	State CT	Zip Code 06033	Name of Employer CCK		
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 is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Amount of Contribution 250.00	
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 a 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 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 11/2/11		Aggregate contributions 500.00			
SUBTOTAL Section B-This Page						1,000.00	
TOTAL of additional Section B Pages							
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 13 of Summary Page)							

NAME OF COMMITTEE						TYPE OF REPORT	
A. Total Contributions from Small Contributors-Received this Period ONLY <small>(See instructions for definition of Small Contributor)</small>						SUBTOTAL SECTION A \$	
B. Itemized Contributions from Individuals							
Last Name Epstein			First Juda		MI	Principal Occupation Attorney	
Residential Street Address 245 Wilson St			City Fairfield		State CT	Zip Code 06432	Name of Employer Self
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 is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Amount of Contribution 250.00	
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 a 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 10/26/11		Aggregate contributions 500.00			
Last Name Washington			First Adrian		MI	Principal Occupation Real Estate Developer	
Residential Street Address 1925 Shepard St NW			City Washington D.C.		State	Zip Code 20011	Name of Employer Self
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 is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Amount of Contribution 250.00	
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 a 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 9/15/11		Aggregate contributions 250.00			
Last Name McCabe			First Carol		MI	Principal Occupation N/A	
Residential Street Address 11 Forest Rd			City W. Hartford		State CT	Zip Code 06119	Name of Employer
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input checked="" type="checkbox"/> Yes <input 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 is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Amount of Contribution 250.00	
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 a 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 11/9/11		Aggregate contributions 500.00			
Last Name Cimini			First Peter		MI	Principal Occupation Lobbyist	
Residential Street Address 71 Hunter Ridge			City Rocky Hill		State CT	Zip Code 06067	Name of Employer Self
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input checked="" type="checkbox"/> Yes <input 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 is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Amount of Contribution 250.00	
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 a 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 11/4/11		Aggregate contributions 500.00			
SUBTOTAL Section B-This Page						1,000.00	
TOTAL of additional Section B Pages							
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 13 of Summary Page)							

NAME OF COMMITTEE						TYPE OF REPORT		
A. Total Contributions from Small Contributors-Received this Period ONLY <small>(See instructions for definition of Small Contributor)</small>						\$		
B. Itemized Contributions from Individuals								
Last Name Cimini			First Jacqueline		MI	Principal Occupation Requested		
Residential Street Address 71 Hunter Ridge			City Rocky Hill	State CT	Zip Code 06067	Name of Employer		
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 is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			Amount of Contribution 250.00		
Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, list Event # _____			Is contributor a principal of a 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 11/6/11		Aggregate contributions 500.00			
Last Name Rappaport			First Jerome		MI	Principal Occupation Requested		
Residential Street Address 419 Grove St			City Needham	State MA	Zip Code 02492	Name of Employer		
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 is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			Amount of Contribution 250.00		
Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, list Event # _____			Is contributor a principal of a 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 10/31/11		Aggregate contributions 250.00			
Last Name Rappaport			First Lori		MI	Principal Occupation Requested		
Residential Street Address 419 Grove St			City Needham	State MA	Zip Code 02492	Name of Employer		
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 is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			Amount of Contribution 250.00		
Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, list Event # _____			Is contributor a principal of a 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 11/4/11		Aggregate contributions 125.00			
Last Name Van der Hoef			First Christopher		MI	Principal Occupation Lobbyist		
Residential Street Address 38 Republic Dr			City Bloomfield	State CT	Zip Code 06002	Name of Employer		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input checked="" type="checkbox"/> Yes <input 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 is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			Amount of Contribution 125.00		
Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, list Event # _____			Is contributor a principal of a 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 11/4/11		Aggregate contributions 125.00			
SUBTOTAL Section B-This Page						875.00		
TOTAL of additional Section B Pages								
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 13 of Summary Page)								

NAME OF COMMITTEE					TYPE OF REPORT	
A. Total Contributions from Small Contributors Received this Period ONLY <small>(See instructions for definition of Small Contributor)</small>					SUBTOTAL SECTION A	
					\$	
B. Itemized Contributions from Individuals						
Last Name <i>Bost</i>		First <i>Teresa</i>		MI	Principal Occupation <i>Requested</i>	
Residential Street Address <i>123 Reddington Rd.</i>		City <i>Whitehaus Station NJ</i>	State <i>NJ</i>	Zip Code <i>08889</i>	Name of Employer	
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 is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Amount of Contribution <i>100.00</i>
Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event #</i>		Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <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 <i>10/28/11</i>	Aggregate contributions	
Last Name <i>Simpson</i>		First <i>Janel</i>		MI	Principal Occupation <i>Chief of Staff</i>	
Residential Street Address <i>8 Ingelside</i>		City <i>Farmington</i>	State <i>CT</i>	Zip Code <i>06032</i>	Name of Employer <i>Phoenix Insurance</i>	
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 is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Amount of Contribution <i>250.00</i>
Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event #</i>		Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <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 <i>11/8/11</i>	Aggregate contributions	
Last Name <i>Wenke</i>		First <i>Diann</i>		MI	Principal Occupation <i>N/A</i>	
Residential Street Address <i>51 Mountain Spring Rd</i>		City <i>Farmington</i>	State <i>CT</i>	Zip Code <i>06032</i>	Name of Employer	
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 is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Amount of Contribution <i>250.00</i>
Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event #</i>		Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No				
Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				Date Received <i>11/14/11</i>	Aggregate contributions	
Last Name <i>Wenike</i>		First <i>Bill</i>		MI	Principal Occupation <i>Real Estate Developer</i>	
Residential Street Address <i>51 Mountain Spring Rd</i>		City <i>Farmington</i>	State <i>CT</i>	Zip Code <i>06032</i>	Name of Employer <i>Self</i>	
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 is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Amount of Contribution <i>250.00</i>
Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event #</i>		Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No				
Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				Date Received <i>11/14/11</i>	Aggregate contributions	
SUBTOTAL Section B-This Page					<i>850.00</i>	
TOTAL of additional Section B Pages						
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 13 of Summary Page)						

NAME OF COMMITTEE

TYPE OF REPORT

C1. Contributions from Other Committees

Name of Committee

Name of Treasurer

Address

Is this contribution associated with a ☐ Yes If yes, list fundraising event listed in Section L1? ☒ No Event #

Amount of Contribution

City

State

Zip Code

Date Received

Aggregate Contributions

Name of Committee

Name of Treasurer

Address

Is this contribution associated with a ☐ Yes If yes, list fundraising event listed in Section L1? ☐ No Event #

Amount of Contribution

City

State

Zip Code

Date Received

Aggregate Contributions

Name of Committee

Name of Treasurer

Address

Is this contribution associated with a ☐ Yes If yes, list fundraising event listed in Section L1? ☐ No Event #

Amount of Contribution

City

State

Zip Code

Date Received

Aggregate Contributions

Name of Committee

Name of Treasurer

Address

Is this contribution associated with a ☐ Yes If yes, list fundraising event listed in Section L1? ☐ No Event #

Amount of Contribution

City

State

Zip Code

Date Received

Aggregate Contributions

Name of Committee

Name of Treasurer

Address

Is this contribution associated with a ☐ Yes If yes, list fundraising event listed in Section L1? ☐ No Event #

Amount of Contribution

City

State

Zip Code

Date Received

Aggregate Contributions

Name of Committee

Name of Treasurer

Address

Is this contribution associated with a ☐ Yes If yes, list fundraising event listed in Section L1? ☐ No Event #

Amount of Contribution

City

State

Zip Code

Date Received

Aggregate Contributions

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 ☐ Surplus Distribution
☐ Payment for goods and services

Name of Committee

Name of Treasurer

Address

Date Received

Amount of Receipt

City

State

Zip Code

☐ Reimbursement for shared expense ☐ Surplus Distribution
☐ Payment for goods and services

SUBTOTAL Section C-This Page

250.00

TOTAL of additional Section C Pages

TOTAL OF ALL COMMITTEE CONTRIBUTIONS AND RECEIPTS (Enter total on Line 1 of Summary Page)

IV. EXPENDITURES
Section P. Additional Page

NAME OF COMMITTEE				TYPE OF REPORT			
Cloud for Treasurer							
P. Expenses Paid by Committee							
Name of Payee Please see Attachment for Expenditures			Date of Payment		Method of Payment		
Street Address of the Campaign		City		State	Zip Code	<input type="checkbox"/> Check # _____ <input type="checkbox"/> Debit Card	
Purpose of Expenditure (by code)	Description			Event #		Amount	
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) ○ A ○ B ○ C ○ D ○ E	Candidate(s) Name (if applicable)		Office Sought		<input type="checkbox"/> Supported <input type="checkbox"/> Opposed		
Name of Payee			Date of Payment		Method of Payment		
Street Address		City		State	Zip Code	<input type="checkbox"/> Check # _____ <input type="checkbox"/> Debit Card	
Purpose of Expenditure (by code)	Description			Event #		Amount	
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) ○ A ○ B ○ C ○ D ○ E	Candidate(s) Name (if applicable)		Office Sought		<input type="checkbox"/> Supported <input type="checkbox"/> Opposed		
Name of Payee			Date of Payment		Method of Payment		
Street Address		City		State	Zip Code	<input type="checkbox"/> Check # _____ <input type="checkbox"/> Debit Card	
Purpose of Expenditure (by code)	Description			Event #		Amount	
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) ○ A ○ B ○ C ○ D ○ E	Candidate(s) Name (if applicable)		Office Sought		<input type="checkbox"/> Supported <input type="checkbox"/> Opposed		
Name of Payee			Date of Payment		Method of Payment		
Street Address		City		State	Zip Code	<input type="checkbox"/> Check # _____ <input type="checkbox"/> Debit Card	
Purpose of Expenditure (by code)	Description			Event #		Amount	
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) ○ A ○ B ○ C ○ D ○ E	Candidate(s) Name (if applicable)		Office Sought		<input type="checkbox"/> Supported <input type="checkbox"/> Opposed		
Name of Payee			Date of Payment		Method of Payment		
Street Address		City		State	Zip Code	<input type="checkbox"/> Check # _____ <input type="checkbox"/> Debit Card	
Purpose of Expenditure (by code)	Description			Event #		Amount	
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) ○ A ○ B ○ C ○ D ○ E	Candidate(s) Name (if applicable)		Office Sought		<input type="checkbox"/> Supported <input type="checkbox"/> Opposed		
SUBTOTAL Section P-This Page							

Campaign Expenditures for Cloud for 10/26/11-12/31/11 Treasurer

Date	Type	Ck #	Amount	Code	Description
10/26/11	Debit Card		\$ 49.98	FOOD	Campaign Meeting
10/27/11	Debit Card		\$ 42.41	A-OTH	Campaign Cell Phones
10/27/11	Debit Card		\$ 21.01	A-OTH	Campaign Cell Phones
10/27/11	Debit Card		\$ 21.01	A-OTH	Campaign Cell Phones
10/28/11	Debit Card		\$ 63.78	A-OTH	Track phone minutes
10/31/11	Debit Card		\$ 22.32	FOOD	Food for campaign workers
11/2/11	Debit Card		\$ 42.50	A-OTH	Snacks and Beverages for Shelter
10/31/11	Debit Card		\$ 33.51	A-OTH	Adult Diapers for shelter
11/7/11	Check	1085	\$ 500.00	A-OTH	7th District Outreach
11/7/11	Debit Card		\$ 90.92	FOOD	Popeye's
11/8/11	Check	1123	\$ 500.00	OVHD	Miscellaneous
11/8/11	Debit Card		\$ 33.70	FOOD	Miscellaneous
11/9/11	Debit Card		\$ 408.00	FNDR	Victory Celebration
11/9/11	Check	1124	\$ 392.38	FOOD	Dinner Reimbursement
11/9/11	Check	1086	\$ 80.00	WAGE	Campaign Staff
11/10/11	Check	1125	\$ 500.00	WAGE	Campaign Staff
11/10/11	Check	1126	\$ 100.00	WAGE	Campaign Staff
11/16/11	Check	1130	\$ 1,000.00	WAGE	Campaign Staff
11/17/11	Debit Card		\$ 81.50	WEB	Paypay Fees
11/17/11	Check	1128	\$ 1,700.00	WAGE	Campaign Staff
11/23/12	Check	1132	\$ 120.00	WAGE	Campaign Staff
11/29/12	Check	1133	\$ 300.00	A-OTH	Advertisement
11/20/12	Check	1131	\$ 200.00	A-OTH	Advertisement