

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines. 12FE4M5
Donovan for Congress

ADDRESS (number and street) P.O. Box 723
 Check if different than previously reported. (ACC) Meriden CT 06450

2. **FEC IDENTIFICATION NUMBER** ▼ C C00496620 3. IS THIS REPORT NEW (N) **OR** AMENDED (A) CITY ▲ STATE ▲ ZIP CODE ▲ STATE ▼ DISTRICT
CT 05

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M / D D / Y Y Y Y in the State of
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y
07 / 01 / 2013 through 09 / 30 / 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. Jeffrey Freiser

Signature of Treasurer Mr. Jeffrey Freiser *[Electronically Filed]* Date M M / D D / Y Y Y Y
10 / 15 / 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Donovan for Congress

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	161.07	0.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	161.07	0.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	1375.05	0.00
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	1375.05	0.00
8. Cash on Hand at Close of Reporting Period (from Line 27).....	103.15	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	142008.89	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name
Donovan for Congress

Report Covering the Period: From: / / To: / /

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2012"/> (date of general election)	COLUMN C Total for <input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2012"/> (date after general election) through <input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2013"/> (last day of reporting period)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(ii) Unitemized	<input type="text" value="161.07"/>	<input type="text" value="970.82"/>
(iii) Total of contributions from individuals	<input type="text" value="161.07"/>	<input type="text" value="3996.15"/>
(b) Political Party Committees	<input type="text" value="0.00"/>	<input type="text" value="4966.97"/>
(c) Other Political Committees	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
	<input type="text" value="0.00"/>	<input type="text" value="1000.00"/>

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	2050.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
161.07	0.00	8016.97
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	0.00	3049.81
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
161.07	0.00	11066.78

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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Write or Type Committee Name

Donovan for Congress

Report Covering the Period: From: / / To: / / **II. DISBURSEMENTS**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES		
<input type="text" value="1375.05"/>	<input type="text" value="0.00"/>	<input type="text" value="11865.14"/>
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Of All Other Loans		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="11.00"/>
(b) Political Party Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 12

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(c) Other Political Committees (such as PACs)		
0.00	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))		
0.00	0.00	11.00
21. OTHER DISBURSEMENTS		
0.00	0.00	-10.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)		
1375.05	0.00	11866.14

III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

161.07	0.00	8005.97
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IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

1375.05	0.00	8815.33
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V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1317.13
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	161.07
25. SUBTOTAL (add Line 23 and Line 24).....	1478.20
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	1375.05
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	103.15

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 12			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Donovan for Congress

Full Name (Last, First, Middle Initial) A. Anthem Blue Cross and Blue Shield			Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2013
Mailing Address P.O Box 11017			Amount of Each Disbursement this Period 390.21
City Lewiston	State ME	Zip Code 04243-9468	Transaction ID : D517218
Purpose of Disbursement Insurance Premium		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 2012 General Debt		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. KEJD Compliance			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2013
Mailing Address 347 Hazel Avenue			Amount of Each Disbursement this Period 250.00
City St. Louis	State MO	Zip Code 63119	Transaction ID : D517214
Purpose of Disbursement Compliance Consulting		Category/ Type 003	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 2012 General Debt		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) c. KEJD Compliance			Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2013
Mailing Address 347 Hazel Avenue			Amount of Each Disbursement this Period 250.00
City St. Louis	State MO	Zip Code 63119	Transaction ID : D517215
Purpose of Disbursement Compliance Consulting		Category/ Type 003	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 2012 General Debt		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....	890.21
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 12			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Donovan for Congress

Full Name (Last, First, Middle Initial) A. Salsa Labs, Inc		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2013
Mailing Address 1700 Connecticut Ave, NW Suite 403		Amount of Each Disbursement this Period 160.00
City Washington State DC Zip Code 20009	Purpose of Disbursement Web Expenses	Transaction ID : D517216
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 2012 General Debt	
State: District:		

Full Name (Last, First, Middle Initial) B. Salsa Labs, Inc		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2013
Mailing Address 1700 Connecticut Ave, NW Suite 403		Amount of Each Disbursement this Period 160.00
City Washington State DC Zip Code 20009	Purpose of Disbursement Web Expenses	Transaction ID : D517217
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 2012 General Debt	
State: District:		

Full Name (Last, First, Middle Initial) c. Salsa Labs, Inc		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2013
Mailing Address 1700 Connecticut Ave, NW Suite 403		Amount of Each Disbursement this Period 160.00
City Washington State DC Zip Code 20009	Purpose of Disbursement Database Services	Transaction ID : D519531
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 2012 General Debt	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	480.00
TOTAL This Period (last page this line number only).....	1370.21

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Donovan for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Anthem Blue Cross and Blue Shield

Mailing Address P.O Box 11017

City State Zip Code
Lewiston ME 04243-9468

Nature of Debt (Purpose):
Insurance Premium

Transaction ID : D477233

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Christian Murray Design

Mailing Address 1028 Boulevard

City State Zip Code
West Hartford CT 06119-1801

Nature of Debt (Purpose):
Communication Consulting

Transaction ID : D466048

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Christian Murray Design

Mailing Address 1028 Boulevard

City State Zip Code
West Hartford CT 06119-1801

Nature of Debt (Purpose):
Communication Consulting

Transaction ID : D466050

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="13752.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Donovan for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Connecticut Light & Power		Nature of Debt (Purpose): Utilities
Mailing Address P.O Box 150493		
City	State	Zip Code
Hartford	CT	06115-0493

Outstanding Balance Beginning This Period	Transaction ID : D465461	
<input type="text" value="1261.82"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="1261.82"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Connecticut Light & Power		Nature of Debt (Purpose): Utilities
Mailing Address P.O Box 150493		
City	State	Zip Code
Hartford	CT	06115-0493

Outstanding Balance Beginning This Period	Transaction ID : D466442	
<input type="text" value="123.04"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="123.04"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Day Pitney LLP		Nature of Debt (Purpose): Legal Services
Mailing Address PO Box 4162324		
City	State	Zip Code
Boston	MA	02241-6234

Outstanding Balance Beginning This Period	Transaction ID : D450634	
<input type="text" value="34668.71"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="34668.71"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="36053.57"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

Donovan for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Day Pitney LLP

Nature of Debt (Purpose):
Legal Services

Mailing Address PO Box 4162324

City State Zip Code
Boston MA 02241-6234

Outstanding Balance Beginning This Period

50511.86

Transaction ID : D465464

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

50511.86

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Day Pitney LLP

Nature of Debt (Purpose):
Legal Services

Mailing Address PO Box 4162324

City State Zip Code
Boston MA 02241-6234

Outstanding Balance Beginning This Period

1273.75

Transaction ID : D465465

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1273.75

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mission Control, Inc.

Nature of Debt (Purpose):
Printing (Field)

Mailing Address 114 A Mansfield Hollow Rd.

City State Zip Code
Mansfield Center CT 06250

Outstanding Balance Beginning This Period

13248.66

Transaction ID : D465467

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

13248.66

- 1) **SUBTOTALS** This Period This Page (optional) ▶
- 2) **TOTALS** This Period (last page this line number only) ▶
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶
- 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

65034.27

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 12 OF 12
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

Donovan for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Salsa Labs, Inc	Nature of Debt (Purpose): Web Expenses
Mailing Address 1700 Connecticut Ave, NW Suite 403	
City State Zip Code Washington DC 20009	

Outstanding Balance Beginning This Period 160.00	Transaction ID : D488132	
Amount Incurred This Period 0.00	Payment This Period 160.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Zeldes, Needle & Cooper	Nature of Debt (Purpose): Legal Services
Mailing Address 1000 Lafayette Blvd Post Office Box 1740	
City State Zip Code Bridgeport CT 06604-4725	

Outstanding Balance Beginning This Period 26035.65	Transaction ID : D467296	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 26035.65

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Zeldes, Needle & Cooper	Nature of Debt (Purpose): Legal Services
Mailing Address 1000 Lafayette Blvd Post Office Box 1740	
City State Zip Code Bridgeport CT 06604-4725	

Outstanding Balance Beginning This Period 1133.40	Transaction ID : D479100	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1133.40

1) SUBTOTALS This Period This Page (optional)	27169.05
2) TOTALS This Period (last page this line number only)	142008.89
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	142008.89