

48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL DEBICELLA FOR CONGRESS 2014			
ADDRESS (number and street) P.O. BOX 369			
CITY, STATE, and ZIP CODE FAIRFIELD CT 06824			
2. NAME OF CANDIDATE DAN DEBICELLA	3. OFFICE SOUGHT (State and District) House CT 04		4. FEC IDENTIFICATION NUMBER C00549527
5. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____			
A. FULL NAME, MAILING ADDRESS AND ZIP CODE PETER LEVY 551 FIFTH AVE NEW YORK NY 10176	Name of Employer KAMBER MANAGEMENT CO Transaction ID : F6.8854 Occupation REAL ESTATE MANAGEMENT	Date (month, day, year) 10/20/2014	Amount 1000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE MR. THOMAS F MARKEY 730 SMITH RIDGE ROAD NEW CANAAN CT 06840	Name of Employer MORGAN STANLEY Transaction ID : F6.8849 Occupation FINANCIAL ADVISOR	Date (month, day, year) 10/20/2014	Amount 1000.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE CAROL MEMISHIAN 450 ROUND HILL ROAD GREENWICH CT 06831	Name of Employer RETIRED Transaction ID : F6.8852 Occupation RETIRED	Date (month, day, year) 10/20/2014	Amount 2600.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE STEPHEN MEMISHIAN 450 ROUND HILL ROAD GREENWICH CT 06831	Name of Employer DSM CAPITAL PARTNERS Transaction ID : F6.8851 Occupation INVESTMENT MANAGER	Date (month, day, year) 10/20/2014	Amount 1600.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE MS. NATALIE PRAY 465 PARK AVE NEW YORK NY 10022	Name of Employer RETIRED Transaction ID : F6.8853 Occupation RETIRED	Date (month, day, year) 10/20/2014	Amount 1000.00
SIGNATURE (optional) BRADLEY T CRATE <i>[Electronically Filed]</i>		DATE 10/21/2014	For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100

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Any information copied from reports and statements filed under the Federal Election Campaign Act 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.

FEC FORM 6
(Revised 07/2011)

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
WILLIAM STAPLETON 15 SHERWOOD FARM RD FAIRFIELD CT 06824	HEALTHPLANONE, LLC Transaction ID : F6.8850 Occupation MANAGER	10/20/2014	1100.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount