

# 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

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

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

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

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

**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))....	2750.00	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)).....	2750.00	0.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	2559.88	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)).....	2559.88	0.00
8. Cash on Hand at Close of Reporting Period (from Line 27).....	349.23	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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

FEC Form 3 (Revised 07/05)

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- 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="2014"/> (last day of reporting period)
<b>11. CONTRIBUTIONS</b> (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
<input type="text" value="2750.00"/>	<input type="text" value="-25.00"/>	<input type="text" value="3745.82"/>
(ii) Unitemized		
<input type="text" value="0.00"/>	<input type="text" value="25.00"/>	<input type="text" value="4222.15"/>
(iii) Total of contributions from individuals		
<input type="text" value="2750.00"/>	<input type="text" value="0.00"/>	<input type="text" value="7967.97"/>
(b) Political Party Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Other Political Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="2350.00"/>

**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	2125.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
2750.00	0.00	12442.97
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)		
2750.00	0.00	15492.78

**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)
<b>17. OPERATING EXPENDITURES</b>		
<input type="text" value="2559.88"/>	<input type="text" value="0.00"/>	<input type="text" value="16170.06"/>
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</b>		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
<b>19. LOAN REPAYMENTS:</b>		
(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"/>
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(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)

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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)
(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)		
2559.88	0.00	16171.06

**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))

2750.00	0.00	12431.97
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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)

2559.88	0.00	13120.25
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**V. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	159.11
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	2750.00
25. SUBTOTAL (add Line 23 and Line 24).....	2909.11
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	2559.88
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	349.23

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 15
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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**

**A.** Full Name (Last, First, Middle Initial)  
**Mary Parese Emerson**

Mailing Address 59 Dunn Rd

City Hamden State CT Zip Code 06518-1504

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify) Debt Other

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 24 / 2014

**Transaction ID : C10224877A**

Amount of Each Receipt this Period  
 1500.00

**B.** Full Name (Last, First, Middle Initial)  
**James H. Maloney**

Mailing Address 15 Wooster Hts

City Danbury State CT Zip Code 06810-7536

FEC ID number of contributing federal political committee. **C**

Name of Employer CIFC Community Health Center of Greate Occupation President & CEO

Receipt For: 2012  
 Primary  General  
 Other (specify) Debt Other

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 09 / 2014

**Transaction ID : C10224864**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Jonathan D. Green**

Mailing Address 22 Bay Ridge Place

City Brooklyn State NY Zip Code 11209

FEC ID number of contributing federal political committee. **C**

Name of Employer Working Families/CLASI Occupation Organizer

Receipt For: 2012  
 Primary  General  
 Other (specify) Debt General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 27 / 2014

**Transaction ID : C10224869**

Amount of Each Receipt this Period  
 275.00

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2750.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 15
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Donovan for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ACTBLUE**

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
ActBlue Conduit total listed in Agg. field

Receipt For: 2012  
 Primary  General  
 Other (specify) Debt General

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 27 2014

**Transaction ID : C10224869B**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00

2750.00



**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 9 OF 15			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Donovan for Congress**

Full Name (Last, First, Middle Initial) <b>A. KEJD Compliance</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 347 Hazel Avenue			Amount of Each Disbursement this Period 500.00
City St. Louis	State MO	Zip Code 63119	Transaction ID : D550391
Purpose of Disbursement Compliance Consulting		003 Category/ Type	
Candidate Name		Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 2012 General Debt	2012 General Debt
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>B. KEJD Compliance</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2014
Mailing Address 347 Hazel Avenue			Amount of Each Disbursement this Period 250.00
City St. Louis	State MO	Zip Code 63119	Transaction ID : D550393
Purpose of Disbursement Compliance Consulting		003 Category/ Type	
Candidate Name		Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 2012 General Debt	2012 General Debt
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>C. KEJD Compliance</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address 347 Hazel Avenue			Amount of Each Disbursement this Period 750.00
City St. Louis	State MO	Zip Code 63119	Transaction ID : D550395
Purpose of Disbursement Compliance Consulting		003 Category/ Type	
Candidate Name		Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 2012 General Debt	2012 General Debt
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1500.00
<b>TOTAL</b> 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 10 OF 15			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Donovan for Congress**

Full Name (Last, First, Middle Initial) <b>A. NGP VAN</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address 1101 15th Stree NW, Suite 500		Amount of Each Disbursement this Period 125.00
City Washington State DC Zip Code 20005	Purpose of Disbursement Web Expenses	Transaction ID : D550402
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	2012 General Debt
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Salsa Labs, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 1700 Connecticut Ave, NW Suite 403		Amount of Each Disbursement this Period 320.00
City Washington State DC Zip Code 20009	Purpose of Disbursement Data Base Services	Transaction ID : D550404
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	2012 General Debt
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Salsa Labs, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2014
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 Data Base Services	Transaction ID : D550406
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	2012 General Debt
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	605.00
<b>TOTAL</b> 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 11 OF 15			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Donovan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Salsa Labs, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address 1700 Connecticut Ave, NW Suite 403		Amount of Each Disbursement this Period 320.00
City Washington State DC Zip Code 20009	Purpose of Disbursement Data Base Services 003 Category/Type	
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	Transaction ID : D550407 2012 General Debt
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	320.00
<b>TOTAL</b> This Period (last page this line number only).....	2425.00

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 12 OF 15
	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 <b>Christian Murray Design</b>	Nature of Debt (Purpose): Communication Consulting
Mailing Address 1028 Boulevard	
City State Zip Code West Hartford CT 06119-1801	

Outstanding Balance Beginning This Period 5414.00	<b>Transaction ID : D466048</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5414.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Christian Murray Design</b>	Nature of Debt (Purpose): Communication Consulting
Mailing Address 1028 Boulevard	
City State Zip Code West Hartford CT 06119-1801	

Outstanding Balance Beginning This Period 8338.00	<b>Transaction ID : D466050</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 8338.00

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

Outstanding Balance Beginning This Period 1261.82	<b>Transaction ID : D465461</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1261.82

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	15013.82
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**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 <b>Connecticut Light &amp; Power</b>	Nature of Debt (Purpose): Utilities
Mailing Address P.O Box 150493	
City State Zip Code Hartford CT 06115-0493	

Outstanding Balance Beginning This Period 123.04	<b>Transaction ID : D466442</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 123.04

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

Outstanding Balance Beginning This Period 34668.71	<b>Transaction ID : D450634</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 34668.71

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Day Pitney LLP</b>	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	<b>Transaction ID : D465464</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 50511.86

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	85303.61
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**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

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

B. 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

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

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

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

40558.06

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) ▶

**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 <b>Zeldes, Needle &amp; Cooper</b>		Nature of Debt (Purpose): Legal Services
Mailing Address 1000 Lafayette Blvd Post Office Box 1740		
City State Bridgeport CT	Zip Code 06604-4725	

Outstanding Balance Beginning This Period <input type="text" value="1133.40"/>		<b>Transaction ID : D479100</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1133.40"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State	Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		Outstanding Balance at Close of This Period <input type="text"/>	
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>		

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State	Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		Outstanding Balance at Close of This Period <input type="text"/>	
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>		

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="1133.40"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text" value="142008.89"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="142008.89"/>