

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Connecticut Democratic State Central Committee

ADDRESS (number and street)

750 Main St.

Suite 1108-3

☐ Check if different than previously reported. (ACC)

Hartford

CT

06103

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00167320

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

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)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☒ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y 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

Bhalla, Vanita, , ,

Signature of Treasurer

Bhalla, Vanita, , ,

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Connecticut Democratic State Central Committee

Report Covering the Period:

From:

MM / DD / YYYY
05 / 01 / 2025

To:

MM / DD / YYYY
05 / 31 / 2025

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2025"/>		<input type="text" value="572149.97"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="464778.84"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="29305.21"/>	<input type="text" value="171900.75"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="494084.05"/>	<input type="text" value="744050.72"/>
7. Total Disbursements (from Line 31)	<input type="text" value="67962.70"/>	<input type="text" value="317929.37"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<input type="text" value="426121.35"/>	<input type="text" value="426121.35"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Connecticut Democratic State Central Committee

Report Covering the Period:

From:

MM / DD / YYYY
05 / 01 / 2025

To:

MM / DD / YYYY
05 / 31 / 2025**I. Receipts****COLUMN A**
Total This Period**COLUMN B**
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

1733.19

27801.51

(ii) Unitemized

4376.77

34795.15

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

6109.96

62596.66

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

200.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

6109.96

62796.66

12. Transfers From Affiliated/Other

Party Committees.....

18413.48

81778.16

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

200.00

886.35

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

4581.77

26439.58

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))

29305.21

171900.75

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

29305.21

171900.75

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	1395.30	6093.66
(ii) Non-Federal Share.....	7906.72	29196.14
(b) Other Federal Operating Expenditures	18920.41	96992.67
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	28222.43	132282.47
22. Transfers to Affiliated/Other Party Committees.....	3878.67	15643.35
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	66.18
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	66.18
29. Other Disbursements (Including Non-Federal Donations).....	0.00	2051.24
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	35861.60	167886.13
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	35861.60	167886.13
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	67962.70	317929.37
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	60055.98	288733.23

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	6109.96	62796.66
34. Total Contribution Refunds (from Line 28(d))	0.00	66.18
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6109.96	62730.48
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	20315.71	103086.33
37. Offsets to Operating Expenditures (from Line 15, page 3).....	200.00	886.35
38. Net Operating Expenditures (subtract Line 37 from Line 36)	20115.71	102199.98

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 6 OF 45
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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)

Connecticut Democratic State Central Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bush, Samar, , ,

Mailing Address 20 Forest Ln

City
TollandState
CTZip Code
06084-3973FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not EmployedOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 03 / 2025

Transaction ID : 7210874

Amount of Each Receipt this Period

50.00

☐ Memo Item

* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ActBlue

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4525.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 04 / 2025

Transaction ID : 7210874E

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Carlson, Martha, , ,

Mailing Address 33 Horseshoe Rd

City

Guilford

State

CT

Zip Code

06437-2961

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
State of ConnecticutOccupation (for Individual)
Deputy Comptroller

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 25 / 2025

Transaction ID : 7218016

Amount of Each Receipt this Period

50.00

☐ Memo Item

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 7 OF 45
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Connecticut Democratic State Central Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ActBlue

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4525.96

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 25 / 2025**Transaction ID : 7218016E**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Dumaine, David, M, ,

Mailing Address 86 Tracy Dr

City
ManchesterState
CTZip Code
06042-2325FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Not Employed

Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 21 / 2025**Transaction ID : 7217302**

Amount of Each Receipt this Period

100.00

☐ Memo Item

* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ActBlue

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4525.96

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 25 / 2025**Transaction ID : 7217302E**

Amount of Each Receipt this Period

100.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

100.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 8 OF 45
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Connecticut Democratic State Central Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gioiello, David, M., , Jr.

Mailing Address 65 Walnut Tree Hill Rd

City
SheltonState
CTZip Code
06484-2514FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Industrial Health & Safety ConsultantsOccupation (for Individual)
Industrial hygienist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 30 / 2025

Transaction ID : 7220726

Amount of Each Receipt this Period

100.00

☐ Memo Item

* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ActBlue

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4525.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2025

Transaction ID : 7220726E

Amount of Each Receipt this Period

100.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hartmann, Van, , ,

Mailing Address 6 Ledgewood Ct

City

Norwalk

State

CT

Zip Code

06850-1811

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Manhattanville CollegeOccupation (for Individual)
college Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 27 / 2025

Transaction ID : 7218095

Amount of Each Receipt this Period

50.00

☐ Memo Item

* Earmarked Contribution: See Below

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

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

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 9 OF 45
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Connecticut Democratic State Central Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ActBlue

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4525.96

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2025**Transaction ID : 7218095E**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Horstman, Erin, , ,

Mailing Address 12 Coralwood Ct

City
CheektowagaState
NYZip Code
14215-1917FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

University at Buffalo

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 09 / 2025**Transaction ID : 7212988**

Amount of Each Receipt this Period

50.00

☐ Memo Item

* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ActBlue

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4525.96

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 11 / 2025**Transaction ID : 7212988E**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

50.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER: PAGE 10 OF 45
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Connecticut Democratic State Central Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LaPlaca, Leah, , ,

Mailing Address 8 Garden Gate

City
FarmingtonState
CTZip Code
06032-4501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-employed

Occupation (for Individual)

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 06 / 2025**Transaction ID : 7212299**

Amount of Each Receipt this Period

25.00

☐ Memo Item

* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ActBlue

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4525.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 11 / 2025**Transaction ID : 7212299E**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lesser, Stanton, H, ,

Mailing Address 85 Split Rock Rd

City
SouthportState
CTZip Code
06890-1266FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 17 / 2025**Transaction ID : 7215742**

Amount of Each Receipt this Period

100.00

☐ Memo Item

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 11 OF 45
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Connecticut Democratic State Central Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ActBlue

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4525.96

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2025**Transaction ID : 7215742E**

Amount of Each Receipt this Period

100.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Markley, Ann Lynn, , ,Mailing Address 2 Old Church Rd
Apt 3City
GreenwichState
CTZip Code
06830-4857FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not EmployedOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2025**Transaction ID : 7212924**

Amount of Each Receipt this Period

250.00

☐ Memo Item

* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ActBlue

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4525.96

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 11 / 2025**Transaction ID : 7212924E**

Amount of Each Receipt this Period

250.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

250.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 12 OF 45
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Connecticut Democratic State Central Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Murphy, Teele, , ,Mailing Address 33 Grove Ave
Apt 5City
WesterlyState
RIZip Code
02891-6002FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
US NavyOccupation (for Individual)
Sailor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2025**Transaction ID : 7215417**

Amount of Each Receipt this Period

200.00

☐ Memo Item

* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ActBlue

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4525.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 18 / 2025**Transaction ID : 7215417E**

Amount of Each Receipt this Period

200.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Myers, Stephen, , ,

Mailing Address 122 Palmers Hill Rd

City
StamfordState
CTZip Code
06902-2134FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RetiredOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1258.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 16 / 2025**Transaction ID : 7215732**

Amount of Each Receipt this Period

258.32

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

458.32

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 13 OF 45
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Connecticut Democratic State Central Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Polly, Moon, , ,

Mailing Address 23 Orchard Brook Dr

City
WethersfieldState
CTZip Code
06109-2434FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not EmployedOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 28 / 2025**Transaction ID : 7218448**

Amount of Each Receipt this Period

50.00

☐ Memo Item

* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ActBlue

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4525.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2025**Transaction ID : 7218448E**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ross, Johanna, , ,

Mailing Address 9 Albion Pl

City
Newton CenterState
MAZip Code
02459-2121FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not EmployedOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2025**Transaction ID : 7230114**

Amount of Each Receipt this Period

50.00

☐ Memo Item

* Earmarked Contribution: See Below Earmarked through ActBlue.

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 14 OF 45
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Connecticut Democratic State Central Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ActBlue

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4525.96

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2025**Transaction ID : 7230114E**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RYAN, JOSEPH, , ,

Mailing Address 530 Waterview Ave

City
BridgeportState
CTZip Code
06608-2553FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not EmployedOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 30 / 2025**Transaction ID : 7220738**

Amount of Each Receipt this Period

50.00

☐ Memo Item

* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ActBlue

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4525.96

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2025**Transaction ID : 7220738E**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 15 OF 45
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Connecticut Democratic State Central Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schnoll, Sidney, , ,Mailing Address 77 Havemeyer Ln
Unit 5City
StamfordState
CTZip Code
06902-2157FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PinneyAssociates Inc.Occupation (for Individual)
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 27 / 2025**Transaction ID : 7218093**

Amount of Each Receipt this Period

25.00

☐ Memo Item

* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ActBlue

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4525.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2025**Transaction ID : 7218093E**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schnoll, Sidney, , ,Mailing Address 77 Havemeyer Ln
Unit 5City
StamfordState
CTZip Code
06902-2157FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PinneyAssociates Inc.Occupation (for Individual)
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 27 / 2025**Transaction ID : 7218099**

Amount of Each Receipt this Period

25.00

☐ Memo Item

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 16 OF 45
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Connecticut Democratic State Central Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ActBlue

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4525.96

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2025**Transaction ID : 7218099E**

Amount of Each Receipt this Period

25.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Steinman, Nancy, , ,

Mailing Address 65 Turner Rd

City
Washington DepotState
CTZip Code
06794FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not EmployedOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2025**Transaction ID : 7221213**

Amount of Each Receipt this Period

100.00

☐ Memo Item

* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ActBlue

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4525.96

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2025**Transaction ID : 7221213E**

Amount of Each Receipt this Period

100.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

100.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 17 OF 45
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Connecticut Democratic State Central Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Villone, Craig, C, ,

Mailing Address 60 Elika Rd

City
WallingfordState
CTZip Code
06492-4943FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 28 / 2025

Transaction ID : 7220447

Amount of Each Receipt this Period

26.01

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Villone, Craig, C, ,

Mailing Address 60 Elika Rd

City
WallingfordState
CTZip Code
06492-4943FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 28 / 2025

Transaction ID : 7220453

Amount of Each Receipt this Period

26.01

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wagner, Andre, J, ,

Mailing Address 3100 Cleburne St

City
HoustonState
TXZip Code
77004-4501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Unemployed

Occupation (for Individual)

Public Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

246.14

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2025

Transaction ID : 7212961

Amount of Each Receipt this Period

147.85

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

199.87

1733.19

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 45

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Connecticut Democratic State Central Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DNC SERVICES CORPORATION/DEMOCRATIC NATIONAL COMMI

Mailing Address 430 S Capitol St SE

City
WashingtonState
DCZip Code
20003-4024FEC ID number of contributing
federal political committee.**C** C00010603

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

76164.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 27 / 2025**Transaction ID : 7230715**

Amount of Each Receipt this Period

12500.00

☐ Memo Item

Party Committee Transfer.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DNC SERVICES CORPORATION/DEMOCRATIC NATIONAL COMMI

Mailing Address 430 S Capitol St SE

City
WashingtonState
DCZip Code
20003-4024FEC ID number of contributing
federal political committee.**C** C00010603

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

76164.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 27 / 2025**Transaction ID : 7230716**

Amount of Each Receipt this Period

300.00

☐ Memo Item

Party Committee Transfer.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DNC SERVICES CORPORATION/DEMOCRATIC NATIONAL COMMI

Mailing Address 430 S Capitol St SE

City
WashingtonState
DCZip Code
20003-4024FEC ID number of contributing
federal political committee.**C** C00010603

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

79105.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2025**Transaction ID : 7230714**

Amount of Each Receipt this Period

2941.17

☐ Memo Item

DNC In-Kind received for online voter file access

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15741.17

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 45

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Connecticut Democratic State Central Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DNC- State Party Victory Fund

Mailing Address 430 S Capitol St SE

City
WashingtonState
DCZip Code
20003-4024FEC ID number of contributing
federal political committee.**C** C00010603

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2672.31

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 23 / 2025**Transaction ID : 7230121**

Amount of Each Receipt this Period

2672.31

☐ Memo Item

Includes allocations from 2024 and 2025.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Carlson, Steven, E, ,

Mailing Address 29 Quarry Dock Rd

City
BranfordState
CTZip Code
06405-4655FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Dorsey and Whitney LLPOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.50

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 28 / 2025**Transaction ID : 7230124**

Amount of Each Receipt this Period

237.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Daloe, Richard, , ,

Mailing Address 18 Spruce St

City
NewingtonState
CTZip Code
06111-2734FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Not EmployedOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

408.50

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 07 / 2024**Transaction ID : 7230132**

Amount of Each Receipt this Period

204.25

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2672.31

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 20 OF 45
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Connecticut Democratic State Central Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Daloe, Richard, , ,

Mailing Address 18 Spruce St

City
NewingtonState
CTZip Code
06111-2734FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Not EmployedOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2024

Transaction ID : 7230134

Amount of Each Receipt this Period

204.25

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DNC State Party Victory Fund - Unitemized

Mailing Address 430 S Capitol St SE

City
WashingtonState
DCZip Code
20003-4024FEC ID number of contributing
federal political committee.**C** C00010603

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7664.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2025

Transaction ID : 7230137

Amount of Each Receipt this Period

5555.60

☒ Memo Item

* SPVF Allocation - Unitemized.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DNC State Party Victory Fund - Unitemized

Mailing Address 430 S Capitol St SE

City
WashingtonState
DCZip Code
20003-4024FEC ID number of contributing
federal political committee.**C** C00010603

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

7664.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2024

Transaction ID : 7230138

Amount of Each Receipt this Period

2109.00

☒ Memo Item

* SPVF Allocation - Unitemized (2024 Allocations)

SUBTOTAL of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 OF 45

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Connecticut Democratic State Central Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Horton, Barnaby, , ,

Mailing Address 97 Westerly Ter

City
HartfordState
CTZip Code
06105-1116FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Merrill LynchOccupation (for Individual)
Financial Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 28 / 2025

Transaction ID : 7230125

Amount of Each Receipt this Period

237.50

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Knight, Kathleen, C, ,

Mailing Address 340 North St

City
GreenwichState
CTZip Code
06830-3930FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Information RequestedOccupation (for Individual)
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 01 / 2024

Transaction ID : 7230129

Amount of Each Receipt this Period

285.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lev, Bruce, , ,Mailing Address 111 Rowayton Ave
Unit 201City
NorwalkState
CTZip Code
06853-1462FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Loeb Holding CorpOccupation (for Individual)
Banker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 10 / 2025

Transaction ID : 7230128

Amount of Each Receipt this Period

285.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 22 OF 45
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)

Connecticut Democratic State Central Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Morris, Vincent, Raymond, ,

Mailing Address 20 Deming Farm Dr

City
NewingtonState
CTZip Code
06111-4646FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not EmployedOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 05 / 2025**Transaction ID : 7230127**

Amount of Each Receipt this Period

475.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Sharp, Douglas, R, ,

Mailing Address 36 Surrey Rd

City
StamfordState
CTZip Code
06903-3213FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RetiredOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 01 / 2024**Transaction ID : 7230130**

Amount of Each Receipt this Period

570.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Waide, Patrick, , ,

Mailing Address 164 Zaccheus Mead Ln

City
GreenwichState
CTZip Code
06831-3749FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Mutual of America Investment Corp.Occupation (for Individual)
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 27 / 2025**Transaction ID : 7230123**

Amount of Each Receipt this Period

950.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 45

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	--	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Connecticut Democratic State Central Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Willauer, Cynthia, C, ,Mailing Address 55 Beaver Brook Rd
1City
Old LymeState
CTZip Code
06371-3202FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RetiredOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.75

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 04 / 2025**Transaction ID : 7230126**

Amount of Each Receipt this Period

213.75

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DNC- State Party Victory Fund - Unitemized

Mailing Address 430 S Capitol St SE

City
WashingtonState
DCZip Code
20003-4024FEC ID number of contributing
federal political committee.

C C00010603

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

166.25

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 23 / 2025**Transaction ID : 7230121J**

Amount of Each Receipt this Period

166.25

☒ Memo Item

* Includes allocations from 2024 and 2025.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

18413.48

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 OF 45

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input checked="" type="checkbox"/> 17			

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)

Connecticut Democratic State Central Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bethany DTC

Mailing Address 5 N Humiston Dr

City
BethanyState
CTZip Code
06524-3116FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 02 / 2025**Transaction ID : 7212950**

Amount of Each Receipt this Period

350.00

☐ Memo Item

Purchase of online voter file at fair-market value.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Derby Democratic Town Committee

Mailing Address 13 Howard Ave

City
DerbyState
CTZip Code
06418-2319FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 09 / 2025**Transaction ID : 7215474**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Purchase of online voter file at fair-market value.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Plainville DTC

Mailing Address 1 Harris Rd

City
MoosupState
CTZip Code
06354-1911FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 09 / 2025**Transaction ID : 7215476**

Amount of Each Receipt this Period

300.00

☐ Memo Item

Purchase of online voter file at fair-market value.

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 25 OF 45
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input checked="" type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Connecticut Democratic State Central Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Seymour DTC

Mailing Address 116 Maple St

City
SeymourState
CTZip Code
06483-3673FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 02 / 2025**Transaction ID : 7212951**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Purchase of online voter file at fair-market value.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VLM Cooperative

Mailing Address PO Box 9

City
LexingtonState
KYZip Code
40588-0009FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10315.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 13 / 2025**Transaction ID : 7230183**

Amount of Each Receipt this Period

2156.77

☐ Memo Item

Proceeds from License of Voter File.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Walter Morton for Mayor

Mailing Address 107 Carleton St

City
HamdenState
CTZip Code
06517-2703FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 09 / 2025**Transaction ID : 7215473**

Amount of Each Receipt this Period

600.00

☐ Memo Item

Purchase of online voter file at fair-market value.

SUBTOTAL of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3256.77

4406.77

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 26 OF 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Connecticut Democratic State Central Committee

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address 14 Arrow St

City
CambridgeState
MAZip Code
02138-5106

Purpose of Disbursement

Credit Card Processing Fees.

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	4			2	0	2	5		

FEC Identification Number

C

Transaction ID : 500107633

Amount of Each Disbursement this Period

11.56

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address 14 Arrow St

City
CambridgeState
MAZip Code
02138-5106

Purpose of Disbursement

Credit Card Processing Fees.

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	1			2	0	2	5		

FEC Identification Number

C

Transaction ID : 500107634

Amount of Each Disbursement this Period

27.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address 14 Arrow St

City
CambridgeState
MAZip Code
02138-5106

Purpose of Disbursement

Credit Card Processing Fees.

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	8			2	0	2	5		

FEC Identification Number

C

Transaction ID : 500107635

Amount of Each Disbursement this Period

25.74

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

64.70

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Connecticut Democratic State Central Committee

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address 14 Arrow St

City
CambridgeState
MAZip Code
02138-5106

Purpose of Disbursement

Credit Card Processing Fees.

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	5			2	0	2	5		

FEC Identification Number

C

Transaction ID : 500107636

Amount of Each Disbursement this Period

55.13

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address 14 Arrow St

City
CambridgeState
MAZip Code
02138-5106

Purpose of Disbursement

Credit Card Processing Fees.

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			3	1			2	0	2	5		

FEC Identification Number

C

Transaction ID : 500107638

Amount of Each Disbursement this Period

59.73

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 225 2nd Ave

City
WalthamState
MAZip Code
02451-1122

Purpose of Disbursement

Payroll Processing Fees.

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	9			2	0	2	5		

FEC Identification Number

C

Transaction ID : 500107463

Amount of Each Disbursement this Period

142.43

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

257.29

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 28 OF 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Connecticut Democratic State Central Committee

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 225 2nd Ave

City
WalthamState
MAZip Code
02451-1122

Purpose of Disbursement

Payroll Processing Fees.

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	3			2	0	2	5		

FEC Identification Number

C**Transaction ID : 500107462**

Amount of Each Disbursement this Period

142.43

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ahsan, Maliha, , ,Mailing Address 432 Middle Tpke W
Apt 114City
ManchesterState
CTZip Code
06040-3858

Purpose of Disbursement

digital comms consultant services

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			3	0			2	0	2	5		

FEC Identification Number

C**Transaction ID : 500107450**

Amount of Each Disbursement this Period

1575.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Authorize.net

Mailing Address PO Box 8999

City
San FranciscoState
CAZip Code
94128-8999

Purpose of Disbursement

Credit Card Processing Fees.

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	2			2	0	2	5		

FEC Identification Number

C**Transaction ID : 500107387**

Amount of Each Disbursement this Period

50.90

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1768.33

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 29 OF 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Connecticut Democratic State Central Committee

Full Name (Last, First, Middle Initial)

A. Blueprint InteractiveMailing Address 1155 Connecticut Ave NW
Ste 601City
WashingtonState
DCZip Code
20036-4306Purpose of Disbursement
Development/Web Services
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 27 / 2025

FEC Identification Number

C

Transaction ID : 500107390

Amount of Each Disbursement this Period

4000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Communication Strategies

Mailing Address 28 Rundelane

City
BloomfieldState
CTZip Code
06002-1523Purpose of Disbursement
Communications Consultant.
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 27 / 2025

FEC Identification Number

C

Transaction ID : 500107391

Amount of Each Disbursement this Period

5500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CT Compliance and Law Services, LLC

Mailing Address PO Box 130

City
GuilfordState
CTZip Code
06437-0130Purpose of Disbursement
Legal/Compliance Services.
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 27 / 2025

FEC Identification Number

C

Transaction ID : 500107389

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

14500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 30 OF 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Connecticut Democratic State Central Committee

Full Name (Last, First, Middle Initial)

A. Dhaba Wala Indian Kitchen

Mailing Address 49 Asylum St

City
HartfordState
CTZip Code
06103-2208

Purpose of Disbursement

Food/beverages.

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	9			2	0	2	5	

FEC Identification Number

C

Transaction ID : 500107393

Amount of Each Disbursement this Period

52.84

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. McCollam Agency

Mailing Address 219 Greenwood Ave

City
BethelState
CTZip Code
06801-2113

Purpose of Disbursement

Insurance Coverage.

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	2	5	

FEC Identification Number

C

Transaction ID : 500107212

Amount of Each Disbursement this Period

312.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. New Way Strategies LLCMailing Address 47 Avonwood Rd
315City
CheshireState
CTZip Code
06410

Purpose of Disbursement

SMS/texting services

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	4			2	0	2	5	

FEC Identification Number

C

Transaction ID : 500107395

Amount of Each Disbursement this Period

435.96

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

800.80

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 31 OF 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Connecticut Democratic State Central Committee

Full Name (Last, First, Middle Initial)

A. Paragon SolutionsMailing Address 2141 E Broadway Rd
Ste 202City
TempeState
AZZip Code
85282-1895

Purpose of Disbursement

Credit Card Processing Fees.

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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	2			2	0	2	5	

FEC Identification Number

C

Transaction ID : 500107402

Amount of Each Disbursement this Period

768.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Paragon SolutionsMailing Address 2141 E Broadway Rd
Ste 202City
TempeState
AZZip Code
85282-1895

Purpose of Disbursement

Credit Card Processing Fees.

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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	2			2	0	2	5	

FEC Identification Number

C

Transaction ID : 500107466

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Secretary of the State of CT

Mailing Address 30 Trinity St

City
HartfordState
CTZip Code
06106-1634

Purpose of Disbursement

Voter file purchase

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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	3			2	0	2	5	

FEC Identification Number

C

Transaction ID : 500107394

Amount of Each Disbursement this Period

300.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1093.44

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 32 OF 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Connecticut Democratic State Central Committee

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 Market St

City
San FranciscoState
CAZip Code
94103-1331

Purpose of Disbursement

Travel Expenses

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	2	5		

FEC Identification Number

C

Transaction ID : 500107396

Amount of Each Disbursement this Period

38.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 Market St

City
San FranciscoState
CAZip Code
94103-1331

Purpose of Disbursement

Travel Expenses

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			3	0			2	0	2	5		

FEC Identification Number

C

Transaction ID : 500107405

Amount of Each Disbursement this Period

26.92

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 Market St

City
San FranciscoState
CAZip Code
94103-1331

Purpose of Disbursement

Travel Expenses

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			3	0			2	0	2	5		

FEC Identification Number

C

Transaction ID : 500107414

Amount of Each Disbursement this Period

5.80

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

71.37

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 33 OF 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Connecticut Democratic State Central Committee

Full Name (Last, First, Middle Initial)

A. Webster Bank

Mailing Address 200 Elm St

City
StamfordState
CTZip Code
06902-3800

Purpose of Disbursement

Bank fees.

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	2			2	0	2	5		

FEC Identification Number

C

Transaction ID : 500107399

Amount of Each Disbursement this Period

15.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Webster Bank

Mailing Address 200 Elm St

City
StamfordState
CTZip Code
06902-3800

Purpose of Disbursement

Bank fees.

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	5			2	0	2	5		

FEC Identification Number

C

Transaction ID : 500107398

Amount of Each Disbursement this Period

0.81

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Webster Bank

Mailing Address 200 Elm St

City
StamfordState
CTZip Code
06902-3800

Purpose of Disbursement

Bank fees.

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	1			2	0	2	5		

FEC Identification Number

C

Transaction ID : 500107400

Amount of Each Disbursement this Period

36.61

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

52.62

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 34 OF 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Connecticut Democratic State Central Committee

Full Name (Last, First, Middle Initial)

A. Webster Bank

Mailing Address 200 Elm St

City
StamfordState
CTZip Code
06902-3800

Purpose of Disbursement

Bank Fees.

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:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	1			2	0	5			

FEC Identification Number

C

Transaction ID : 500107465

Amount of Each Disbursement this Period

6.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6.05

18614.60

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 35 OF 45

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Connecticut Democratic State Central Committee

Full Name (Last, First, Middle Initial)

A. Association of State Democratic Committees (ASDC)

Mailing Address 430 S Capitol St SE

City
WashingtonState
DCZip Code
20003-4024

Purpose of Disbursement

Membership Dues.

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	7			2	0	2	5	

FEC Identification Number

C C00259481

Transaction ID : 500107388

Amount of Each Disbursement this Period

937.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DNC SERVICES CORPORATION/DEMOCRATIC NATIONAL COMMI

Mailing Address 430 S Capitol St SE

City
WashingtonState
DCZip Code
20003-4024

Purpose of Disbursement

DNC In-Kind received for online voter file access.

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			3	1			2	0	2	5	

FEC Identification Number

C C00010603

Transaction ID : 500107464

Amount of Each Disbursement this Period

2941.17

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

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

3878.67

3878.67

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 36 OF 45

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Connecticut Democratic State Central Committee

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 225 2nd Ave

City
WalthamState
MAZip Code
02451-1122

Purpose of Disbursement

Payroll Taxes

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	5			2	0	2	5		

FEC Identification Number

C**Transaction ID : 500107461**

Amount of Each Disbursement this Period

5367.15

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 225 2nd Ave

City
WalthamState
MAZip Code
02451-1122

Purpose of Disbursement

Payroll Taxes

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			3	0			2	0	2	5		

FEC Identification Number

C**Transaction ID : 500107460**

Amount of Each Disbursement this Period

5335.98

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Anthem BCBS of CT

Mailing Address PO Box 416051

City
BostonState
MAZip Code
02241-6051

Purpose of Disbursement

Health insurance

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	2			2	0	2	5		

FEC Identification Number

C**Transaction ID : 500107385**

Amount of Each Disbursement this Period

2350.61

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

13053.74

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 37 OF 45

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Connecticut Democratic State Central Committee

Full Name (Last, First, Middle Initial)

A. Anthem BCBS of CT

Mailing Address PO Box 416051

City
BostonState
MAZip Code
02241-6051

Purpose of Disbursement

Health insurance

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	7			2	0	2	5		

FEC Identification Number

C

Transaction ID : 500107386

Amount of Each Disbursement this Period

2456.39

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bailey, MacKenzie, , ,

Mailing Address 36 Fairview Ave

City
RidgefieldState
CTZip Code
06877-4415

Purpose of Disbursement

Salary

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	6			2	0	2	5		

FEC Identification Number

C

Transaction ID : 500107459

Amount of Each Disbursement this Period

2493.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bailey, MacKenzie, , ,

Mailing Address 36 Fairview Ave

City
RidgefieldState
CTZip Code
06877-4415

Purpose of Disbursement

Salary

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			3	0			2	0	2	5		

FEC Identification Number

C

Transaction ID : 500107458

Amount of Each Disbursement this Period

2493.94

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

7444.28

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

PAGE 38 OF 45

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)

Connecticut Democratic State Central Committee

Full Name (Last, First, Middle Initial)

A. Kostek, David, R, ,

Mailing Address 16 Keyser Rd

City
WestportState
CTZip Code
06880-5043

Purpose of Disbursement

Salary

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	6			2	0	2	5		

FEC Identification Number

C

Transaction ID : 500107455

Amount of Each Disbursement this Period

 1643.39☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Kostek, David, R, ,

Mailing Address 16 Keyser Rd

City
WestportState
CTZip Code
06880-5043

Purpose of Disbursement

Salary

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			3	0			2	0	2	5		

FEC Identification Number

C

Transaction ID : 500107454

Amount of Each Disbursement this Period

 1643.38☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Locke, Sarah, E, ,

Mailing Address 31 Brookwood Dr

City
WoodbridgeState
CTZip Code
06525-2610

Purpose of Disbursement

Salary

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	6			2	0	2	5		

FEC Identification Number

C

Transaction ID : 500107453

Amount of Each Disbursement this Period

 3900.67☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 7187.44

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 39 OF 45

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Connecticut Democratic State Central Committee

Full Name (Last, First, Middle Initial)

A. Locke, Sarah, E, ,

Mailing Address 31 Brookwood Dr

City
WoodbridgeState
CTZip Code
06525-2610

Purpose of Disbursement

Salary

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			3	0			2	0	2	5		

FEC Identification Number

C

Transaction ID : 500107452

Amount of Each Disbursement this Period

3900.66

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Searles, Desire L, , ,

Mailing Address 83 Minerva St
Apt BCity
DerbyState
CTZip Code
06418-1860

Purpose of Disbursement

Salary

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	6			2	0	2	5		

FEC Identification Number

C

Transaction ID : 500107457

Amount of Each Disbursement this Period

2032.56

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Searles, Desire L, , ,

Mailing Address 83 Minerva St
Apt BCity
DerbyState
CTZip Code
06418-1860

Purpose of Disbursement

Salary

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			3	0			2	0	2	5		

FEC Identification Number

C

Transaction ID : 500107456

Amount of Each Disbursement this Period

2032.56

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

7965.78

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 40 OF 45

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Connecticut Democratic State Central Committee

Full Name (Last, First, Middle Initial)

A. VestwellMailing Address 1410 Broadway
FI 23City
New YorkState
NYZip Code
10018-5023

Purpose of Disbursement

Employee IRA remittance

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	2			2	0	2	5		

FEC Identification Number

C

Transaction ID : 500107418

Amount of Each Disbursement this Period

105.18

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. VestwellMailing Address 1410 Broadway
FI 23City
New YorkState
NYZip Code
10018-5023

Purpose of Disbursement

Employee IRA remittance

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	6			2	0	2	5		

FEC Identification Number

C

Transaction ID : 500107419

Amount of Each Disbursement this Period

105.18

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

210.36

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

35861.60

SCHEDULE H1 (FEC Form 3X)**METHOD OF ALLOCATION FOR:**

- **ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)** (Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

Connecticut Democratic State Central Committee

Transaction ID : 21M

USE ONLY ONE SECTION, A or B**A. State and Local Party Committees****Fixed Percentage (select one)**

_____ Presidential-Only Election Year (28% Federal)

_____ Presidential and Senate Election Year (36% Federal)

_____ Senate-Only Election Year (21% Federal)

☒ Non-Presidential and Non-Senate Election Year (15% Federal)
B. Separate Segregated Funds and Nonconnected Committees**Indicate ratio below**Federal..... %Nonfederal %

This ratio applies to (check all that apply):

Administrative ☐ Generic Voter Drive ☐ Public Communications Referencing Party Only ☐

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 42 OF 45

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Connecticut Democratic State Central Committee

A. Full Name (Last, First, Middle Initial) Transaction ID : 500107412 <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
Adobe Systems Inc.			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 345 Park Ave			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City San Jose State CA Zip Code 95110-2704			<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Online software		<input type="text"/>	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: Administrative			31479.28	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
4.78			27.11	31.89

B. Full Name (Last, First, Middle Initial) Transaction ID : 500107392 <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
Grasshopper.com			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 333 Summer St			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Boston State MA Zip Code 02210-1702			<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Phone services		<input type="text"/>	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: Administrative			31479.28	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
5.85			33.14	38.99

C. Full Name (Last, First, Middle Initial) Transaction ID : 500107411 <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
Hearst - CT Post			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address PO Box 26900			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Lehigh Valley State PA Zip Code 18002-6900			<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Newspaper subscription		<input type="text"/>	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: Administrative			31479.28	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
0.59			3.37	3.96

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.22		63.62		74.84

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**PAGE 43 OF 45
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Connecticut Democratic State Central Committee

A. Full Name (Last, First, Middle Initial) Transaction ID : 500107407 <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
Intuit			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 6060 Nancy Ridge Dr Ste 100			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City San Diego	State CA	Zip Code 92121-3218	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Accounting software		Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: Administrative			31479.28	
FEDERAL SHARE		+	NONFEDERAL SHARE	
9.85			55.80	
		=	TOTAL AMOUNT	
			65.65	

B. Full Name (Last, First, Middle Initial) Transaction ID : 500107409 <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
New York Times			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 620 8th Ave			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City New York	State NY	Zip Code 10018-1618	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Newspaper subscription		Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: Administrative			31479.28	
FEDERAL SHARE		+	NONFEDERAL SHARE	
3.03			17.17	
		=	TOTAL AMOUNT	
			20.20	

C. Full Name (Last, First, Middle Initial) Transaction ID : 500107401 <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
NGP VAN			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 1445 New York Ave NW Ste 200			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Washington	State DC	Zip Code 20005-2158	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Online compliance/fundraising software		Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: Administrative			31479.28	
FEDERAL SHARE		+	NONFEDERAL SHARE	
811.28			4597.27	
		=	TOTAL AMOUNT	
			5408.55	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
824.16		4670.24		5494.40

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 44 OF 45

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Connecticut Democratic State Central Committee

A. Full Name (Last, First, Middle Initial) Transaction ID : 500107410 <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
Sendinblue, Inc.			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 401 2nd Ave S Ste 303			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Seattle	State WA	Zip Code 98104-2862	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Online software		<input type="text"/>	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: Administrative			31479.28	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
4.35			24.65	29.00

B. Full Name (Last, First, Middle Initial) Transaction ID : 500107415 <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
Stark Business Solutions, Inc			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 445 Hamilton Ave Ste 1102			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City White Plains	State NY	Zip Code 10601-1832	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Office rent/utilities		<input type="text"/>	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: Administrative			31479.28	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
475.29			2693.30	3168.59

C. Full Name (Last, First, Middle Initial) Transaction ID : 500107408 <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
The Day			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address PO Box 1231			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City New London	State CT	Zip Code 06320-1231	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Newspaper subscription		<input type="text"/>	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: Administrative			31479.28	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
3.60			20.40	24.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
483.24		2738.35		3221.59

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**PAGE 45 OF 45
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Connecticut Democratic State Central Committee

A. Full Name (Last, First, Middle Initial) Transaction ID : 500107416 <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
Upcurve Cloud			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 10801 National Blvd Ste 410			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Los Angeles	State CA	Zip Code 90064-4143	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Cloud services (no candidate)		Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: Administrative			31479.28	
FEDERAL SHARE		+	NONFEDERAL SHARE	
52.26			296.14	
		=	TOTAL AMOUNT	
			348.40	

B. Full Name (Last, First, Middle Initial) Transaction ID : 500107417 <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
Upcurve Cloud			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 10801 National Blvd Ste 410			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Los Angeles	State CA	Zip Code 90064-4143	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Cloud services (no candidate)		Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: Administrative			31479.28	
FEDERAL SHARE		+	NONFEDERAL SHARE	
3.84			21.75	
		=	TOTAL AMOUNT	
			25.59	

C. Full Name (Last, First, Middle Initial) Transaction ID : 500107406 <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
Zoom			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 55 Almaden Blvd FI 6			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City San Jose	State CA	Zip Code 95113-1608	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Online video-conferencing software		Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: Administrative			31479.28	
FEDERAL SHARE		+	NONFEDERAL SHARE	
20.58			116.62	
		=	TOTAL AMOUNT	
			137.20	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
76.68		434.51		511.19

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
1395.30	7906.72	9302.02