

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines. 12FE4M5  
Friends of Elizabeth Esty

ADDRESS (number and street) PO Box 61  
 Check if different than previously reported. (ACC) Cheshire CT 06410

2. **FEC IDENTIFICATION NUMBER** ▼ C C00494203 3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A) CT 05

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

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

5. Covering Period M M / D D / Y Y Y Y 01 / 01 / 2015 through M M / D D / Y Y Y Y 03 / 31 / 2015

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 Patti Flynn-Harris

Signature of Treasurer Patti Flynn-Harris *[Electronically Filed]* Date M M / D D / Y Y Y Y 04 / 12 / 2015

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Friends of Elizabeth Esty**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	274297.67	285871.51
(b) Total Contribution Refunds (from Line 20(d)) .....	511.00	1719.67
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	273786.67	284151.84
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	90372.99	159759.78
(b) Total Offsets to Operating Expenditures (from Line 14).....	640.54	1251.76
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	89732.45	158508.02
8. Cash on Hand at Close of Reporting Period (from Line 27).....	225382.84	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	154014.21	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Friends of Elizabeth Esty**

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2015 To: M M / D D / Y Y Y Y 03 / 31 / 2015

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	189382.27	191132.27
(ii) Unitemized.....	11415.40	12239.24
(iii) TOTAL of contributions from individuals ▶	200797.67	203371.51
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	73500.00	82500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	274297.67	285871.51
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	640.54	1251.76
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.04	0.07
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	274938.25	287123.34

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	90372.99	159759.78
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	511.00	1119.67
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	600.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	511.00	1719.67
21. OTHER DISBURSEMENTS .....	6000.00	9000.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	96883.99	170479.45

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	47328.58
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	274938.25
25. SUBTOTAL (add Line 23 and Line 24).....	322266.83
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	96883.99
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	225382.84

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

**A.** Full Name (Last, First, Middle Initial)  
**Daniel D Adams**

Mailing Address 160 Morgan Ave

City East Haven State CT Zip Code 06512-4519

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

Name of Employer Protein Sciences Occupation Executive Chairman

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 23 / 2015

**Transaction ID : C10358768**

Amount of Each Receipt this Period  
 2700.00

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

Mailing Address 1111 E Capitol St SE

City Washington State DC Zip Code 20003-1438

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

Name of Employer Self-employed Occupation Mediator

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 23 / 2015

**Transaction ID : C10359492**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 30 Tobey Hill Rd

City Canaan State CT Zip Code 06018-2308

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

Name of Employer Self-employed Occupation Investor

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2015

**Transaction ID : C10360491**

Amount of Each Receipt this Period  
 2700.00

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

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

6400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>Joe Austin</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 30 / 2015
Mailing Address 1 Columbus Pl Apt N26D		<b>Transaction ID : C10363417</b>
City New York	State NY	
Zip Code 10019-8229		Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Hawkeye Capital Management, LLC	Occupation Investor Relations	
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) <b>Sabrina Beck</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 12 / 2015
Mailing Address 70 Davis Rd		<b>Transaction ID : C10356537</b>
City Harwinton	State CT	
Zip Code 06791-1823		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Altek Electronics	Occupation Vice President	
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>Nancy Beeuwkes</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2015
Mailing Address 1360 Monument St		<b>Transaction ID : C10371594</b>
City Concord	State MA	
Zip Code 01742-5322		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

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

Mailing Address 59 Tumblebrook Rd

City Woodbridge State CT Zip Code 06525-2533

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

Name of Employer Alexion Pharmaceuticals, Inc Occupation Executive

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 02 / 2015

**Transaction ID : C10354116**

Amount of Each Receipt this Period  
 2700.00

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

Mailing Address 422 Maple Ave

City Cheshire State CT Zip Code 06410-2140

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : C10362164**

Amount of Each Receipt this Period  
 2700.00

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

Mailing Address 634 A St., NE

City Washington State DC Zip Code 20002

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

Name of Employer Self-employed Occupation Government Relations

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2015

**Transaction ID : C10358694**

Amount of Each Receipt this Period  
 250.00

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

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

5650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. Donald I Brownstein</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 20 / 2015	
Mailing Address 359 Merriebrook Ln		<b>Transaction ID : C10349088</b>	
City Stamford	State CT	Zip Code 06902-1332	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00	
Name of Employer Structured Portfolio Management, LLC	Occupation Investment Management		
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 2700.00		

Full Name (Last, First, Middle Initial) <b>B. Richard A Cantor</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 06 / 2015	
Mailing Address 226 Tinker Hill Road		<b>Transaction ID : C10358699</b>	
City New Preston	State CT	Zip Code 06777-1308	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00		

Full Name (Last, First, Middle Initial) <b>C. Richard A Cantor</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 06 / 2015	
Mailing Address 226 Tinker Hill Road		<b>Transaction ID : C10358698</b>	
City New Preston	State CT	Zip Code 06777-1308	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 5400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8100.00
<b>TOTAL</b> This Period (last page this line number only).....	8100.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>Charles Cerf</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 23 / 2015
Mailing Address 2700 Chesapeake St NW		<b>Transaction ID : C10368671</b>
City Washington	State DC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>Sanford Cloud Jr</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 27 / 2015
Mailing Address 25 Mountain Spring Rd		<b>Transaction ID : C10368692</b>
City Farmington	State CT	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self Employed	Occupation Attorney	
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>Valerie Conn</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 01 / 2015
Mailing Address 2025 E. Newton Street		<b>Transaction ID : C10311336</b>
City Seattle	State WA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 85.00
Name of Employer Self-employed	Occupation Development Consultant	
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 340.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1585.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

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

Mailing Address 2025 E. Newton Street

City State Zip Code  
Seattle WA 98112

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

Name of Employer Occupation  
Self-employed Development Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
**340.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 01 / 2015**

**Transaction ID : C10338504**

Amount of Each Receipt this Period  
**85.00**

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

Mailing Address 2025 E. Newton Street

City State Zip Code  
Seattle WA 98112

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

Name of Employer Occupation  
Self-employed Development Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
**340.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 01 / 2015**

**Transaction ID : C10354047**

Amount of Each Receipt this Period  
**85.00**

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

Mailing Address 3417 P St NW

City State Zip Code  
Washington DC 20007-2706

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

Name of Employer Occupation  
McLarty Associates Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : C10366502**

Amount of Each Receipt this Period  
**500.00**

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

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

**670.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. Daniel Doctoroff</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 27 / 2015	
Mailing Address 88 Central Park W		<b>Transaction ID : C10371867</b>	
City New York	State NY	Zip Code 10023-5299	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00		

Full Name (Last, First, Middle Initial) <b>B. Daniel Doctoroff</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 27 / 2015	
Mailing Address 88 Central Park W		<b>Transaction ID : C10362141</b>	
City New York	State NY	Zip Code 10023-5299	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 5400.00		

Full Name (Last, First, Middle Initial) <b>C. Anita M. Donofrio</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 04 / 2015	
Mailing Address 55 High Ridge Ave		<b>Transaction ID : C10354826</b>	
City Ridgefield	State CT	Zip Code 06877-4901	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Self-employed	Occupation Builder		
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6400.00
<b>TOTAL</b> This Period (last page this line number only).....	6400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. James Early</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 23 / 2015
Mailing Address PO Box 1866		<b>Transaction ID : C10358751</b>
City New Haven	State CT	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Early, Lucarelli, Sweeney & Meisenkoth	Occupation Attorney	
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Joseph Ellis</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 18 / 2015
Mailing Address 158 Town St		<b>Transaction ID : C10357906</b>
City West Cornwall	State CT	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) <b>C. Katharine C Esty</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 28 / 2015
Mailing Address 80 Deaconess Rd Unit 432		<b>Transaction ID : C10362279</b>
City Concord	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Self Employed	Occupation Psychotherapist	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3300.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 132  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

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

Mailing Address 80 Deaconess Rd  
Unit 432

City Concord State MA Zip Code 01742-4187

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

Name of Employer Self Employed Occupation Psychotherapist

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2015

**Transaction ID : C10362276**

Amount of Each Receipt this Period  
 2700.00

3000.00

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

Mailing Address 89 Hyslop Rd

City Brookline State MA Zip Code 02445-5752

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

Name of Employer Feinberg Hanson LLP Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2015

**Transaction ID : C10357992**

Amount of Each Receipt this Period  
 1500.00

1500.00

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

Mailing Address 19 Andrea Ave

City Wolcott State CT Zip Code 06716-3207

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

Name of Employer Fercodini Properties Occupation Realtor

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 25 / 2015

**Transaction ID : C10353404**

Amount of Each Receipt this Period  
 25.00

525.00

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

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

4225.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

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

Mailing Address 34 Ellsworth Ln

City State Zip Code  
Ellington CT 06029-2105

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

Name of Employer Occupation  
Credit Union League of CT Vice President - Govt. Relations

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 25 / 2015

**Transaction ID : C10360374**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 64 Woodbury Hill

City State Zip Code  
Woodbury CT 06798-2963

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 06 / 2015

**Transaction ID : C10358693**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Paul R. S. Gebhard**

Mailing Address 5047 Klinge St NW

City State Zip Code  
Washington DC 20016-2653

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

Name of Employer Occupation  
The Cohen Group Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 27 / 2015

**Transaction ID : C10362114**

Amount of Each Receipt this Period  
500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

**A.** Full Name (Last, First, Middle Initial)  
**Robert S Gelbard**

Mailing Address 3712 Huntington St NW

City Washington State DC Zip Code 20015-1818

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

Name of Employer Dentons Occupation Senior Advisor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10371605**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address 3712 Huntington St NW

City Washington State DC Zip Code 20015-1818

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

Name of Employer Dentons Occupation Senior Advisor

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10371606**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address PO Box 2247

City Setauket State NY Zip Code 11733-0726

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10371890**

Amount of Each Receipt this Period  
2700.00

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

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

8100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

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

Mailing Address **PO Box 2247**

City **Setauket** State **NY** Zip Code **11733-0726**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2016  
 Primary  General  
 Other (specify) **Convention**

Election Cycle-to-Date **5400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : C10371891**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address **22 Stuart Drive**

City **Bloomfield** State **CT** Zip Code **06002-1525**

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

Name of Employer **Connecticut Center for Advanced Techno** Occupation **CEO**

Receipt For: 2016  
 Primary  General  
 Other (specify) **Convention**

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 27 / 2015**

**Transaction ID : C10368699**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address **PO Box 170**

City **Roxbury** State **CT** Zip Code **06783-0170**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2016  
 Primary  General  
 Other (specify) **Convention**

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 25 / 2015**

**Transaction ID : C10353400**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1350.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. Edward M Glanz</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 27 / 2015
Mailing Address 10 Bigelow Rd		<b>Transaction ID : C10368683</b>
City New Fairfield	State CT	Zip Code 06812-3115
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Newtown Savings Bank	Occupation Banker	
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Irving Goldblum</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 06 / 2015
Mailing Address 76 N Lake Dr		<b>Transaction ID : C10358695</b>
City Stamford	State CT	Zip Code 06903-1012
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2500.00	
Name of Employer Standard Demolition Services Inc	Occupation President	
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) <b>C. Wilfred George Grandison</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 25 / 2015
Mailing Address 1449 Waggaman Cir		<b>Transaction ID : C10353266</b>
City McLean	State VA	Zip Code 22101-4029
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer Steptoe & Johnson LLP	Occupation Attorney	
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 132  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

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

Mailing Address 279 Sturges Hwy

City State Zip Code  
Westport CT 06880-1722

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

Name of Employer Occupation  
Self Employed Homemaker

Receipt For: 2016  
 Primary     General  
 Other (specify)    Convention

Election Cycle-to-Date  
2100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2015

**Transaction ID : C10358696**

Amount of Each Receipt this Period  
2100.00

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

Mailing Address 279 Sturges Hwy

City State Zip Code  
Westport CT 06880-1722

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

Name of Employer Occupation  
Alternative Investment Group Investment Advisor

Receipt For: 2016  
 Primary     General  
 Other (specify)    Convention

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2015

**Transaction ID : C10358697**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address 44 W 77th St

City State Zip Code  
New York NY 10024-5150

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

Name of Employer Occupation  
Self-employed Lawyer

Receipt For: 2016  
 Primary     General  
 Other (specify)    Convention

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 05 / 2015

**Transaction ID : C10354857**

Amount of Each Receipt this Period  
1500.00

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

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

6300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

**A.** Full Name (Last, First, Middle Initial)  
**Matthew W Hamill**

Mailing Address 6904 Tilden Ln

City State Zip Code  
Rockville MD 20852-4547

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

Name of Employer Occupation  
NACUBO Association Manager

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 30 / 2015

**Transaction ID : C10363222**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 3 Elliott Drive

City State Zip Code  
Simsbury CT 06070-1669

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

Name of Employer Occupation  
Allan S. Goodman, Inc. President

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 27 / 2015

**Transaction ID : C10368690**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 850 Webster St  
Apt 623

City State Zip Code  
Palo Alto CA 94301-2837

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 13 / 2015

**Transaction ID : C10371864**

Amount of Each Receipt this Period  
2700.00

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

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

4200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

**A.** Full Name (Last, First, Middle Initial)  
**Mitzi G Henderson**

Mailing Address 850 Webster St  
Apt 623

City Palo Alto State CA Zip Code 94301-2837

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2015

**Transaction ID : C10357021**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address 648 Mountain Rd

City Hamden State CT Zip Code 06514-1214

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

Name of Employer Self-employed Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10366611**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 12 Midden Ln

City Tiburon State CA Zip Code 94920-2114

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

Name of Employer Shearman & Sterling LLP Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10366479**

Amount of Each Receipt this Period  
500.00

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

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

4200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

**A.** Full Name (Last, First, Middle Initial)  
**Robert G Huelin**

Mailing Address 21 Bidwell Sq

City Unionville State CT Zip Code 06085-1115

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

Name of Employer Automotive Technologies, Inc. Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2015

**Transaction ID : C10360811**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 56 Brewster Rd

City Scarsdale State NY Zip Code 10583-2203

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

Name of Employer Self-employed Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 31 / 2015

**Transaction ID : C10338497**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 56 Brewster Rd

City Scarsdale State NY Zip Code 10583-2203

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

Name of Employer Self-employed Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2015

**Transaction ID : C10360063**

Amount of Each Receipt this Period  
1000.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. Stewart A Kagan</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2015
Mailing Address 56 Brewster Rd		<b>Transaction ID : C10366556</b>
City Scarsdale	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Fried, Frank	Occupation Attorney	
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Todd Katz</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 28 / 2015
Mailing Address 820 Greenway Dr		<b>Transaction ID : C10362328</b>
City Beverly Hills	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer Self-employed	Occupation Investments	
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 2700.00	

Full Name (Last, First, Middle Initial) <b>C. Peter G Kelly Sr</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 23 / 2015
Mailing Address PO Box 283		<b>Transaction ID : C10368673</b>
City Middle Haddam	State CT	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Updike Kelly & Spellacy PC	Occupation Attorney	
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4200.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

**A.** Full Name (Last, First, Middle Initial)  
**Suedeem G Kelly**

Mailing Address 2327 Ashmead PI NW

City Washington State DC Zip Code 20009-1496

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

Name of Employer Akin Gump Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2015

**Transaction ID : C10363349**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 31 Hunters Ridge

City Rocky Hill State CT Zip Code 06067-1742

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

Name of Employer Kozak & Salina, LLC Occupation Government Relations

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : C10368697**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 10 Woody Ln

City Westport State CT Zip Code 06880-2259

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

Name of Employer Self Employed Occupation Community Volunteer

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 18 / 2015

**Transaction ID : C10348473**

Amount of Each Receipt this Period  
 1000.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

**A.** Full Name (Last, First, Middle Initial)  
**Raymond J. Learsy**

Mailing Address PO Box 36

City Sharon State CT Zip Code 06069-0036

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10366449**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address 22490 Encinitas Blvd, D111

City Encinitas State CA Zip Code 92024

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

Name of Employer KL Gates Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10366456**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 267 Main St

City Concord State MA Zip Code 01742-2405

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

Name of Employer Harvard University Occupation Professor

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2015

**Transaction ID : C10363521**

Amount of Each Receipt this Period  
2700.00

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

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

5650.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>Dana W Linden</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 28 / 2015
Mailing Address 41 Riverside Dr		<b>Transaction ID : C1035551</b>
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Self-employed	Occupation Writer	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	

Full Name (Last, First, Middle Initial) <b>Dana W Linden</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 28 / 2015
Mailing Address 41 Riverside Dr		<b>Transaction ID : C10338252</b>
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer Self-employed	Occupation Writer	
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 5200.00	

Full Name (Last, First, Middle Initial) <b>Lawrence H Linden</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 03 / 2015
Mailing Address 41 Riverside Dr		<b>Transaction ID : C1035552</b>
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7700.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. Lawrence H Linden</b>		Date of Receipt MM / DD / YYYY 02 / 03 / 2015
Mailing Address 41 Riverside Dr		<b>Transaction ID : C10338746</b>
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer Retired	Occupation Retired	Amount of Each Receipt this Period 5200.00
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>B. Lucinda A Low</b>		Date of Receipt MM / DD / YYYY 03 / 29 / 2015
Mailing Address 8564 Horseshoe Ln		<b>Transaction ID : C10362335</b>
City Potomac	State MD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Steptoe & Johnson LLP	Occupation Lawyer	Amount of Each Receipt this Period 1000.00
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>C. Daniel B Magraw</b>		Date of Receipt MM / DD / YYYY 02 / 10 / 2015
Mailing Address 8564 Horseshoe Ln		<b>Transaction ID : C10365550</b>
City Potomac	State MD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer Center for Int'l Environmental Law	Occupation Attorney	Amount of Each Receipt this Period 5400.00
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6400.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

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

Mailing Address 8564 Horseshoe Ln

City Potomac State MD Zip Code 20854-4840

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

Name of Employer Center for Int'l Environmental Law Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date **5400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 10 / 2015

**Transaction ID : C10340984**

Amount of Each Receipt this Period  
**2700.00**

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

Mailing Address 15 Wooster Hts

City Danbury State CT Zip Code 06810-7536

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

Name of Employer CIFC Community Health Center of Greate Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10371603**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address 1161 Mackie Drive

City Salado State TX Zip Code 76571

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

Name of Employer Wilsonart Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10371596**

Amount of Each Receipt this Period  
**1500.00**

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

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

**5200.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>Todd D McClutchy</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2015	
Mailing Address 158 Holmes Ave		<b>Transaction ID : C10366468</b>	
City Darien	State CT	Zip Code 06820-3818	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00	
Name of Employer JHM Group of Companies	Occupation Real Estate Developer		
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>William J McCue</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 27 / 2015	
Mailing Address 140 Elbridge Road		<b>Transaction ID : C10368693</b>	
City New Britain	State CT	Zip Code 06052-1546	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00	
Name of Employer McCue Mortgage Co	Occupation President		
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>Anita L. Mielert</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2015	
Mailing Address 57 E Weatogue Street		<b>Transaction ID : C10371665</b>	
City Simsbury	State CT	Zip Code 06070-2501	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00	
Name of Employer National Trust for Historic Preservati	Occupation Advisor, CT/Northeast Office		
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

**A.** Full Name (Last, First, Middle Initial)  
**Todd M Millay**

Mailing Address 61 Bond St

City State Zip Code  
Needham MA 02492-3828

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

Name of Employer Occupation  
Choate Investment Advisors Investor

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 30 / 2015

**Transaction ID : C10363228**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address 18 Bob White Way

City State Zip Code  
Weatogue CT 06089-9736

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

Name of Employer Occupation  
Self-employed Attorney-Mediator

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 28 / 2015

**Transaction ID : C10362233**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 78 Ashley Dr

City State Zip Code  
Goshen CT 06756-1813

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

Name of Employer Occupation  
Self-employed Real Estate

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 05 / 2015

**Transaction ID : C10339731**

Amount of Each Receipt this Period  
2700.00

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

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

5650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

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

Mailing Address 7020 Glenbrook Rd

City State Zip Code  
Bethesda MD 20814-1223

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

Name of Employer Occupation  
Politics and Prose Bookstore Business Owner

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 28 / 2015

**Transaction ID : C10362231**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address 1 Hinchley Wood

City State Zip Code  
Farmington CT 06032-1457

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

Name of Employer Occupation  
Oncology Associates Medical Oncologist

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
750.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 13 / 2015

**Transaction ID : C10348266**

Amount of Each Receipt this Period  
750.00

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

Mailing Address 259 E 7th St

City State Zip Code  
New York NY 10009-6085

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 03 / 2015

**Transaction ID : C10354636**

Amount of Each Receipt this Period  
2700.00

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

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

6150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. Ralph Parson</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2015	
Mailing Address 61 Shore Road		<b>Transaction ID : C10371666</b>	
City Clinton	State CT	Zip Code 06413	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Prospect Products.Inc	Occupation Corp Officer		
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>B. David Pena</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 27 / 2015	
Mailing Address 11 Avalon Dr		<b>Transaction ID : C10368688</b>	
City Avon	State CT	Zip Code 06001-3539	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Self-employed	Occupation Consultant		
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>C. Lindsey R. Pinkham</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 27 / 2015	
Mailing Address Connecticut Bankers Association 10 Waterside Drive		<b>Transaction ID : C10368694</b>	
City Farmington	State CT	Zip Code 06032	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Connecticut Bankers Association	Occupation President & CEO		
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

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

Mailing Address 20 Fenwick Ave

City State Zip Code  
Old Saybrook CT 06475

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

Name of Employer Occupation  
American Cruise Lines CEO

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 11 / 2015

**Transaction ID : C10341064**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address 10 N Branford Rd

City State Zip Code  
Wallingford CT 06492-2712

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

Name of Employer Occupation  
Ruben/Horan PC Partner/Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

**Transaction ID : C10366452**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 95 Spicewood Lane

City State Zip Code  
Berlin CT 06037-2831

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

Name of Employer Occupation  
Kozak & Salina LLC Government Relations

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 27 / 2015

**Transaction ID : C10368698**

Amount of Each Receipt this Period  
250.00

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

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

3950.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

**A.** Full Name (Last, First, Middle Initial)  
**Kurt Lidell Schmoke**

Mailing Address 1292 Hollywood Ave

City Annapolis State MD Zip Code 21403-4927

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

Name of Employer University of Baltimore Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 18 / 2015

**Transaction ID : C10349065**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 7 Stonegate Cir

City Cheshire State CT Zip Code 06410-3461

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

Name of Employer Yale University Occupation Physician

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2015

**Transaction ID : C10360683**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address PO Box 1880

City Litchfield State CT Zip Code 06759

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10371580**

Amount of Each Receipt this Period  
 2700.00

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

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

4200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

**A.** Full Name (Last, First, Middle Initial)  
**Margaret N Selby**

Mailing Address **PO Box 1880**

City **Litchfield** State **CT** Zip Code **06759**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2016  
 Primary  General  
 Other (specify) **Convention**

Election Cycle-to-Date  
**5400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : C10371581**

Amount of Each Receipt this Period  
**2700.00**

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

Mailing Address **36 Pinnacle Mountain Rd**

City **Simsbury** State **CT** Zip Code **06070-1809**

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

Name of Employer **Axis Insurance** Occupation **Insurance**

Receipt For: 2016  
 Primary  General  
 Other (specify) **Convention**

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 28 / 2015**

**Transaction ID : C10354034**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address **3108 Black Chestnut Ln**

City **Chevy Chase** State **MD** Zip Code **20815-4754**

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

Name of Employer **Sidley Austin LLP** Occupation **Attorney**

Receipt For: 2016  
 Primary  General  
 Other (specify) **Convention**

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 13 / 2015**

**Transaction ID : C10348260**

Amount of Each Receipt this Period  
**1000.00**

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

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

**3950.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

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

Mailing Address 940 Meadow Ridge Dr

City Holland State MI Zip Code 49424-6491

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

Name of Employer Self-employed Occupation Investor

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10371595**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address 745 5th Avenue  
Floor 26

City New York State NY Zip Code 10151-2600

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

Name of Employer Shufro, Rose & Co. Occupation Senior Managing Director

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10371604**

Amount of Each Receipt this Period  
 2700.00

**C.** Full Name (Last, First, Middle Initial)  
**Earl J Smith Jr**

Mailing Address 5 Serenity Lane

City Sandy Hook State CT Zip Code 06482-1630

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10371586**

Amount of Each Receipt this Period  
 1000.00

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

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

5200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

**A.** Full Name (Last, First, Middle Initial)  
**Nicholas N Solley**

Mailing Address 17 Judea Cemetery Rd

City Washington State CT Zip Code 06793-1506

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

Name of Employer Self Employed Occupation Farmer

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10371583**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 1203 New Jersey Ave NW

City Washington State DC Zip Code 20001-1225

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

Name of Employer Heather Podesta + Partners Occupation Lobbyist

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 24 / 2015

**Transaction ID : C10353087**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 71 Toxteth St

City Brookline State MA Zip Code 02446-6911

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

Name of Employer Self-employed Occupation Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10366551**

Amount of Each Receipt this Period  
 250.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. Allan B Taylor</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 28 / 2015
Mailing Address 238 Whitney St		<b>Transaction ID : C10362270</b>
City Hartford	State CT	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer City of Hartford	Occupation Attorney	
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>B. Barbara G Thibodo</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 27 / 2015
Mailing Address 160 White Hollow Road		<b>Transaction ID : C10368684</b>
City Sharon	State CT	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Hotchkiss Library of Sharon CT	Occupation Librarian	
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>C. Joseph B Tompkins Jr</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 30 / 2015
Mailing Address 8146 Wellington Rd		<b>Transaction ID : C10363427</b>
City Alexandria	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Sidley Austin	Occupation Attorney	
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

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

Mailing Address 463 18th St

City Santa Monica State CA Zip Code 90402-2429

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

Name of Employer College Decisions, LLC Occupation Marketing Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : C10371865**

Amount of Each Receipt this Period  
**2700.00**

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

Mailing Address 463 18th St

City Santa Monica State CA Zip Code 90402-2429

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

Name of Employer College Decisions, LLC Occupation Marketing Executive

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date **5400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : C10366557**

Amount of Each Receipt this Period  
**2700.00**

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

Mailing Address PO Box 606

City Salisbury State CT Zip Code 06068-0606

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

Name of Employer Self-employed Occupation Investor

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date **2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 28 / 2015**

**Transaction ID : C10354032**

Amount of Each Receipt this Period  
**2600.00**

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

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

**8000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. Elpidio Villarreal</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 27 / 2015	
Mailing Address 10 W End Ave Apt 9H		<b>Transaction ID : C10362193</b>	
City State Zip Code New York NY 10023-7829	Amount of Each Receipt this Period _____ 500.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation GlaxoSmithKline Attorney		
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date _____ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Morton L. Weinstein</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 13 / 2015	
Mailing Address 1 Hinchley Wood		<b>Transaction ID : C10348265</b>	
City State Zip Code Farmington CT 06032-1457	Amount of Each Receipt this Period _____ 750.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Weinstein Mortuary Funeral Director		
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date _____ 759.09		

Full Name (Last, First, Middle Initial) <b>C. Adam D Winstanley</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2015	
Mailing Address 150 Baker Avenue Ext Suite 303		<b>Transaction ID : C10371584</b>	
City State Zip Code Concord MA 01742-2199	Amount of Each Receipt this Period _____ 1000.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Winstanley Enterprises LLC Real Estate Investor		
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date _____ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 2250.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 40 OF 132  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

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

Mailing Address 1509 Church St NW

City Washington State DC Zip Code 20005-1905

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

Name of Employer Wilmer Hale Occupation Lawyer

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10371700**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 1 Pine Street

City Cornwall State CT Zip Code 06753

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

Name of Employer The Liro Group Occupation Construction Manager

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 01 / 2015

**Transaction ID : C10354046**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address PO Box 430

City Sherman State CT Zip Code 06784-0430

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10363694**

Amount of Each Receipt this Period  
 1000.00

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

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

2500.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

**A.** Full Name (Last, First, Middle Initial)  
**Daryl L Worobow**

Mailing Address 35 High Gate Dr

City Avon State CT Zip Code 06001-4111

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

Name of Employer Guardian Life Insurance Co Occupation Financial Representative

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : C10368696**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 304 Cameron Station Blvd.

City Alexandria State VA Zip Code 22304

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

Name of Employer Alston & Bird, LLP Occupation Senior Policy Advisor

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 23 / 2015

**Transaction ID : C10368670**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 530 E 86th St Apt 12C

City New York State NY Zip Code 10028-7535

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

Name of Employer Credit Suisse Occupation Investment Management

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 01 / 2015

**Transaction ID : C10354158A**

Amount of Each Receipt this Period  
 2700.00

\* Earmarked Contribution: See Below

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

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

3950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

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

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
43092.67

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 01 / 2015

**Transaction ID : C10354158AB**

Amount of Each Receipt this Period  
2700.00

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

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

Mailing Address 3101 New Mexico Ave NW  
Apt 249

City Washington State DC Zip Code 20016-5912

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

Name of Employer Occupation  
Self Employed Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10367461A**

Amount of Each Receipt this Period  
250.00

\* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
43092.67

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10367461AB**

Amount of Each Receipt this Period  
250.00

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

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

**A.** Full Name (Last, First, Middle Initial)  
**Barbara F Berenson**

Mailing Address 39 Karen Rd

City Waban State MA Zip Code 02468-1123

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

Name of Employer Mass. Supreme Judicial Ct Occupation Senior Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10367464A**

Amount of Each Receipt this Period  
500.00

\* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
43092.67

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10367464AB**

Amount of Each Receipt this Period  
500.00

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

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

Mailing Address 40 Garfield St

City Watertown State MA Zip Code 02472-4915

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

Name of Employer The Forestland Group LLC Occupation Timberland investments

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 08 / 2015

**Transaction ID : C10355675A**

Amount of Each Receipt this Period  
500.00

\* Earmarked Contribution: See Below

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

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

Mailing Address P.O. BOX 441146

City: SOMERVILLE State: MA Zip Code: 02144

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date: 43092.67

Date of Receipt: 03 / 08 / 2015

**Transaction ID : C10355675AB**

Amount of Each Receipt this Period: 500.00

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

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

Mailing Address P.O. Box 309

City: Flint Hill State: VA Zip Code: 22627-0309

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

Name of Employer: Occupation: Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date: 209.09

Date of Receipt: 01 / 04 / 2015

**Transaction ID : C10338652A**

Amount of Each Receipt this Period: 200.00

\* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 441146

City: SOMERVILLE State: MA Zip Code: 02144

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date: 43092.67

Date of Receipt: 01 / 04 / 2015

**Transaction ID : C10338652AB**

Amount of Each Receipt this Period: 200.00

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

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

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

200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

**A.** Full Name (Last, First, Middle Initial)  
**Linda R. Dietel**

Mailing Address P.O. Box 309

City Flint Hill State VA Zip Code 22627-0309

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
209.09

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 15 / 2015

**Transaction ID : C10357343A**

Amount of Each Receipt this Period  
9.09

\* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
43092.67

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 15 / 2015

**Transaction ID : C10357343AB**

Amount of Each Receipt this Period  
9.09

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

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

Mailing Address 40 Washington Sq S

City New York State NY Zip Code 10012-1005

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

Name of Employer New York University Law School Occupation Professor

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 08 / 2015

**Transaction ID : C10355677A**

Amount of Each Receipt this Period  
500.00

\* Earmarked Contribution: See Below

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

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

509.09

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

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

Mailing Address P.O. BOX 441146

City: **SOMERVILLE** State: **MA** Zip Code: **02144**

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

Name of Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_  
Conduit total listed in Agg. field: \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_ Convention: \_\_\_\_\_

Election Cycle-to-Date: \_\_\_\_\_  
43092.67

Date of Receipt: **03 / 08 / 2015**

**Transaction ID : C10355677AB**

Amount of Each Receipt this Period: **500.00**

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

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

Mailing Address 4 Fox Run Ln

City: **Newtown** State: **CT** Zip Code: **06470-1704**

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

Name of Employer: **Danbury Office of Physician Services** Occupation: **Physician**

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_ Convention: \_\_\_\_\_

Election Cycle-to-Date: \_\_\_\_\_  
625.00

Date of Receipt: **02 / 01 / 2015**

**Transaction ID : C10338733A**

Amount of Each Receipt this Period: **25.00**

\* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 441146

City: **SOMERVILLE** State: **MA** Zip Code: **02144**

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

Name of Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_  
Conduit total listed in Agg. field: \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_ Convention: \_\_\_\_\_

Election Cycle-to-Date: \_\_\_\_\_  
43092.67

Date of Receipt: **02 / 01 / 2015**

**Transaction ID : C10338733AB**

Amount of Each Receipt this Period: **25.00**

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

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

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

**25.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

**A.** Full Name (Last, First, Middle Initial)  
**Greg G Dworkin**

Mailing Address 4 Fox Run Ln

City State Zip Code  
Newtown CT 06470-1704

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

Name of Employer Occupation  
Danbury Office of Physician Services Physician

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
625.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 01 / 2015

**Transaction ID : C10354145A**

Amount of Each Receipt this Period  
100.00

\* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 441146

City State Zip Code  
SOMERVILLE MA 02144

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
43092.67

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 01 / 2015

**Transaction ID : C10354145AB**

Amount of Each Receipt this Period  
100.00

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

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

Mailing Address 4 Fox Run Ln

City State Zip Code  
Newtown CT 06470-1704

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

Name of Employer Occupation  
Danbury Office of Physician Services Physician

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
625.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 29 / 2015

**Transaction ID : C10363487A**

Amount of Each Receipt this Period  
500.00

\* Earmarked Contribution: See Below

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

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

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
43092.67

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2015

**Transaction ID : C10363487AB**

Amount of Each Receipt this Period  
500.00

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

**B.** Full Name (Last, First, Middle Initial)  
**Edward T Esty II**

Mailing Address 4701 Willard Ave  
Apt 635

City Chevy Chase State MD Zip Code 20815-4616

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

Name of Employer Occupation  
Self Employed Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 01 / 2015

**Transaction ID : C10354146A**

Amount of Each Receipt this Period  
1000.00

\* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
43092.67

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 01 / 2015

**Transaction ID : C10354146AB**

Amount of Each Receipt this Period  
1000.00

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

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

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

1000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

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

Mailing Address 1167 Marion Road

City Cheshire State CT Zip Code 06410

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

Name of Employer Yale University Occupation Professor

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10367488A**

Amount of Each Receipt this Period  
250.00

\* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
43092.67

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10367488AB**

Amount of Each Receipt this Period  
250.00

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

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

Mailing Address 1167 Marion Rd

City Cheshire State CT Zip Code 06410-1440

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

Name of Employer Yale University Occupation Administrator

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10367489A**

Amount of Each Receipt this Period  
250.00

\* Earmarked Contribution: See Below

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

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

Mailing Address P.O. BOX 441146

City: **SOMERVILLE** State: **MA** Zip Code: **02144**

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

Name of Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_  
Conduit total listed in Agg. field: \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_ Convention

Election Cycle-to-Date: \_\_\_\_\_  
43092.67

Date of Receipt: **03 / 31 / 2015**

**Transaction ID : C10367489AB**

Amount of Each Receipt this Period: **250.00**

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

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

Mailing Address PO Box 2247

City: **Setauket** State: **NY** Zip Code: **11733-0726**

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

Name of Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_ Convention

Election Cycle-to-Date: \_\_\_\_\_  
5400.00

Date of Receipt: **02 / 01 / 2015**

**Transaction ID : C10338736A**

Amount of Each Receipt this Period: **2600.00**

\* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 441146

City: **SOMERVILLE** State: **MA** Zip Code: **02144**

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

Name of Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_  
Conduit total listed in Agg. field: \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_ Convention

Election Cycle-to-Date: \_\_\_\_\_  
43092.67

Date of Receipt: **02 / 01 / 2015**

**Transaction ID : C10338736AB**

Amount of Each Receipt this Period: **2600.00**

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

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

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

**2600.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

**A.** Full Name (Last, First, Middle Initial)  
**Linda Ceilia Goldstein**

Mailing Address 175 Riverside Dr  
Apt 10H

City State Zip Code  
New York NY 10024-1616

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

Name of Employer Occupation  
Dechert LLP Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 01 / 2015

**Transaction ID : C10354182A**

Amount of Each Receipt this Period  
250.00

\* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 441146

City State Zip Code  
SOMERVILLE MA 02144

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
43092.67

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 01 / 2015

**Transaction ID : C10354182AB**

Amount of Each Receipt this Period  
250.00

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

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

Mailing Address 62 Frisbie Rd

City State Zip Code  
Washington CT 06793-1703

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

Name of Employer Occupation  
Self-employed Writer/Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 29 / 2015

**Transaction ID : C10363492A**

Amount of Each Receipt this Period  
1000.00

\* Earmarked Contribution: See Below

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

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

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
43092.67

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2015

**Transaction ID : C10363492AB**

Amount of Each Receipt this Period  
1000.00

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

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

Mailing Address 246 Pleasant Point Rd

City Branford State CT Zip Code 06405-5610

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 22 / 2015

**Transaction ID : C10350827A**

Amount of Each Receipt this Period  
1000.00

\* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
43092.67

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 22 / 2015

**Transaction ID : C10350827AB**

Amount of Each Receipt this Period  
1000.00

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

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

**A.** Full Name (Last, First, Middle Initial)  
**Keith Raven Johnson**

Mailing Address **PO Box 1188**

City **Sharon** State **CT** Zip Code **06069-1188**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2016  
 Primary  General  
 Other (specify) **Convention**

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 01 / 2015**

**Transaction ID : C10354161A**

Amount of Each Receipt this Period  
**1000.00**

\* Earmarked Contribution: See Below

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

Mailing Address **P.O. BOX 441146**

City **SOMERVILLE** State **MA** Zip Code **02144**

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify) **Convention**

Election Cycle-to-Date  
**43092.67**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 01 / 2015**

**Transaction ID : C10354161AB**

Amount of Each Receipt this Period  
**1000.00**

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

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

Mailing Address **PO Box 119**

City **Galveston** State **TX** Zip Code **77553-0119**

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

Name of Employer **Kempner Capital Management, Inc.** Occupation **President**

Receipt For: 2016  
 Primary  General  
 Other (specify) **Convention**

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : C10367515A**

Amount of Each Receipt this Period  
**2000.00**

\* Earmarked Contribution: See Below

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

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

**3000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

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

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
43092.67

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10367515AB**

Amount of Each Receipt this Period  
2000.00

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

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

Mailing Address 2715 Steiner St

City San Francisco State CA Zip Code 94123-4713

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10367525A**

Amount of Each Receipt this Period  
250.00

\* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
43092.67

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10367525AB**

Amount of Each Receipt this Period  
250.00

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

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

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

Mailing Address 116 Tower Rd

City Brookfield State CT Zip Code 06804-3653

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
1000.00

Date of Receipt  
03 / 01 / 2015

**Transaction ID : C10354181A**

Amount of Each Receipt this Period  
1000.00

\* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
43092.67

Date of Receipt  
03 / 01 / 2015

**Transaction ID : C10354181AB**

Amount of Each Receipt this Period  
1000.00

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

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

Mailing Address 8 Erins Way

City Sinsbury State CT Zip Code 06070-3191

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
250.00

Date of Receipt  
03 / 31 / 2015

**Transaction ID : C10367584A**

Amount of Each Receipt this Period  
250.00

\* Earmarked Contribution: See Below

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

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

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
43092.67

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10367584AB**

Amount of Each Receipt this Period  
250.00

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

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

Mailing Address 308 Titicus Road

City North Salem State NY Zip Code 10560

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

Name of Employer Occupation  
Arcadia Windpower Ltd. Wind Developer

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2015

**Transaction ID : C10363466A**

Amount of Each Receipt this Period  
1000.00

\* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
43092.67

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2015

**Transaction ID : C10363466AB**

Amount of Each Receipt this Period  
1000.00

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

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

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

1000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

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

Mailing Address 140 Greenwood Ave.

City Waterbury State CT Zip Code 06704

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
409.09

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 04 / 2015

**Transaction ID : C10338659A**

Amount of Each Receipt this Period  
100.00

\* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
43092.67

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 04 / 2015

**Transaction ID : C10338659AB**

Amount of Each Receipt this Period  
100.00

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

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

Mailing Address 140 Greenwood Ave.

City Waterbury State CT Zip Code 06704

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
409.09

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 11 / 2015

**Transaction ID : C10338672A**

Amount of Each Receipt this Period  
50.00

\* 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 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

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

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
43092.67

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 11 / 2015

**Transaction ID : C10338672AB**

Amount of Each Receipt this Period  
50.00

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

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

Mailing Address 140 Greenwood Ave.

City Waterbury State CT Zip Code 06704

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
409.09

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 18 / 2015

**Transaction ID : C10338691A**

Amount of Each Receipt this Period  
50.00

\* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
43092.67

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 18 / 2015

**Transaction ID : C10338691AB**

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 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

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

Mailing Address 140 Greenwood Ave.

City Waterbury State CT Zip Code 06704

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
**409.09**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 15 / 2015**

**Transaction ID : C10348356A**

Amount of Each Receipt this Period  
**50.00**

\* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
**43092.67**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 15 / 2015**

**Transaction ID : C10348356AB**

Amount of Each Receipt this Period  
**50.00**

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

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

Mailing Address 140 Greenwood Ave.

City Waterbury State CT Zip Code 06704

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
**409.09**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 15 / 2015**

**Transaction ID : C10357312A**

Amount of Each Receipt this Period  
**9.09**

\* Earmarked Contribution: See Below

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

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

**59.09**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

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

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
43092.67

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 15 / 2015

**Transaction ID : C10357312AB**

Amount of Each Receipt this Period  
9.09

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

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

Mailing Address 140 Greenwood Ave.

City Waterbury State CT Zip Code 06704

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
409.09

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 15 / 2015

**Transaction ID : C10357313A**

Amount of Each Receipt this Period  
50.00

\* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
43092.67

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 15 / 2015

**Transaction ID : C10357313AB**

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 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

**A.** Full Name (Last, First, Middle Initial)  
**John H McClutchy Jr**

Mailing Address 11 Molly Ln

City Darien State CT Zip Code 06820-2929

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

Name of Employer JHM Financial Group Occupation CEO

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2015

**Transaction ID : C10363489A**

Amount of Each Receipt this Period  
1000.00

\* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
43092.67

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2015

**Transaction ID : C10363489AB**

Amount of Each Receipt this Period  
1000.00

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

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

Mailing Address 132 Beach Ave

City Milford State CT Zip Code 06460-8004

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

Name of Employer Iota Inc Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10367524A**

Amount of Each Receipt this Period  
500.00

\* Earmarked Contribution: See Below

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

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

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
43092.67

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10367524AB**

Amount of Each Receipt this Period  
500.00

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

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

Mailing Address 40 Fifth Avenue

City New York State NY Zip Code 10011

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

Name of Employer Occupation  
Self-employed Investor

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10367550A**

Amount of Each Receipt this Period  
2700.00

\* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
43092.67

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10367550AB**

Amount of Each Receipt this Period  
2700.00

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

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

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

2700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

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

Mailing Address 40 Fifth Avenue

City State Zip Code  
New York NY 10011

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

Name of Employer Occupation  
Self-employed Investor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10371866A**

Amount of Each Receipt this Period  
2700.00

\* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 441146

City State Zip Code  
SOMERVILLE MA 02144

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
43092.67

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10371866AB**

Amount of Each Receipt this Period  
2700.00

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

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

Mailing Address 563 Park Ave  
Apt 6E

City State Zip Code  
New York NY 10065-7379

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

Name of Employer Occupation  
Travel + Leisure Editor in Chief

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2015

**Transaction ID : C10363496A**

Amount of Each Receipt this Period  
250.00

\* Earmarked Contribution: See Below

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

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

2950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

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

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
43092.67

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2015

**Transaction ID : C10363496AB**

Amount of Each Receipt this Period  
250.00

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

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

Mailing Address 125 Westledge Rd

City West Simsbury State CT Zip Code 06092

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

Name of Employer Occupation  
Educational Playcare Child Care Administrator

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10367569A**

Amount of Each Receipt this Period  
1000.00

\* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
43092.67

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10367569AB**

Amount of Each Receipt this Period  
1000.00

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

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

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

1000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

**A.** Full Name (Last, First, Middle Initial)  
**Robert M Portman**

Mailing Address 6803 West Ave

City Chevy Chase State MD Zip Code 20815-5203

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

Name of Employer Powers Pyles Sutter & Verville PC Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
-250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10367522A**

Amount of Each Receipt this Period  
250.00

\* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
43092.67

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10367522AB**

Amount of Each Receipt this Period  
250.00

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

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

Mailing Address 166 E 61st St Apt 14G

City New York State NY Zip Code 10065-8521

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

Name of Employer CGS Associates Occupation Finance

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2015

**Transaction ID : C10363516A**

Amount of Each Receipt this Period  
500.00

\* Earmarked Contribution: See Below

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

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

Mailing Address P.O. BOX 441146

City: SOMERVILLE State: MA Zip Code: 02144

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date: 43092.67

Date of Receipt: 03 / 29 / 2015

**Transaction ID : C10363516AB**

Amount of Each Receipt this Period: 500.00

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

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

Mailing Address 5505 Devon Rd

City: Bethesda State: MD Zip Code: 20814-1009

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

Name of Employer: Occupation: Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date: 500.00

Date of Receipt: 03 / 31 / 2015

**Transaction ID : C10367527A**

Amount of Each Receipt this Period: 500.00

\* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 441146

City: SOMERVILLE State: MA Zip Code: 02144

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date: 43092.67

Date of Receipt: 03 / 31 / 2015

**Transaction ID : C10367527AB**

Amount of Each Receipt this Period: 500.00

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

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. Scott H Segal</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2015
Mailing Address 1722 S St NW		<b>Transaction ID : C10367526A</b>
City Washington	State DC	
Zip Code 20009-6145		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		* Earmarked Contribution: See Below
Name of Employer Bracewell Giuliani	Occupation Attorney	
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>B. ACTBLUE</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2015
Mailing Address P.O. BOX 441146		<b>Transaction ID : C10367526AB</b>
City SOMERVILLE	State MA	
Zip Code 02144		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C C00401224		<b>[MEMO ITEM]</b> Note: Above Contribution earmarked through this organization.
Name of Employer	Occupation Conduit total listed in Agg. field	
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 43092.67	

Full Name (Last, First, Middle Initial) <b>C. Jay R Tunney</b>		Date of Receipt MM / DD / YYYY 03 / 01 / 2015
Mailing Address 55 E. Pearson St #4804		<b>Transaction ID : C10354174A</b>
City Chicago	State IL	
Zip Code 60611		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		* Earmarked Contribution: See Below
Name of Employer Retired	Occupation Retired	
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

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

Mailing Address P.O. BOX 441146

City: SOMERVILLE State: MA Zip Code: 02144

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date: 43092.67

Date of Receipt: 03 / 01 / 2015

**Transaction ID : C10354174AB**

Amount of Each Receipt this Period: 250.00

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

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

Mailing Address 193 S Salem Rd

City: Ridgefield State: CT Zip Code: 06877-4832

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

Name of Employer: Occupation: Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date: 500.00

Date of Receipt: 03 / 31 / 2015

**Transaction ID : C10367530A**

Amount of Each Receipt this Period: 500.00

\* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 441146

City: SOMERVILLE State: MA Zip Code: 02144

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date: 43092.67

Date of Receipt: 03 / 31 / 2015

**Transaction ID : C10367530AB**

Amount of Each Receipt this Period: 500.00

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

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

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

Mailing Address **PO Box 606**

City **Salisbury** State **CT** Zip Code **06068-0606**

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

Name of Employer **DLA Piper** Occupation **Lawyer**

Receipt For: 2016  
 Primary  General  
 Other (specify) **Convention**

Election Cycle-to-Date  
**2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 01 / 2015**

**Transaction ID : C10354163A**

Amount of Each Receipt this Period  
**2600.00**

\* Earmarked Contribution: See Below

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

Mailing Address **P.O. BOX 441146**

City **SOMERVILLE** State **MA** Zip Code **02144**

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify) **Convention**

Election Cycle-to-Date  
**43092.67**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 01 / 2015**

**Transaction ID : C10354163AB**

Amount of Each Receipt this Period  
**2600.00**

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

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

Mailing Address **3 Idlewile Ln**

City **Weston** State **MA** Zip Code **02493-1922**

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

Name of Employer Occupation  
**Self-employed Homemaker**

Receipt For: 2016  
 Primary  General  
 Other (specify) **Convention**

Election Cycle-to-Date  
**2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 29 / 2015**

**Transaction ID : C10363500A**

Amount of Each Receipt this Period  
**2700.00**

\* Earmarked Contribution: See Below

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

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

**5300.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

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

Mailing Address P.O. BOX 441146

City: SOMERVILLE State: MA Zip Code: 02144

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date: 43092.67

Date of Receipt: 03 / 29 / 2015

**Transaction ID : C10363500AB**

Amount of Each Receipt this Period: 2700.00

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

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

Mailing Address 4200 43rd St NW

City: Washington State: DC Zip Code: 20016-2412

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

Name of Employer: Occupation: Attorney

Marriott International Inc

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date: 500.00

Date of Receipt: 03 / 31 / 2015

**Transaction ID : C10367523A**

Amount of Each Receipt this Period: 500.00

\* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 441146

City: SOMERVILLE State: MA Zip Code: 02144

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date: 43092.67

Date of Receipt: 03 / 31 / 2015

**Transaction ID : C10367523AB**

Amount of Each Receipt this Period: 500.00

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

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

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

Mailing Address 3348 Runnymede PI NW

City Washington State DC Zip Code 20015-2416

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

Name of Employer Sidley Austin Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10367517A**

Amount of Each Receipt this Period  
500.00

\* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
43092.67

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10367517AB**

Amount of Each Receipt this Period  
500.00

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

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

Mailing Address 1 Hinchley Wood

City Farmington State CT Zip Code 06032-1457

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

Name of Employer Weinstein Mortuary Occupation Funeral Director

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
759.09

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 15 / 2015

**Transaction ID : C10357322A**

Amount of Each Receipt this Period  
9.09

\* Earmarked Contribution: See Below

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

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

509.09

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

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

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
43092.67

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 15 / 2015

**Transaction ID : C10357322AB**

Amount of Each Receipt this Period  
9.09

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

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

Mailing Address 1095 Park Ave.

City New York State NY Zip Code 10128

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

Name of Employer Occupation  
Self-employed Designer

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2015

**Transaction ID : C10363477A**

Amount of Each Receipt this Period  
1000.00

\* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
43092.67

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2015

**Transaction ID : C10363477AB**

Amount of Each Receipt this Period  
1000.00

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

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

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

1000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

**A.** Full Name (Last, First, Middle Initial)  
**Ropes & Gray**

Mailing Address 500 Boylston Street

City Boston State MA Zip Code 02199

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 11 / 2015

**Transaction ID : C10355554**

Amount of Each Receipt this Period  
1500.00

PARTNERSHIP--partners below if itemized

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

Mailing Address 118 Dean Rd

City Brookline State MA Zip Code 02445-4212

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

Name of Employer Occupation  
Harvard Business School Professor

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 11 / 2015

**Transaction ID : C10341065**

Amount of Each Receipt this Period  
1500.00

**[MEMO ITEM]**  
\*

**C.** Full Name (Last, First, Middle Initial)  
**William H Meadows III**

Mailing Address 1015 33rd St NW  
Apt 702

City Washington State DC Zip Code 20007-3525

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

Name of Employer Occupation  
The Wilderness Society Conservationist

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2015

**Transaction ID : C10358700A**

Amount of Each Receipt this Period  
1000.00

\* Earmarked Contribution: See Below

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

**A. League of Conservation Voters Action Fund**

Full Name (Last, First, Middle Initial)  
Mailing Address 1920 L St NW  
Ste 800  
City Washington State DC Zip Code 20036-5045

FEC ID number of contributing federal political committee. **C** C00252940

Name of Employer League of Conservation Voters Occupation Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention  
 Election Cycle-to-Date  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2015

**Transaction ID : C10358700AB**

Amount of Each Receipt this Period  
 1000.00

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

**B. Eugene F Fercodini**

Full Name (Last, First, Middle Initial)  
Mailing Address 19 Andrea Ave  
City Wolcott State CT Zip Code 06716-3207

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

Name of Employer Fercodini Properties Occupation Realtor

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention  
 Election Cycle-to-Date  
 525.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2015

**Transaction ID : C10371889**

Amount of Each Receipt this Period  
 500.00

\* Earmarked Contribution: See Below

**C. VOTESANE PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 2713  
City ALEXANDRIA State VA Zip Code 22301

FEC ID number of contributing federal political committee. **C** C00484535

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention  
 Election Cycle-to-Date  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2015

**Transaction ID : C10371889B**

Amount of Each Receipt this Period  
 500.00

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

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

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

500.00

189382.27

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 132
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

**A.** Full Name (Last, First, Middle Initial)  
**4MA PAC**

Mailing Address **PO BOX 590-464**

City **NEWTON** State **MA** Zip Code **02459**

FEC ID number of contributing federal political committee. **C C00543504**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 28 / 2015**

**Transaction ID : C10369685**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**AIRCRAFT OWNERS AND PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address **421 AVIATION WAY**

City **FREDERICK** State **MD** Zip Code **21701**

FEC ID number of contributing federal political committee. **C C00131185**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 10 / 2015**

**Transaction ID : C10371888**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**AIRLINES FOR AMERICA (A4A) POLITICAL ACTION COMMITTEE**

Mailing Address **1301 PENNSYLVANIA AVENUE NW**

City **WASHINGTON** State **DC** Zip Code **20004**

FEC ID number of contributing federal political committee. **C C00114694**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : C10371657**

Amount of Each Receipt this Period  
**1000.00**

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

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

**2500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 76 OF 132	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)**

Mailing Address 1120 CONNECTICUT AVENUE NW  
SUITE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 28 / 2015

**Transaction ID : C10368707**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN BUS ASSOCIATION-BUSPAC POLITICAL ACTION COMMITTEE**

Mailing Address 111 K STREET NE  
9TH FLOOR

City WASHINGTON State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C** C00004879

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 28 / 2015

**Transaction ID : C10368708**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN GASTROENTEROLOGICAL ASSOCIATION INC. PAC**

Mailing Address 4926 DEL RAY AVENUE

City BETHESDA State MD Zip Code 20814

FEC ID number of contributing federal political committee. **C** C00423228

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 28 / 2015

**Transaction ID : C10368710**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 77 OF 132	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE**

Mailing Address 1061 AMERICAN LANE

City State Zip Code  
SCHAUMBURG IL 60173

FEC ID number of contributing federal political committee. **C C00255752**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2015

**Transaction ID : C10369693**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**AMERIPAC: THE FUND FOR A GREATER AMERICA**

Mailing Address 700 13TH STREET, NW  
SUITE 600

City State Zip Code  
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C C00271338**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2015

**Transaction ID : C10369708**

Amount of Each Receipt this Period  
 5000.00

**C.** Full Name (Last, First, Middle Initial)  
**AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)**

Mailing Address 208 S. AKARD STREET  
SUITE 2701

City State Zip Code  
DALLAS TX 75202

FEC ID number of contributing federal political committee. **C C00109017**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 23 / 2015

**Transaction ID : C10368678**

Amount of Each Receipt this Period  
 1000.00

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 132
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

**A.** Full Name (Last, First, Middle Initial)  
**ATLAS AIR WORLDWIDE HOLDINGS, INC. POLITICAL ACTION COMMITTEE**

Mailing Address **2000 WESTCHESTER AVENUE**

City **PURCHASE** State **NY** Zip Code **10577**

FEC ID number of contributing federal political committee. **C C00478099**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) **Convention**

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 28 / 2015**

**Transaction ID : C10369688**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**BNSF RAILWAY COMPANY RAILPAC (BNSF RAILPAC)**

Mailing Address **P.O. BOX 961039**

City **FORT WORTH** State **TX** Zip Code **76161**

FEC ID number of contributing federal political committee. **C C00235739**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) **Convention**

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 28 / 2015**

**Transaction ID : C10369692**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**CAP-PAC SEPARATE SEGREGATED FUND OF NATIONAL COMMUNITY ACTION FOUNDATION, INC.**

Mailing Address **1 MASSACHUSETTS AVENUE, NW  
SUITE 310**

City **WASHINGTON** State **DC** Zip Code **20001**

FEC ID number of contributing federal political committee. **C C00163048**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) **Convention**

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : C10371885**

Amount of Each Receipt this Period  
**1000.00**

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

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

**3000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 132
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

**A.** Full Name (Last, First, Middle Initial)  
**CIGNA CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 601 PENNSYLVANIA AVENUE NW  
SOUTH BUILDING SUITE 835

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00085316**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10371573**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**CONTINENTAL AIRLINES INC EMPLOYEE FUND FOR A BETTER AMERICA PAC**

Mailing Address 1600 SMITH STREET  
SUITE HQSGV-19TH FLOOR

City HOUSTON State TX Zip Code 77002

FEC ID number of contributing federal political committee. **C C00101766**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10371708**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**COX ENTERPRISES PAC (COXPAC) INC.**

Mailing Address 975 F STREET, NW SUITE 300

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00477653**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2015

**Transaction ID : C10371887**

Amount of Each Receipt this Period  
 2500.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 132
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

**A. DEMOCRATS WIN SEATS (DWS PAC)**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 83142

City State Zip Code  
GAITHERSBURG MD 20883

FEC ID number of contributing federal political committee. **C C00425470**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)    Convention

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 28 / 2015

**Transaction ID : C10369684**

Amount of Each Receipt this Period  
2500.00

**B. ENTERPRISE HOLDINGS, INC. POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)  
Mailing Address 600 CORPORATE PARK DRIVE

City State Zip Code  
ST. LOUIS MO 63105

FEC ID number of contributing federal political committee. **C C00219642**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)    Convention

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

**Transaction ID : C10371574**

Amount of Each Receipt this Period  
1000.00

**C. GENERAL DYNAMICS CORPORATION POLITICAL ACTION COMMITTEE (GDC PAC)**

Full Name (Last, First, Middle Initial)  
Mailing Address 2941 FAIRVIEW PARK DR. SUITE 100

City State Zip Code  
FALLS CHURCH VA 22042

FEC ID number of contributing federal political committee. **C C00078451**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)    Convention

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 12 / 2015

**Transaction ID : C10355544**

Amount of Each Receipt this Period  
2000.00

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

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

5500.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 132
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

**A. JOBS, OPPORTUNITIES AND EDUCATION PAC (JOE-PAC)**

Full Name (Last, First, Middle Initial)  
Mailing Address 410 1ST ST, SE  
SUITE 310  
City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C C00362384**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10371656**

Amount of Each Receipt this Period  
 2500.00

**B. Larson for Congress**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 479  
City Glastonbury State CT Zip Code 06033-0479

FEC ID number of contributing federal political committee. **C C00330142**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2015

**Transaction ID : C10369689**

Amount of Each Receipt this Period  
 2000.00

**C. MIDDLE CLASS AMERICA PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 521  
City WESTERN SPRINGS State IL Zip Code 60558

FEC ID number of contributing federal political committee. **C C00486860**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10371658**

Amount of Each Receipt this Period  
 1000.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 132
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

**A.** Full Name (Last, First, Middle Initial)  
**Nancy Pelosi for Congress**

Mailing Address 700 13th St NW  
Ste 600

City Washington State DC Zip Code 20005-3960

FEC ID number of contributing federal political committee. **C C00213512**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2015

**Transaction ID : C10369683**

Amount of Each Receipt this Period  
 2000.00

**B.** Full Name (Last, First, Middle Initial)  
NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)

Mailing Address 606 NORTH WASHINGTON STREET

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C C00091561**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10371576**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

Mailing Address 1212 NEW YORK AVE NW  
SUITE 1100

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00283135**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2015

**Transaction ID : C10369687**

Amount of Each Receipt this Period  
 2000.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 132
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE**

Mailing Address 430 NORTH MICHIGAN AVENUE

City CHICAGO State IL Zip Code 60611

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : C10371579**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**NEW DEMOCRAT COALITION PAC**

Mailing Address 700 13TH STREET, NW  
SUITE 600

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00409730

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2015

**Transaction ID : C10369696**

Amount of Each Receipt this Period  
 5000.00

**C.** Full Name (Last, First, Middle Initial)  
**OFF THE SIDELINES PAC**

Mailing Address P.O. BOX 78182

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00525600

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2015

**Transaction ID : C10358702**

Amount of Each Receipt this Period  
 5000.00

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

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

11000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 132
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

**A.** Full Name (Last, First, Middle Initial)  
**OFF THE SIDELINES PAC**

Mailing Address P.O. BOX 78182

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00525600

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2015

**Transaction ID : C10358703**

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
**PAC TO THE FUTURE**

Mailing Address 700 13TH STREET, NW, SUITE 600

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00344234

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2015

**Transaction ID : C10369682**

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
**PROFESSIONAL AVIATION SAFETY SPECIALISTS PAC**

Mailing Address 1150 17TH STREET NW  
SUITE 702

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00286807

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 23 / 2015

**Transaction ID : C10368675**

Amount of Each Receipt this Period  
2000.00

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

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

12000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 132
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial)  
STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY FEDERAL POLITICAL ACTION COMMITTEE

**A.** Mailing Address **ONE STATE FARM PLAZA**  
**C/O MARK SCHWAMBERGER, TREASURER.**  
City State Zip Code  
**BLOOMINGTON IL 61710**

FEC ID number of contributing federal political committee. **C C00544817**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention  
 Election Cycle-to-Date  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 18 / 2015  
**Transaction ID : C10349066**

Amount of Each Receipt this Period  
 1000.00

Full Name (Last, First, Middle Initial)  
**SYNERGY PAC**

**B.** Mailing Address **6849 OLD DOMINION DRIVE**  
**SUITE 222**  
City State Zip Code  
**MCLEAN VA 22101**

FEC ID number of contributing federal political committee. **C C00409623**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention  
 Election Cycle-to-Date  
 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2015  
**Transaction ID : C10369686**

Amount of Each Receipt this Period  
 2500.00

Full Name (Last, First, Middle Initial)  
**THE BOEING COMPANY POLITICAL ACTION COMMITTEE**

**C.** Mailing Address **929 LONG BRIDGE DRIVE**  
City State Zip Code  
**ARLINGTON VA 22202**

FEC ID number of contributing federal political committee. **C C00142711**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention  
 Election Cycle-to-Date  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2015  
**Transaction ID : C10368706**

Amount of Each Receipt this Period  
 1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 132
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

**A.** Full Name (Last, First, Middle Initial)  
THE COCA-COLA COMPANY NONPARTISAN COMMITTEE FOR GOOD GOVERNMENT

Mailing Address 1 COCA-COLA PLAZA NW

City ATLANTA State GA Zip Code 30313

FEC ID number of contributing federal political committee. **C** C00012468

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 23 / 2015

**Transaction ID : C10368679**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
TRANSPORT WORKERS UNION POLITICAL CONTRIBUTIONS COMMITTEE

Mailing Address 501 THIRD ST. NW 9TH FLOOR

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00008268

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 13 / 2015

**Transaction ID : C10335568**

Amount of Each Receipt this Period  
 2500.00

Designated for Primary 2012 Debt Retirement

**C.** Full Name (Last, First, Middle Initial)  
UNITED TECHNOLOGIES CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 1101 PENNSYLVANIA AVE, NW  
10TH FLOOR

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00035683

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2015

**Transaction ID : C10368705**

Amount of Each Receipt this Period  
 1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 132
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

**A.** Full Name (Last, First, Middle Initial)  
**UNITED TRANSPORTATION UNION POLITICAL ACTION COMMITTEE (UTU PAC)**

Mailing Address **24950 COUNTRY CLUB BLVD, STE 340**

City **NORTH OLMSTED** State **OH** Zip Code **44070**

FEC ID number of contributing federal political committee. **C C00001636**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_ Convention \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 23 / 2015**

**Transaction ID : C10368676**

Amount of Each Receipt this Period  
 \_\_\_\_\_  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**VERIZON COMMUNICATIONS INC./VERIZON WIRELESS GOOD GOVERNMENT CLUB (VERIZON/VERIZON WIRELES**

Mailing Address **1300 I ST NW, STE 400 WEST**

City **WASHINGTON** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00186288**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_ Convention \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : C10371569**

Amount of Each Receipt this Period  
 \_\_\_\_\_  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**VICTORY IN NOVEMBER ELECTION PAC (VINEPAC)**

Mailing Address **700 13TH STREET, NW SUITE 600**

City **WASHINGTON** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00378695**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_ Convention \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : C10371567**

Amount of Each Receipt this Period  
 \_\_\_\_\_  
**1000.00**

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

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

\_\_\_\_\_

**3000.00**

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 132
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial)  
WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE

Mailing Address 805 FIFTEENTH ST NW SUITE 430

City State Zip Code  
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) Convention  
 Election Cycle-to-Date  
 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 06 / 2015

Transaction ID : C10355548

Amount of Each Receipt this Period  
 2500.00

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

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

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

2500.00

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

73500.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 132
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>Paper Trails</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 10 / 2015
Mailing Address 12 Federal St		<b>Transaction ID : C10355545</b>
City Brunswick	State ME	
Zip Code 04011-1509		Amount of Each Receipt this Period 615.38
FEC ID number of contributing federal political committee. C	Payroll Tax Refund	
Name of Employer	Occupation	
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 615.38	

Full Name (Last, First, Middle Initial)		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State	
Zip Code		
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial)		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State	
Zip Code		
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	615.38
<b>TOTAL</b> This Period (last page this line number only).....	615.38

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 132			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2015
Mailing Address 366 Summer Street		Amount of Each Disbursement this Period 23.33 <b>Transaction ID : D560990</b>
City Somerville State MA Zip Code 02144-3132	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:		

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2015
Mailing Address 366 Summer Street		Amount of Each Disbursement this Period 13.37 <b>Transaction ID : D560991</b>
City Somerville State MA Zip Code 02144-3132	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:		

Full Name (Last, First, Middle Initial) <b>C. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2015
Mailing Address 366 Summer Street		Amount of Each Disbursement this Period 3.91 <b>Transaction ID : D560992</b>
City Somerville State MA Zip Code 02144-3132	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	40.61
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 132			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2015
Mailing Address 366 Summer Street		Amount of Each Disbursement this Period 7.77
City Somerville State MA Zip Code 02144-3132	Purpose of Disbursement Credit Card Processing Fees	
Candidate Name	Category/Type	Transaction ID : D560993
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2015
Mailing Address 366 Summer Street		Amount of Each Disbursement this Period 120.09
City Somerville State MA Zip Code 02144-3132	Purpose of Disbursement Credit Card Processing Fees	
Candidate Name	Category/Type	Transaction ID : D560994
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 08 / 2015
Mailing Address 366 Summer Street		Amount of Each Disbursement this Period 2.66
City Somerville State MA Zip Code 02144-3132	Purpose of Disbursement Credit Card Processing Fees	
Candidate Name	Category/Type	Transaction ID : D561129
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	130.52
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 132		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2015
Mailing Address 366 Summer Street		Amount of Each Disbursement this Period 13.77
City Somerville State MA Zip Code 02144-3132	Purpose of Disbursement Credit Card Processing Fees	
Candidate Name	Category/Type	<b>Transaction ID : D561500</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2015
Mailing Address 366 Summer Street		Amount of Each Disbursement this Period 50.67
City Somerville State MA Zip Code 02144-3132	Purpose of Disbursement Credit Card Processing Fees	
Candidate Name	Category/Type	<b>Transaction ID : D561868</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2015
Mailing Address 366 Summer Street		Amount of Each Disbursement this Period 387.34
City Somerville State MA Zip Code 02144-3132	Purpose of Disbursement Credit Card Processing Fees	
Candidate Name	Category/Type	<b>Transaction ID : D561869</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	451.78
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 132			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2015
Mailing Address 366 Summer Street			Amount of Each Disbursement this Period 40.69 <b>Transaction ID : D562118</b>
City Somerville	State MA	Zip Code 02144-3132	
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:	

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2015
Mailing Address 366 Summer Street			Amount of Each Disbursement this Period 11.61 <b>Transaction ID : D562297</b>
City Somerville	State MA	Zip Code 02144-3132	
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:	

Full Name (Last, First, Middle Initial) <b>C. ActBlue Technical Services</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2015
Mailing Address 366 Summer Street			Amount of Each Disbursement this Period 644.46 <b>Transaction ID : D562944</b>
City Somerville	State MA	Zip Code 02144-3132	
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	696.76
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 132			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2015
Mailing Address 366 Summer Street		Amount of Each Disbursement this Period 4.18 <b>Transaction ID : D562598</b>
City Somerville State MA Zip Code 02144-3132	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:		

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2015
Mailing Address 366 Summer Street		Amount of Each Disbursement this Period 359.23 <b>Transaction ID : D562877</b>
City Somerville State MA Zip Code 02144-3132	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:		

Full Name (Last, First, Middle Initial) <b>C. Amtrak</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2015
Mailing Address 50 Massachusetts Ave NE		Amount of Each Disbursement this Period 89.00 <b>Transaction ID : D562037</b>
City Washington State DC Zip Code 20002-4214	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	452.41
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 132		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. Amtrak</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2015
Mailing Address 50 Massachusetts Ave NE		Amount of Each Disbursement this Period 136.00
City Washington State DC Zip Code 20002-4214	Purpose of Disbursement Travel Expenses	
Candidate Name	Category/Type	<b>Transaction ID : D561014</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Amtrak</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2015
Mailing Address 50 Massachusetts Ave NE		Amount of Each Disbursement this Period 86.00
City Washington State DC Zip Code 20002-4214	Purpose of Disbursement Travel Expenses	
Candidate Name	Category/Type	<b>Transaction ID : D562028</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Amtrak</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2015
Mailing Address 50 Massachusetts Ave NE		Amount of Each Disbursement this Period 123.00
City Washington State DC Zip Code 20002-4214	Purpose of Disbursement Travel Expenses	
Candidate Name	Category/Type	<b>Transaction ID : D562010</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	345.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 132		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. Blacks Road Self Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2015
Mailing Address 243 Blacks Road		Amount of Each Disbursement this Period 132.93 <b>Transaction ID : D559645</b>
City Cheshire	State CT	
Zip Code 06410	Purpose of Disbursement Storage Unit	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Blacks Road Self Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2015
Mailing Address 243 Blacks Road		Amount of Each Disbursement this Period 132.93 <b>Transaction ID : D562023</b>
City Cheshire	State CT	
Zip Code 06410	Purpose of Disbursement Storage Unit	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Blacks Road Self Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2015
Mailing Address 243 Blacks Road		Amount of Each Disbursement this Period 132.93 <b>Transaction ID : D562482</b>
City Cheshire	State CT	
Zip Code 06410	Purpose of Disbursement Storage Unit	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	398.79
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 132		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. Michael Bland</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 35 West Main Street		Amount of Each Disbursement this Period 849.91 <b>Transaction ID : D563853</b>
City Meriden State CT Zip Code 06451	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:		

Full Name (Last, First, Middle Initial) <b>B. Michael Bland</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2015
Mailing Address 35 West Main Street		Amount of Each Disbursement this Period 849.89 <b>Transaction ID : D563854</b>
City Meriden State CT Zip Code 06451	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:		

Full Name (Last, First, Middle Initial) <b>c. Blue State Digital</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2015
Mailing Address 406 7th Street NW		Amount of Each Disbursement this Period 325.00 <b>Transaction ID : D563845</b>
City Washington State DC Zip Code 20004	Purpose of Disbursement Internet Technology	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2024.80
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 132		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. Blue State Digital</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2015
Mailing Address 406 7th Street NW		Amount of Each Disbursement this Period 325.00 <b>Transaction ID : D563849</b>
City Washington State DC Zip Code 20004	Purpose of Disbursement Internet Technology	
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:		

Full Name (Last, First, Middle Initial) <b>B. Co Co Sala</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2015
Mailing Address 929 F Street NW		Amount of Each Disbursement this Period 323.40 <b>Transaction ID : D563837</b>
City Washington State DC Zip Code 20004	Purpose of Disbursement Food and Beverage	
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:		

Full Name (Last, First, Middle Initial) <b>C. Connecticut Democratic State Central Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2015
Mailing Address 330 Main St Fl 3		Amount of Each Disbursement this Period 1760.00 <b>Transaction ID : D562480</b>
City Hartford State CT Zip Code 06106-1851	Purpose of Disbursement Voter Records	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2408.40
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 132			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>A. District Provisions</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>26</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	02		26		2015
M M	/	D D	/	Y Y Y Y									
02		26		2015									
Mailing Address 550 A Penn Street NE		Amount of Each Disbursement this Period											
City Washington State DC Zip Code 20002		<table border="1"> <tr> <td colspan="4">611.61</td> </tr> </table>		611.61									
611.61													
Purpose of Disbursement Catering		Transaction ID : D562035											
Candidate Name		Category/Type											
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:											
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>B. First Data Corporation</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>03</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	02		03		2015
M M	/	D D	/	Y Y Y Y									
02		03		2015									
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period											
City Atlanta State GA Zip Code 30342-4799		<table border="1"> <tr> <td colspan="4">21.87</td> </tr> </table>		21.87									
21.87													
Purpose of Disbursement Credit Card Processing Fees		Transaction ID : D562017											
Candidate Name		Category/Type											
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:											
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>c. First Data Corporation</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>03</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	02		03		2015
M M	/	D D	/	Y Y Y Y									
02		03		2015									
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period											
City Atlanta State GA Zip Code 30342-4799		<table border="1"> <tr> <td colspan="4">23.15</td> </tr> </table>		23.15									
23.15													
Purpose of Disbursement Credit Card Processing Fees		Transaction ID : D562018											
Candidate Name		Category/Type											
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:											
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<table border="1"> <tr> <td colspan="4">656.63</td> </tr> </table>	656.63			
656.63					
<b>TOTAL</b> This Period (last page this line number only).....	<table border="1"> <tr> <td colspan="4"></td> </tr> </table>				

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 100 OF 132	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

**A. First Data Corporation**

Full Name (Last, First, Middle Initial)  
Mailing Address 5565 Glenridge Connector NE Ste 2000  
City Atlanta State GA Zip Code 30342-4799  
Purpose of Disbursement Credit Card Processing Fees  
Candidate Name  
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)  
State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
02 / 03 / 2015

Amount of Each Disbursement this Period  
44.95  
Transaction ID : D562020

**B. First Data Corporation**

Full Name (Last, First, Middle Initial)  
Mailing Address 5565 Glenridge Connector NE Ste 2000  
City Atlanta State GA Zip Code 30342-4799  
Purpose of Disbursement Credit Card Processing Fees  
Candidate Name  
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)  
State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
02 / 03 / 2015

Amount of Each Disbursement this Period  
152.66  
Transaction ID : D562021

**c. First Data Corporation**

Full Name (Last, First, Middle Initial)  
Mailing Address 5565 Glenridge Connector NE Ste 2000  
City Atlanta State GA Zip Code 30342-4799  
Purpose of Disbursement Credit Card Processing Fees  
Candidate Name  
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)  
State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
01 / 05 / 2015

Amount of Each Disbursement this Period  
19.76  
Transaction ID : D559646

**SUBTOTAL** of Disbursements This Page (optional) ..... 217.37

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 132			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. First Data Corporation</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2015
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period 22.44
City Atlanta State GA Zip Code 30342-4799	Purpose of Disbursement Credit Card Processing Fees	
Candidate Name	Category/Type	Transaction ID : D559647
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. First Data Corporation</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2015
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period 44.95
City Atlanta State GA Zip Code 30342-4799	Purpose of Disbursement Credit Card Processing Fees	
Candidate Name	Category/Type	Transaction ID : D559648
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. First Data Corporation</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2015
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period 47.39
City Atlanta State GA Zip Code 30342-4799	Purpose of Disbursement Credit Card Processing Fees	
Candidate Name	Category/Type	Transaction ID : D559649
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	114.78
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 132			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. First Data Corporation</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2015
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period 28.98
City Atlanta State GA Zip Code 30342-4799	Purpose of Disbursement Credit Card Processing Fees	
Candidate Name	Category/Type	<b>Transaction ID : D562483</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. First Data Corporation</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2015
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period 44.95
City Atlanta State GA Zip Code 30342-4799	Purpose of Disbursement Credit Card Processing Fees	
Candidate Name	Category/Type	<b>Transaction ID : D562484</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. First Data Corporation</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2015
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period 314.44
City Atlanta State GA Zip Code 30342-4799	Purpose of Disbursement Credit Card Processing Fees	
Candidate Name	Category/Type	<b>Transaction ID : D562485</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	388.37
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 132			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. First Data Corporation</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2015
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period 329.64 <b>Transaction ID : D562486</b>
City Atlanta	State GA Zip Code 30342-4799	
Purpose of Disbursement Credit Card Processing Fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Funky Monkey Cafe</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2015
Mailing Address 130 Elm Street		Amount of Each Disbursement this Period 210.00 <b>Transaction ID : D562053</b>
City Cheshire	State CT Zip Code 06410	
Purpose of Disbursement Catering	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Great Taste New Britain</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2015
Mailing Address 597 West Main Street		Amount of Each Disbursement this Period 376.00 <b>Transaction ID : D561010</b>
City New Britain	State CT Zip Code 06053	
Purpose of Disbursement Catering	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	915.64
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 104 OF 132	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. Russell Griffin</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2015
Mailing Address 249 Maple Ave Apt 5		Amount of Each Disbursement this Period 2681.61 <b>Transaction ID : D560998</b>
City Cheshire State CT Zip Code 06410-2500	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Russell Griffin</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2015
Mailing Address 249 Maple Ave Apt 5		Amount of Each Disbursement this Period 10000.00 <b>Transaction ID : D561005</b>
City Cheshire State CT Zip Code 06410-2500	Purpose of Disbursement Campaign Management Fee Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Kalik &amp; Associates Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2015
Mailing Address P.O. Box 341263		Amount of Each Disbursement this Period 4080.04 <b>Transaction ID : D561008</b>
City Bethesda State MD Zip Code 20827	Purpose of Disbursement Fundraising Consulting Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	16761.65
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 132			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. Kalik &amp; Associates Inc</b>		Date of Disbursement MM / DD / YYYY 02 / 14 / 2015
Mailing Address P.O. Box 341263		Amount of Each Disbursement this Period 4083.88 <b>Transaction ID : D562048</b>
City Bethesda	State MD	
Zip Code 20827	Purpose of Disbursement Fundraising Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Kalik &amp; Associates Inc</b>		Date of Disbursement MM / DD / YYYY 03 / 05 / 2015
Mailing Address P.O. Box 341263		Amount of Each Disbursement this Period 4080.11 <b>Transaction ID : D562479</b>
City Bethesda	State MD	
Zip Code 20827	Purpose of Disbursement Fundraising Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Liberty Concepts</b>		Date of Disbursement MM / DD / YYYY 03 / 05 / 2015
Mailing Address 119 Braintree St Ste 100		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : D563856</b>
City Allston	State MA	
Zip Code 02134-1628	Purpose of Disbursement Website Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8663.99
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 106 OF 132	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. Liberty Concepts</b>		Date of Disbursement MM / DD / YYYY 02 / 15 / 2015
Mailing Address 119 Braintree St Ste 100		Amount of Each Disbursement this Period 910.00 <b>Transaction ID : D562478</b>
City Allston State MA Zip Code 02134-1628	Purpose of Disbursement Website 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:		

Full Name (Last, First, Middle Initial) <b>B. Anna K Moffett</b>		Date of Disbursement MM / DD / YYYY 02 / 14 / 2015
Mailing Address 70 I Street, SE, Apt. 336		Amount of Each Disbursement this Period 235.52 <b>Transaction ID : D562051</b>
City Washington State DC Zip Code 20003	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:		

Full Name (Last, First, Middle Initial) <b>C. Anna K Moffett</b>		Date of Disbursement MM / DD / YYYY 03 / 06 / 2015
Mailing Address 70 I Street, SE, Apt. 336		Amount of Each Disbursement this Period 174.50 <b>Transaction ID : D562052</b>
City Washington State DC Zip Code 20003	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	910.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 132			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. Anna K Moffett</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2015
Mailing Address 70 I Street, SE, Apt. 336		Amount of Each Disbursement this Period 1941.41 <b>Transaction ID : D562040</b>
City Washington State DC Zip Code 20003	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:		

Full Name (Last, First, Middle Initial) <b>B. Anna K Moffett</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2015
Mailing Address 70 I Street, SE, Apt. 336		Amount of Each Disbursement this Period 1941.42 <b>Transaction ID : D562044</b>
City Washington State DC Zip Code 20003	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:		

Full Name (Last, First, Middle Initial) <b>c. Anna K Moffett</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2015
Mailing Address 70 I Street, SE, Apt. 336		Amount of Each Disbursement this Period 229.20 <b>Transaction ID : D559655</b>
City Washington State DC Zip Code 20003	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4112.03
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 108 OF 132	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. Anna K Moffett</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2015
Mailing Address 70 I Street, SE, Apt. 336		Amount of Each Disbursement this Period 1760.89 <b>Transaction ID : D560995</b>
City Washington State DC Zip Code 20003	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:	

Full Name (Last, First, Middle Initial) <b>B. Anna K Moffett</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2015
Mailing Address 70 I Street, SE, Apt. 336		Amount of Each Disbursement this Period 1976.60 <b>Transaction ID : D560996</b>
City Washington State DC Zip Code 20003	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:	

Full Name (Last, First, Middle Initial) <b>c. Anna K Moffett</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2015
Mailing Address 70 I Street, SE, Apt. 336		Amount of Each Disbursement this Period 1976.60 <b>Transaction ID : D560997</b>
City Washington State DC Zip Code 20003	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5714.09
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 109 OF 132	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. Anna K Moffett</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 31 / 2015</b>
Mailing Address <b>70 I Street, SE, Apt. 336</b>		Amount of Each Disbursement this Period <b>1941.41</b> <b>Transaction ID : D563855</b>
City <b>Washington</b>	State <b>DC</b>	
Zip Code <b>20003</b>	Purpose of Disbursement <b>Salary</b>	Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Anna K Moffett</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 13 / 2015</b>
Mailing Address <b>70 I Street, SE, Apt. 336</b>		Amount of Each Disbursement this Period <b>1941.40</b> <b>Transaction ID : D563852</b>
City <b>Washington</b>	State <b>DC</b>	
Zip Code <b>20003</b>	Purpose of Disbursement <b>Salary</b>	Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Moore Campaigns LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 24 / 2015</b>
Mailing Address <b>152 Thomas Street NW</b>		Amount of Each Disbursement this Period <b>1075.00</b> <b>Transaction ID : D563846</b>
City <b>Washington</b>	State <b>DC</b>	
Zip Code <b>20001</b>	Purpose of Disbursement <b>Printing</b>	Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>4957.81</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 132			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. New Blue Interactive LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2015
Mailing Address 4201 Connecticut Avenue NW Suite 400		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : D563847</b>
City Washington State DC Zip Code 20008	Purpose of Disbursement Media Consulting	
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:		

Full Name (Last, First, Middle Initial) <b>B. New Blue Interactive LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2015
Mailing Address 4201 Connecticut Avenue NW Suite 400		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : D562050</b>
City Washington State DC Zip Code 20008	Purpose of Disbursement Media Consulting	
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:		

Full Name (Last, First, Middle Initial) <b>C. NGP VAN Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2015
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 700.00 <b>Transaction ID : D559644</b>
City Washington State DC Zip Code 20005-5006	Purpose of Disbursement Database Software	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5700.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 132			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. NGP VAN Inc</b>		Date of Disbursement MM / DD / YYYY 02 / 02 / 2015
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 700.00 <b>Transaction ID : D562014</b>
City Washington State DC Zip Code 20005-5006	Purpose of Disbursement Database Software	
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:		

Full Name (Last, First, Middle Initial) <b>B. NGP VAN Inc</b>		Date of Disbursement MM / DD / YYYY 03 / 02 / 2015
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 700.00 <b>Transaction ID : D562481</b>
City Washington State DC Zip Code 20005-5006	Purpose of Disbursement Database Software	
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:		

Full Name (Last, First, Middle Initial) <b>c. Paper Trails</b>		Date of Disbursement MM / DD / YYYY 01 / 02 / 2015
Mailing Address 12 Federal St		Amount of Each Disbursement this Period 2886.25 <b>Transaction ID : D560999</b>
City Brunswick State ME Zip Code 04011-1509	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4286.25
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 112 OF 132	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial)		Date of Disbursement									
A. Paper Trails		<table border="1"> <tr> <td>M M / D D / Y Y Y Y</td> <td></td> </tr> <tr> <td>01 / 02 / 2015</td> <td></td> </tr> </table>		M M / D D / Y Y Y Y		01 / 02 / 2015					
M M / D D / Y Y Y Y											
01 / 02 / 2015											
Mailing Address 12 Federal St		Amount of Each Disbursement this Period									
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Brunswick</td> <td>ME</td> <td>04011-1509</td> </tr> </table>		City	State	Zip Code	Brunswick	ME	04011-1509	<table border="1"> <tr> <td>Amount of Each Disbursement this Period</td> </tr> <tr> <td>25.50</td> </tr> </table>		Amount of Each Disbursement this Period	25.50
City	State	Zip Code									
Brunswick	ME	04011-1509									
Amount of Each Disbursement this Period											
25.50											
Purpose of Disbursement Payroll Processing		Transaction ID : D561000									
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:											

Full Name (Last, First, Middle Initial)		Date of Disbursement									
B. Paper Trails		<table border="1"> <tr> <td>M M / D D / Y Y Y Y</td> <td></td> </tr> <tr> <td>01 / 15 / 2015</td> <td></td> </tr> </table>		M M / D D / Y Y Y Y		01 / 15 / 2015					
M M / D D / Y Y Y Y											
01 / 15 / 2015											
Mailing Address 12 Federal St		Amount of Each Disbursement this Period									
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Brunswick</td> <td>ME</td> <td>04011-1509</td> </tr> </table>		City	State	Zip Code	Brunswick	ME	04011-1509	<table border="1"> <tr> <td>Amount of Each Disbursement this Period</td> </tr> <tr> <td>1241.49</td> </tr> </table>		Amount of Each Disbursement this Period	1241.49
City	State	Zip Code									
Brunswick	ME	04011-1509									
Amount of Each Disbursement this Period											
1241.49											
Purpose of Disbursement Payroll Taxes		Transaction ID : D561001									
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:											

Full Name (Last, First, Middle Initial)		Date of Disbursement									
C. Paper Trails		<table border="1"> <tr> <td>M M / D D / Y Y Y Y</td> <td></td> </tr> <tr> <td>01 / 15 / 2015</td> <td></td> </tr> </table>		M M / D D / Y Y Y Y		01 / 15 / 2015					
M M / D D / Y Y Y Y											
01 / 15 / 2015											
Mailing Address 12 Federal St		Amount of Each Disbursement this Period									
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Brunswick</td> <td>ME</td> <td>04011-1509</td> </tr> </table>		City	State	Zip Code	Brunswick	ME	04011-1509	<table border="1"> <tr> <td>Amount of Each Disbursement this Period</td> </tr> <tr> <td>101.75</td> </tr> </table>		Amount of Each Disbursement this Period	101.75
City	State	Zip Code									
Brunswick	ME	04011-1509									
Amount of Each Disbursement this Period											
101.75											
Purpose of Disbursement Payroll Processing		Transaction ID : D561002									
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:											

SUBTOTAL of Disbursements This Page (optional).....		1368.74	
TOTAL This Period (last page this line number only).....			



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 132			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>A. Paper Trails</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>02</td> <td></td> <td>2015</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	02		02		2015
M M	/	D D	/	Y Y Y Y								
02		02		2015								
Mailing Address 12 Federal St		Amount of Each Disbursement this Period										
City	State											
Brunswick	ME	04011-1509										
Purpose of Disbursement Payroll Taxes		<table border="1"> <tr> <td>1234.23</td> </tr> </table>	1234.23									
1234.23												
Candidate Name		<b>Transaction ID : D561003</b>										
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President												
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General												
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>B. Paper Trails</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>02</td> <td></td> <td>2015</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	02		02		2015
M M	/	D D	/	Y Y Y Y								
02		02		2015								
Mailing Address 12 Federal St		Amount of Each Disbursement this Period										
City	State											
Brunswick	ME	04011-1509										
Purpose of Disbursement Payroll Processing		<table border="1"> <tr> <td>21.75</td> </tr> </table>	21.75									
21.75												
Candidate Name		<b>Transaction ID : D561004</b>										
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President												
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General												
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>C. Paychex</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>27</td> <td></td> <td>2015</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	02		27		2015
M M	/	D D	/	Y Y Y Y								
02		27		2015								
Mailing Address 911 Panorama Trail S.		Amount of Each Disbursement this Period										
City	State											
Rochester	NY	14625										
Purpose of Disbursement Payroll Taxes		<table border="1"> <tr> <td>1131.10</td> </tr> </table>	1131.10									
1131.10												
Candidate Name		<b>Transaction ID : D562045</b>										
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President												
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General												
State: District:												

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<table border="1"> <tr> <td>2387.08</td> </tr> </table>	2387.08
2387.08		
<b>TOTAL</b> This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 132			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2015		
Mailing Address 911 Panorama Trail S.			Amount of Each Disbursement this Period 38.03		
City Rochester	State NY	Zip Code 14625	Transaction ID : D562046		
Purpose of Disbursement Payroll Processing		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2015		
Mailing Address 911 Panorama Trail S.			Amount of Each Disbursement this Period 1220.07		
City Rochester	State NY	Zip Code 14625	Transaction ID : D562042		
Purpose of Disbursement Payroll Taxes		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>c. Paychex</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2015		
Mailing Address 911 Panorama Trail S.			Amount of Each Disbursement this Period 83.33		
City Rochester	State NY	Zip Code 14625	Transaction ID : D562043		
Purpose of Disbursement Payroll Processing		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1341.33
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 132		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2015
Mailing Address 911 Panorama Trail S.		Amount of Each Disbursement this Period 38.03 <b>Transaction ID : D563842</b>
City Rochester State NY Zip Code 14625	Purpose of Disbursement Payroll Processing	
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:		

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2015
Mailing Address 911 Panorama Trail S.		Amount of Each Disbursement this Period 1457.78 <b>Transaction ID : D563843</b>
City Rochester State NY Zip Code 14625	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:		

Full Name (Last, First, Middle Initial) <b>C. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 911 Panorama Trail S.		Amount of Each Disbursement this Period 1457.77 <b>Transaction ID : D563844</b>
City Rochester State NY Zip Code 14625	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2953.58
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 132			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

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

Mailing Address 911 Panorama Trail S.

City Rochester State NY Zip Code 14625

Purpose of Disbursement Payroll Processing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 03 / 16 / 2015

Amount of Each Disbursement this Period: 38.03

Transaction ID : D562499

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

Mailing Address 1025 Vermont Ave NW Ste 300

City Washington State DC Zip Code 20005-6302

Purpose of Disbursement Legal Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 03 / 30 / 2015

Amount of Each Disbursement this Period: 3000.00

Transaction ID : D563850

Full Name (Last, First, Middle Initial)  
**c. Sheraton Society Hill**

Mailing Address 1 Dock Street

City Philadelphia State PA Zip Code 19106

Purpose of Disbursement Travel Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 23 / 2015

Amount of Each Disbursement this Period: 1150.00

Transaction ID : D561013

**SUBTOTAL** of Disbursements This Page (optional) ..... 4188.03

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 132			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2015
Mailing Address 500 Staples Dr		Amount of Each Disbursement this Period 9.91
City Framingham	State MA	
Zip Code 01702-4478	Purpose of Disbursement Office Supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2015
Mailing Address 500 Staples Dr		Amount of Each Disbursement this Period 42.65
City Framingham	State MA	
Zip Code 01702-4478	Purpose of Disbursement Office Supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2015
Mailing Address 500 Staples Dr		Amount of Each Disbursement this Period 25.16
City Framingham	State MA	
Zip Code 01702-4478	Purpose of Disbursement Office Supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	77.72
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 118 OF 132	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 16 / 2015</b>
Mailing Address 500 Staples Dr		Amount of Each Disbursement this Period <b>11.12</b>
City Framingham	State MA	
Zip Code 01702-4478	Purpose of Disbursement Office Supplies	<b>Transaction ID : D561011</b>
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:		

Full Name (Last, First, Middle Initial) <b>B. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 26 / 2015</b>
Mailing Address 500 Staples Dr		Amount of Each Disbursement this Period <b>34.55</b>
City Framingham	State MA	
Zip Code 01702-4478	Purpose of Disbursement Office Supplies	<b>Transaction ID : D563839</b>
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:		

Full Name (Last, First, Middle Initial) <b>c. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 26 / 2015</b>
Mailing Address 500 Staples Dr		Amount of Each Disbursement this Period <b>8.77</b>
City Framingham	State MA	
Zip Code 01702-4478	Purpose of Disbursement Office Supplies	<b>Transaction ID : D563840</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>54.44</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 132			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. State of Connecticut Dept of Labor</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2015
Mailing Address PO Box 2940		Amount of Each Disbursement this Period 492.21 <b>Transaction ID : D561006</b>
City Hartford	State CT	
Zip Code 06104-2940	Purpose of Disbursement Payroll Taxes	Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>B. State of Connecticut Dept of Labor</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2015
Mailing Address PO Box 2940		Amount of Each Disbursement this Period 51.68 <b>Transaction ID : D561007</b>
City Hartford	State CT	
Zip Code 06104-2940	Purpose of Disbursement Payroll Taxes	Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Thorncrest Farm</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2015
Mailing Address 280 Town Hill Road		Amount of Each Disbursement this Period 248.70 <b>Transaction ID : D562032</b>
City Goshen	State CT	
Zip Code 06756	Purpose of Disbursement Food and Beverage	Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	792.59
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 132			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. Trumbull Kitchen</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2015
Mailing Address 150 Trumbull Street		Amount of Each Disbursement this Period 1219.57
City Hartford	State CT	
Zip Code 06103	Purpose of Disbursement Catering	<b>Transaction ID : D563841</b>
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:		

Full Name (Last, First, Middle Initial) <b>B. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 210 Maple Ave		Amount of Each Disbursement this Period 2252.58
City Cheshire	State CT	
Zip Code 06410-7764	Purpose of Disbursement Postage	<b>Transaction ID : D563848</b>
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:		

Full Name (Last, First, Middle Initial) <b>c. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2015
Mailing Address 210 Maple Ave		Amount of Each Disbursement this Period 100.00
City Cheshire	State CT	
Zip Code 06410-7764	Purpose of Disbursement Post Office Box Rental Fee	<b>Transaction ID : D562036</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3572.15
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 132		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2015
Mailing Address 210 Maple Ave		Amount of Each Disbursement this Period 49.00
City Cheshire State CT Zip Code 06410-7764	Purpose of Disbursement Postage	
Candidate Name	Category/Type	Transaction ID : D559662
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2015
Mailing Address 210 Maple Ave		Amount of Each Disbursement this Period 29.40
City Cheshire State CT Zip Code 06410-7764	Purpose of Disbursement Postage	
Candidate Name	Category/Type	Transaction ID : D561012
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. US Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2015
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period 151.20
City Pinedale State AZ Zip Code 85934	Purpose of Disbursement Travel Expenses	
Candidate Name	Category/Type	Transaction ID : D559663
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	229.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 122 OF 132	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. US Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2015
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period 98.10
City Pinedale	State AZ Zip Code 85934	
Purpose of Disbursement Travel Expenses	Candidate Name	Transaction ID : D562027
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. US Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2015
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period 98.10
City Pinedale	State AZ Zip Code 85934	
Purpose of Disbursement Travel Expenses	Candidate Name	Transaction ID : D562496
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. US Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2015
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period 151.20
City Pinedale	State AZ Zip Code 85934	
Purpose of Disbursement Credit Card Processing Fees	Candidate Name	Transaction ID : D562488
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	347.40
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 123 OF 132			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2015
Mailing Address PO Box 660108		Amount of Each Disbursement this Period 141.54 <b>Transaction ID : D562489</b>
City Dallas	State TX	
Zip Code 75266-0108	Purpose of Disbursement Telephone Service	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2015
Mailing Address PO Box 660108		Amount of Each Disbursement this Period 141.54 <b>Transaction ID : D562024</b>
City Dallas	State TX	
Zip Code 75266-0108	Purpose of Disbursement Telephone Service	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2015
Mailing Address PO Box 660108		Amount of Each Disbursement this Period 236.04 <b>Transaction ID : D559657</b>
City Dallas	State TX	
Zip Code 75266-0108	Purpose of Disbursement Telephone Service	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	519.12
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 132			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. Vocalocity Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2015
Mailing Address 1375 Peachtree St NE Ste 200		Amount of Each Disbursement this Period 129.02
City Atlanta	State GA Zip Code 30309-3173	
Purpose of Disbursement Telephone Service	Category/Type	<b>Transaction ID : D559664</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Vocalocity Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2015
Mailing Address 1375 Peachtree St NE Ste 200		Amount of Each Disbursement this Period 129.02
City Atlanta	State GA Zip Code 30309-3173	
Purpose of Disbursement Telephone Service	Category/Type	<b>Transaction ID : D562026</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Whitney W Burns</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2015
Mailing Address PO Box 1174		Amount of Each Disbursement this Period 10000.00
City Springfield	State VA Zip Code 22151-0174	
Purpose of Disbursement Financial Compliance	Category/Type	<b>Transaction ID : D562049</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10258.04
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 132		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

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

Mailing Address 2201 I Street NW

City Washington State DC Zip Code 20037

Purpose of Disbursement Food and Beverage

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 07 / 2015

Amount of Each Disbursement this Period: 459.53

Transaction ID : D559658

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional) ..... 459.53

**TOTAL** This Period (last page this line number only) ..... 88897.15

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 OF 132			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. Robert M Portman</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 31 / 2015</b>
Mailing Address <b>6803 West Ave</b>		Amount of Each Disbursement this Period <b>500.00</b>
City <b>Chevy Chase</b>	State <b>MD</b> Zip Code <b>20815-5203</b>	
Purpose of Disbursement <b>Contribution Refund</b>	Candidate Name	<b>Transaction ID : D562941</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: _____ District: _____	Category/Type	

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>500.00</b>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 127 OF 132	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Elizabeth Esty**

Full Name (Last, First, Middle Initial) <b>A. AMI BERA FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 31 / 2015</b>
Mailing Address <b>PO BOX 582496</b>		Amount of Each Disbursement this Period <b>1000.00</b> <b>Transaction ID : D563851</b>
City <b>ELK GROVE</b> State <b>CA</b> Zip Code <b>95758</b>	Purpose of Disbursement Contribution	
Candidate Name <b>AMERISH BERA</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>CA</b> District: <b>07</b>		

Full Name (Last, First, Middle Initial) <b>B. Democratic Congressional Campaign Committee</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 27 / 2015</b>
Mailing Address <b>430 S Capitol Street, SE Floor 2</b>		Amount of Each Disbursement this Period <b>5000.00</b> <b>Transaction ID : D562047</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20003-4024</b>	Purpose of Disbursement Unlimited Transfer	
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:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>6000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>6000.00</b>

**SCHEDULE C (FEC Form 3)**  
**LOANS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Friends of Elizabeth Esty

Transaction ID : L941

LOAN SOURCE Full Name (Last, First, Middle Initial)

Hon Elizabeth Esty

[PERSONAL FUNDS]

Election: 2012

Primary  
 General  
 Other (specify) **Convention**

Mailing Address  
213 Preston Ter

City State ZIP Code  
Cheshire CT 06410-3138

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
25000.00	5750.00	19250.00

**TERMS**

Date Incurred: M 12 / D 31 / Y 2011  
Date Due: M / D / Y On Demand  
Interest Rate: N/A % (apr)  
Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional).....	19250.00
<b>TOTALS</b> This Period (last page in this line only).....	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



**SCHEDULE C (FEC Form 3)**  
**LOANS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Friends of Elizabeth Esty

Transaction ID : L1000

LOAN SOURCE Full Name (Last, First, Middle Initial)

Hon Elizabeth Esty

[PERSONAL FUNDS]

Election: 2012

Primary  
 General  
 Other (specify) ▼

Mailing Address  
213 Preston Ter

City State ZIP Code  
Cheshire CT 06410-3138

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
500000.00 142500.00 107500.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 07 / D 23 / Y 2012 M M / D D / On Demand None % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... 107500.00

**TOTALS** This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SC/10

Transaction ID : L1000

The candidate has forgiven \$ 250,000 of her loan to the primary 2012 election

Form/Schedule:

Transaction ID:

**SCHEDULE C (FEC Form 3)**  
**LOANS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Friends of Elizabeth Esty

Transaction ID : L1010

LOAN SOURCE Full Name (Last, First, Middle Initial)

Hon Elizabeth Esty

[PERSONAL FUNDS]

Election: 2012

Primary  
 General  
 Other (specify) ▼

Mailing Address  
213 Preston Ter

City State ZIP Code  
Cheshire CT 06410-3138

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
25000.00	2500.00	22500.00

**TERMS**

Date Incurred: M 10 / D 26 / Y 2012  
Date Due: M / D / Y On Demand  
Interest Rate: 0.00 % (apr)  
Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	22500.00
<b>TOTALS</b> This Period (last page in this line only).....	149250.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER:  
(check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Friends of Elizabeth Esty**

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

Nature of Debt (Purpose):  
Printing

Mailing Address PO Box 2628

City State Zip Code  
New Britain CT 06050-2628

Outstanding Balance Beginning This Period

Transaction ID : D564035

0.00

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

4209.33

0.00

4209.33

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**National Democratic Club**

Nature of Debt (Purpose):  
Membership Fees

Mailing Address 30 Ivy St SE

City State Zip Code  
Washington DC 20003-4006

Outstanding Balance Beginning This Period

Transaction ID : D564034

0.00

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

554.88

0.00

554.88

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

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

4764.21

2) **TOTALS** This Period (last page this line number only) ..... ▶

4764.21

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

149250.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

154014.21