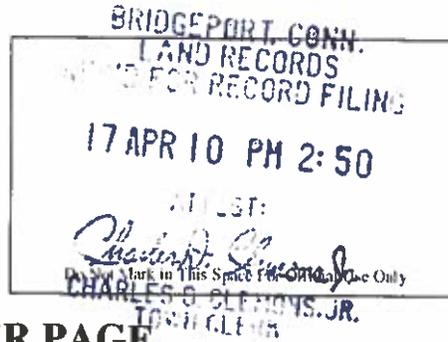
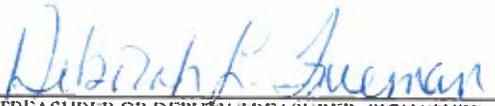


# SEEC FORM 20

Itemized Campaign Finance Disclosure Statement  
 CONNECTICUT STATE ELECTIONS ENFORCEMENT COMMISSION  
 Revised January 2015



## COVER PAGE

|   |  |   |   |
|---|--|---|---|
| <b>1. NAME OF COMMITTEE</b>   |  |   |   |
| Ganim for Bridgeport '19  |  |   |   |
| <b>2. TREASURER NAME</b>  |  |   |   |
| First<br>Deborah  | MI<br>L  | Last<br>Freeman                                       | Suffix  |
| <b>3. TREASURER ADDRESS</b>   |  |   |   |
| Street Address<br>18 Avery Circle   |  | City<br>New Milford                                   | State Zip Code<br>CT 06776  |
| <b>4. ELECTION/REFERENDUM DATE</b><br>(mm/dd/yyyy)<br>09/19/2017  | <b>5. OFFICE SOUGHT</b> <i>(Complete only if Candidate Committee)</i><br>Mayor                 |   | <b>6. DISTRICT NUMBER</b><br><i>(if applicable)</i><br>0                  |
| <b>7. CANDIDATE NAME</b> <i>(Complete only if Candidate or Exploratory Committee)</i>   |  |   |   |
| First<br>Joseph   | MI<br>P  | Last<br>Ganim   | Suffix  |
| <b>8. TYPE OF REPORT</b> (Check One Box)  |  |   |   |
| <input type="checkbox"/> January 10 filing  | <input type="checkbox"/> 7th day preceding primary   | <input type="checkbox"/> 7th day preceding referendum | <input type="checkbox"/> Initial Contribution or Disbursement (PACs ONLY) |
| <input checked="" type="checkbox"/> April 10 filing   | <input type="checkbox"/> 30 days following primary   | <input type="checkbox"/> 45 days following referendum | <input type="checkbox"/> Amendment to                                     |
| <input type="checkbox"/> July 10 filing   | <input type="checkbox"/> 7th day preceding election  | <input type="checkbox"/> Deficit                      | Type of Report:<br>_____  |
| <input type="checkbox"/> October 10 filing  | <input type="checkbox"/> 12th day preceding election<br><i>(State Central Committees Only)</i> | <input type="checkbox"/> Termination                  |   |
| <input type="checkbox"/> 24 Hour Independent Expenditure<br><input type="checkbox"/> Primary <input type="checkbox"/> Election  | <input type="checkbox"/> 45 days following election not held in November                       |   |   |
| <b>9. PERIOD COVERED</b>  |  |   |   |
| Beginning Date<br>01/01/2017  |  | thru  | Ending Date<br>03/31/2017   |
| <b>10. CERTIFICATION</b>  |  |   |   |
| I hereby certify and state, under penalties of false statement, that all of the information set forth on this Itemized Campaign Finance Disclosure Statement for the period covered is true, accurate and complete. |  |   |   |
| <br>TREASURER OR DEPUTY TREASURER (SIGNATURE)  |  | Deborah L. Freeman<br>PRINT NAME OF SIGNER            |   |
|   |  | 04/10/2017<br>DATE (mm/dd/yyyy)                       |   |
| A person who is found to have knowingly and willfully violated any provisions of the campaign finance statutes faces a civil penalty or imprisonment or both.   |  |   |   |

# SEEC FORM 20

## Itemized Campaign Finance Disclosure Statement

### CONNECTICUT STATE ELECTIONS ENFORCEMENT COMMISSION

Revised January 2015

Page 2 of 143

## SUMMARY PAGE TOTALS

| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)   | TYPE OF REPORT          |                       |
|--|-------------------------|-----------------------|
| Ganim for Bridgeport '19   | April 10 filing         |                       |
|  | COLUMN A<br>This Period | COLUMN B<br>Aggregate |
| 11. Balance on hand January 1 of current year for Ongoing and Party Committees OR Balance on hand from day Committee was formed for all other committees |                         | \$0.00                |
| 12. Balance on hand at the beginning of Reporting Period   | \$0.00                  |                       |
| 13. Contributions received from Individuals (Section A and B)  | \$182,255.00            | \$182,255.00          |
| 14. Receipts from Other Committees (Sections C1 and C2)  | \$9,050.00              | \$9,050.00            |
| 15. Other Monetary Receipts (Sections D through K)   | \$100.00                | \$100.00              |
| 16a. Total Proceeds from Small Purchases (Section L1 Subpart 1 + Subpart 3)  | \$0.00                  | \$0.00                |
| 16b. <i>Per Public Act 11-48, effective January 1, 2012 Section L2. removed</i>  |                         |                       |
| 16c. Total Purchases of Advertising - Program Book or Sign (Section L3)  |                         |                       |
| 17. Total Monetary Receipts (add totals for lines 13-16c)  | \$191,405.00            | \$191,405.00          |
| 18. Subtotals (add totals in Line 12 + 17 in Column A; and in Line 11 + 17 in Column B)  | \$191,405.00            | \$191,405.00          |
| 19. Expenditures Paid by Committee (Section P)   | \$4,502.85              | \$4,502.85            |
| 20. Balance on hand at close of Reporting Period (Subtract Line 19 from Line 18 in both Columns)   | \$186,902.15            | \$186,902.15          |
| 21. In Kind Donations not Considered Contributions Received (Section L4)   | \$0.00                  | \$0.00                |
| 22. In Kind Donations not Considered Contributions — House Party (Section L5)  | \$0.00                  | \$0.00                |
| 23. In kind Contributions Received (Section M)   | \$350.00                | \$350.00              |
| 24. Refundable Deposit to Telephone Company (Section N)  | \$0.00                  | \$0.00                |
| 25. Loan Balance   | \$0.00                  |                       |
| 25a. + Loans Received (Section D)  | \$0.00                  | \$0.00                |
| 25b. + Interest and Penalties on Loan  | \$0.00                  | \$0.00                |
| 25c. - Payments on Loan  | \$0.00                  | \$0.00                |
| 25d. Total Outstanding Loan Amount   | \$0.00                  |                       |
| 26. Campaign Expenses Paid by Candidate (Section Q)  | \$0.00                  | \$0.00                |
| 27. Expenses Incurred on Committee Credit Card (Section R)   | \$0.00                  | \$0.00                |
| 28. Expenses Incurred by Committee During this Period but Not Paid (Section S)   | \$0.00                  |                       |
| 28a. Total Outstanding Expenses Incurred by Committee still Unpaid (Section S)   | \$0.00                  |                       |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |  |  |
|---|--|--|--|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  | TYPE OF REPORT   |  |
| Ganim for Bridgeport '19  |  | April 10 filing  |  |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  | Subtotal Section A   |  |
|   |  | \$0.00   |  |
| <b>B. Itemized Contributions from Individuals</b>   |  |  |  |
| Last Name   |  | First  |  |
| Adams, Jr.  |  | Edward M.  |  |
| Residential Street Address  |  | City   |  |
| 2 Blake Dr  |  | Fairfield  |  |
| Principal Occupation  |  | State  |  |
| attorney  |  | CT   |  |
| Name of Employer  |  | Zip Code   |  |
| city of bridgeport  |  | 06824-5602   |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | Amount of Contribution   |  |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | \$1,000.00   |  |
| If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  |  |  |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |  |  |
| Is this contribution associated with an event reported in Section I.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?                              |  |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  |
| If yes, list Event #  |  | If yes, indicate which branch or branches of government the contract is with:                                  |  |
|   |  | <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No |  |
| Method of contribution:   |  | Date Received  |  |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order                               |  | 03/08/2017   |  |
|   |  | Aggregate contributions  |  |
|   |  | \$1,000.00   |  |
| Last Name   |  | First  |  |
| Ahmed   |  | Hamza  |  |
| Residential Street Address  |  | City   |  |
| 81 Lafayette Ave  |  | Brooklyn   |  |
| Principal Occupation  |  | State  |  |
| Real Estate   |  | NY   |  |
| Name of Employer  |  | Zip Code   |  |
| self employed   |  | 11217-1510   |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | Amount of Contribution   |  |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | \$200.00   |  |
| If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  |  |  |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |  |  |
| Is this contribution associated with an event reported in Section I.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?                              |  |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  |
| If yes, list Event #  |  | If yes, indicate which branch or branches of government the contract is with:                                  |  |
|   |  | <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No |  |
| Method of contribution:   |  | Date Received  |  |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order                               |  | 03/23/2017   |  |
|   |  | Aggregate contributions  |  |
|   |  | \$200.00   |  |
| Last Name   |  | First  |  |
| Akbulak   |  | Hakki  |  |
| Residential Street Address  |  | City   |  |
| 34 Limestone Ter  |  | Ridgefield   |  |
| Principal Occupation  |  | State  |  |
| Owner   |  | CT   |  |
| Name of Employer  |  | Zip Code   |  |
| AKDO Intertrade Inc   |  | 06877-2621   |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | Amount of Contribution   |  |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | \$1,000.00   |  |
| If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  |  |  |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |  |  |
| Is this contribution associated with an event reported in Section I.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?                              |  |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  |
| If yes, list Event #  |  | If yes, indicate which branch or branches of government the contract is with:                                  |  |
|   |  | <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No |  |
| Method of contribution:   |  | Date Received  |  |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order                               |  | 03/17/2017   |  |
|   |  | Aggregate contributions  |  |
|   |  | \$1,000.00   |  |

**SUBTOTAL Section B - This Page** \$2,200.00

**TOTAL of Section B Pages** \$182,255.00

**TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)**  
(Enter total on Line 13, Column A of Summary Page) \$182,255.00

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |                         |                               |            |
|---|--|---|-------------------------|-------------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |                         | TYPE OF REPORT                |            |
| Ganim for Bridgeport '19  |  |   |                         | April 10 filing               |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |                         | Subtotal Section A            |            |
|   |  |   |                         | \$0.00                        |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                         |                               |            |
| Last Name   |  | First   |                         | M.I.                          |            |
| Alarcon   |  | Christopher   |                         |                               |            |
| Residential Street Address  |  | City  |                         | State                         | Zip Code   |
| 30 Kenwood Ln   |  | Trumbull  |                         | CT                            | 06611-4609 |
| Principal Occupation  |  | Name of Employer  |                         |                               |            |
| Financial Coordinator   |  | City of Bridgeport  |                         |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                               |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                         |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |                         | \$500.00                      |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                               |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/12/2017  | \$500.00                |                               |            |
| Last Name   |  | First   |                         | M.I.                          |            |
| Alptekin  |  | Ismail  |                         |                               |            |
| Residential Street Address  |  | City  |                         | State                         | Zip Code   |
| 577 East Main St  |  | Bridgeport  |                         | CT                            | 06608-2329 |
| Principal Occupation  |  | Name of Employer  |                         |                               |            |
| self employed   |  | Alptekin  |                         |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                               |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                         |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |                         | \$100.00                      |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                               |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/23/2017  | \$100.00                |                               |            |
| Last Name   |  | First   |                         | M.I.                          |            |
| Alves   |  | Palmira   |                         |                               |            |
| Residential Street Address  |  | City  |                         | State                         | Zip Code   |
| 135 Baker St  |  | Bridgeport  |                         | CT                            | 06606-4035 |
| Principal Occupation  |  | Name of Employer  |                         |                               |            |
| Information Requested   |  | Information Requested   |                         |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                               |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                         |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |                         | \$200.00                      |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                               |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/19/2017  | \$200.00                |                               |            |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>                               | \$800.00     |
| <b>TOTAL of Section B Pages</b>                                     | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b> | \$182,255.00 |
| <i>(Enter total on Line 13, Column A of Summary Page)</i>           |              |

**I. MONETARY RECEIPTS (Sections A-K)**

|  |  |   |  |  |                               |
|--|--|---|--|--|-------------------------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)   |  |   |  | TYPE OF REPORT                                       |                               |
| Ganim for Bridgeport '19   |  |   |  | April 10 filing                                      |                               |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)  |  |   |  | Subtotal Section A                                   |                               |
|  |  |   |  | \$0.00   |                               |
| <b>B. Itemized Contributions from Individuals</b>  |  |   |  |  |                               |
| Last Name<br><b>Amado</b>  |  | First<br><b>Eric</b>  |  | MI   |                               |
| Residential Street Address<br><b>744 Hancock Ave</b>   |  | City<br><b>Bridgeport</b>   |  | State<br><b>CT</b>                                   | Zip Code<br><b>06605-1908</b> |
| Principal Occupation<br><b>Information Requested</b>   |  | Name of Employer<br><b>City of Bridgeport</b>   |  |  |                               |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |  | <b>Amount of Contribution</b><br><br><b>\$500.00</b> |                               |
| Is this contribution associated with an event reported in Section L1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No                         |  |  |                               |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received<br><b>03/31/2017</b>  | Aggregate contributions<br><b>\$500.00</b> |  |                               |
| Last Name<br><b>Ambrifi</b>  |  | First<br><b>Ryan</b>  |  | MI   |                               |
| Residential Street Address<br><b>49 Cavalry Rd</b>   |  | City<br><b>Westport</b>   |  | State<br><b>CT</b>                                   | Zip Code<br><b>06880-1103</b> |
| Principal Occupation<br><b>Car Dealer</b>  |  | Name of Employer<br><b>Land Rover Milford</b>   |  |  |                               |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |  | <b>Amount of Contribution</b><br><br><b>\$500.00</b> |                               |
| Is this contribution associated with an event reported in Section L1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No                         |  |  |                               |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received<br><b>03/21/2017</b>  | Aggregate contributions<br><b>\$500.00</b> |  |                               |
| Last Name<br><b>Ambrosini</b>  |  | First<br><b>Joseph</b>  |  | MI   |                               |
| Residential Street Address<br><b>11 Gorham Pl</b>  |  | City<br><b>Trumbull</b>   |  | State<br><b>CT</b>                                   | Zip Code<br><b>06611-4703</b> |
| Principal Occupation<br><b>Business Manager</b>  |  | Name of Employer<br><b>Laborers Local 665</b>   |  |  |                               |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |  | <b>Amount of Contribution</b><br><br><b>\$200.00</b> |                               |
| Is this contribution associated with an event reported in Section L1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No                         |  |  |                               |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received<br><b>03/11/2017</b>  | Aggregate contributions<br><b>\$200.00</b> |  |                               |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>                               | \$1,200.00   |
| <b>TOTAL of Section B Pages</b>                                     | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b> | \$182,255.00 |
| <i>(Enter total on Line 13, Column A of Summary Page)</i>           |              |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |
|---|--|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)<br><b>Ganim for Bridgeport '19</b> | TYPE OF REPORT<br><b>April 10 filing</b> |
|---|--|

|   |                                  |
|---|----------------------------------|
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor) | <b>Subtotal Section A</b> \$0.00 |
|---|----------------------------------|

**B. Itemized Contributions from Individuals**

|                              |                             |                |
|------------------------------|-----------------------------|----------------|
| Last Name<br><b>Anastasi</b> | First<br><b>Christopher</b> | MI<br><b>M</b> |
|------------------------------|-----------------------------|----------------|

|   |                           |                    |                               |
|---|---------------------------|--------------------|-------------------------------|
| Residential Street Address<br><b>25 Sullivan Pl</b> | City<br><b>Bridgeport</b> | State<br><b>CT</b> | Zip Code<br><b>06610-1026</b> |
|---|---------------------------|--------------------|-------------------------------|

|  |   |
|--|---|
| Principal Occupation<br><b>Project Manager-Finance</b> | Name of Employer<br><b>City of Bridgeport</b> |
|--|---|

|  |   |                               |
|--|---|-------------------------------|
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | <b>Amount of Contribution</b> |
|--|---|-------------------------------|

|  |   |                 |
|--|---|-----------------|
| Is this contribution associated with an event reported in Section L1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i> | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No | <b>\$500.00</b> |
|--|---|-----------------|

|  |                                    |  |
|--|------------------------------------|--|
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order | Date Received<br><b>03/23/2017</b> | Aggregate contributions<br><b>\$500.00</b> |
|--|------------------------------------|--|

|                              |                      |                |
|------------------------------|----------------------|----------------|
| Last Name<br><b>Anastasi</b> | First<br><b>Mark</b> | MI<br><b>T</b> |
|------------------------------|----------------------|----------------|

|   |                           |                    |                               |
|---|---------------------------|--------------------|-------------------------------|
| Residential Street Address<br><b>25 Sullivan Pl</b> | City<br><b>Bridgeport</b> | State<br><b>CT</b> | Zip Code<br><b>06610-1026</b> |
|---|---------------------------|--------------------|-------------------------------|

|   |   |
|---|---|
| Principal Occupation<br><b>Attorney</b> | Name of Employer<br><b>City of Bridgeport</b> |
|---|---|

|  |   |                               |
|--|---|-------------------------------|
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | <b>Amount of Contribution</b> |
|--|---|-------------------------------|

|  |   |                   |
|--|---|-------------------|
| Is this contribution associated with an event reported in Section L1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i> | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No | <b>\$1,000.00</b> |
|--|---|-------------------|

|  |                                    |  |
|--|------------------------------------|--|
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order | Date Received<br><b>03/23/2017</b> | Aggregate contributions<br><b>\$1,000.00</b> |
|--|------------------------------------|--|

|                              |                      |                |
|------------------------------|----------------------|----------------|
| Last Name<br><b>Anderson</b> | First<br><b>Lisa</b> | MI<br><b>B</b> |
|------------------------------|----------------------|----------------|

|  |                           |                    |                               |
|--|---------------------------|--------------------|-------------------------------|
| Residential Street Address<br><b>105B Karen Ct</b> | City<br><b>Bridgeport</b> | State<br><b>CT</b> | Zip Code<br><b>06606-2573</b> |
|--|---------------------------|--------------------|-------------------------------|

|   |   |
|---|---|
| Principal Occupation<br><b>typist III</b> | Name of Employer<br><b>City of Bridgeport</b> |
|---|---|

|  |   |                               |
|--|---|-------------------------------|
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | <b>Amount of Contribution</b> |
|--|---|-------------------------------|

|  |   |                 |
|--|---|-----------------|
| Is this contribution associated with an event reported in Section L1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i> | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No | <b>\$500.00</b> |
|--|---|-----------------|

|  |                                    |  |
|--|------------------------------------|--|
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order | Date Received<br><b>03/23/2017</b> | Aggregate contributions<br><b>\$500.00</b> |
|--|------------------------------------|--|

|   |                     |
|---|---------------------|
| <b>SUBTOTAL Section B - This Page</b>                               | <b>\$2,000.00</b>   |
| <b>TOTAL of Section B Pages</b>                                     | <b>\$182,255.00</b> |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b> | <b>\$182,255.00</b> |
| <i>(Enter total on Line 13, Column A of Summary Page)</i>           |                     |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |                         |                               |            |
|---|--|---|-------------------------|-------------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |                         | TYPE OF REPORT                |            |
| Ganim for Bridgeport '19  |  |   |                         | April 10 filing               |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |                         | Subtotal Section A            |            |
|   |  |   |                         | \$0.00                        |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                         |                               |            |
| Last Name   |  | First   |                         | M.I.                          |            |
| Antar   |  | David   |                         |                               |            |
| Residential Street Address  |  | City  |                         | State                         | Zip Code   |
| 83 Peninsula Dr   |  | Babylon   |                         | NY                            | 11702-3315 |
| Principal Occupation  |  | Name of Employer  |                         |                               |            |
| Information Requested   |  | A+ Technology & Security Solutions Inc  |                         |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No  |                         |                               |            |
| Is this contribution associated with an event reported in Section I.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |                         | <b>\$500.00</b>               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |                         |                               |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                               |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  | \$500.00                |                               |            |
| Last Name   |  | First   |                         | M.I.                          |            |
| Antinozzi   |  | Paul  |                         |                               |            |
| Residential Street Address  |  | City  |                         | State                         | Zip Code   |
| 23 Enoch Dr   |  | Woodbridge  |                         | CT                            | 06525-1250 |
| Principal Occupation  |  | Name of Employer  |                         |                               |            |
| Architect   |  | Antinozzi Associates PC   |                         |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No  |                         |                               |            |
| Is this contribution associated with an event reported in Section I.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |                         | <b>\$500.00</b>               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |                         |                               |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                               |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  | \$500.00                |                               |            |
| Last Name   |  | First   |                         | M.I.                          |            |
| Appleby   |  | Scott   |                         |                               |            |
| Residential Street Address  |  | City  |                         | State                         | Zip Code   |
| 93 Knorr Rd   |  | Monroe  |                         | CT                            | 06468-3114 |
| Principal Occupation  |  | Name of Employer  |                         |                               |            |
| diretor oem   |  | city of bridgeport  |                         |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                               |            |
| Is this contribution associated with an event reported in Section I.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |                         | <b>\$500.00</b>               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |                         |                               |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                               |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/08/2017  | \$500.00                |                               |            |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>                               | \$1,500.00   |
| <b>TOTAL of Section B Pages</b>                                     | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b> | \$182,255.00 |
| <i>(Enter total on Line 13, Column A of Summary Page)</i>           |              |

**I. MONETARY RECEIPTS (Sections A-K)**

|  |  |   |                         |                               |            |
|--|--|---|-------------------------|-------------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)   |  |   |                         | TYPE OF REPORT                |            |
| Ganim for Bridgeport '19   |  |   |                         | April 10 filing               |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)  |  |   |                         | <b>Subtotal Section A</b>     |            |
|  |  |   |                         | \$0.00                        |            |
| <b>B. Itemized Contributions from Individuals</b>  |  |   |                         |                               |            |
| Last Name  |  | First   |                         | M.I.                          |            |
| Arduini-Pelitti  |  | Gaetana   |                         |                               |            |
| Residential Street Address   |  | City  |                         | State                         | Zip Code   |
| 130 Horse Tavern Rd  |  | Trumbull  |                         | CT                            | 06611-1518 |
| Principal Occupation   |  | Name of Employer  |                         |                               |            |
| Information Requested  |  | Tarduini Company Inc  |                         |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                               |            |
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                         |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |                         | \$500.00                      |            |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received   | Aggregate contributions |                               |            |
|  |  | 03/22/2017  | \$500.00                |                               |            |
| Last Name  |  | First   |                         | M.I.                          |            |
| Auerbach   |  | Steven  |                         |                               |            |
| Residential Street Address   |  | City  |                         | State                         | Zip Code   |
| 151 Kennedy Dr   |  | Bridgeport  |                         | CT                            | 06606-5917 |
| Principal Occupation   |  | Name of Employer  |                         |                               |            |
| Teacher  |  | Source for Teachers   |                         |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                               |            |
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                         |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |                         | \$100.00                      |            |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received   | Aggregate contributions |                               |            |
|  |  | 03/23/2017  | \$100.00                |                               |            |
| Last Name  |  | First   |                         | M.I.                          |            |
| August   |  | Jon   |                         |                               |            |
| Residential Street Address   |  | City  |                         | State                         | Zip Code   |
| 15 Soundview Dr  |  | Easton  |                         | CT                            | 06612-1945 |
| Principal Occupation   |  | Name of Employer  |                         |                               |            |
| Attorney   |  | Miller, Rosnick, D'Amarco, August, & Butler   |                         |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                               |            |
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                         |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |                         | \$250.00                      |            |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received   | Aggregate contributions |                               |            |
|  |  | 03/28/2017  | \$250.00                |                               |            |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>                               | \$850.00     |
| <b>TOTAL of Section B Pages</b>                                     | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b> | \$182,255.00 |
| <i>(Enter total on Line 13, Column A of Summary Page)</i>           |              |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |                         |   |            |
|---|--|---|-------------------------|---|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |                         | TYPE OF REPORT                                |            |
| Ganim for Bridgeport '19  |  |   |                         | April 10 filing                               |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |                         | Subtotal Section A                            |            |
|   |  |   |                         | \$0.00  |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                         |   |            |
| Last Name   |  | First   |                         | M.I.  |            |
| Aurilio   |  | James   |                         |   |            |
| Residential Street Address  |  | City  |                         | State   | Zip Code   |
| 97 Northwood Dr   |  | Easton  |                         | CT  | 06612-1351 |
| Principal Occupation  |  | Name of Employer  |                         |   |            |
| Sales   |  | Information Requested   |                         |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | <b>Amount of Contribution</b><br><br>\$500.00 |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |   |            |
| Is this contribution associated with an event reported in Section L1?<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                         |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |                         |   |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |   |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/16/2017  | \$500.00                |   |            |
| Last Name   |  | First   |                         | M.I.  |            |
| Badolato  |  | Joseph  |                         | A   |            |
| Residential Street Address  |  | City  |                         | State   | Zip Code   |
| 38 Nancy Dr   |  | Bridgeport  |                         | CT  | 06604-1008 |
| Principal Occupation  |  | Name of Employer  |                         |   |            |
| Law Enforcement   |  | City of Bridgeport  |                         |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | <b>Amount of Contribution</b><br><br>\$500.00 |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |   |            |
| Is this contribution associated with an event reported in Section L1?<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                         |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |                         |   |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |   |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  | \$500.00                |   |            |
| Last Name   |  | First   |                         | M.I.  |            |
| Baldino   |  | Virginia  |                         |   |            |
| Residential Street Address  |  | City  |                         | State   | Zip Code   |
| 408 Hawthorne Ave   |  | Derby   |                         | CT  | 06418-1039 |
| Principal Occupation  |  | Name of Employer  |                         |   |            |
| Office Mgr  |  | City of Bridgeport  |                         |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | <b>Amount of Contribution</b><br><br>\$250.00 |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |   |            |
| Is this contribution associated with an event reported in Section L1?<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                         |   |            |
| <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No<br>032317a   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |                         |   |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |   |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/20/2017  | \$250.00                |   |            |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>                               | \$1,250.00   |
| <b>TOTAL of Section B Pages</b>                                     | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b> | \$182,255.00 |
| <i>(Enter total on Line 13, Column A of Summary Page)</i>           |              |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |  |                               |            |
|---|--|---|--|-------------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |  | TYPE OF REPORT                |            |
| Ganim for Bridgeport '19  |  |   |  | April 10 filing               |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |  | Subtotal Section A            |            |
|   |  |   |  | \$0.00                        |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |  |                               |            |
| Last Name   |  | First   |  | M.I.                          |            |
| Balducci  |  | Richard   |  | J                             |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 245 River Rd  |  | Deep River  |  | CT                            | 06417-2117 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Lobbyist  |  | Doyle, D'Amore & Balducci   |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |  | <b>\$200.00</b>               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |  |                               |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/21/2017  |  | \$200.00                      |            |
| Last Name   |  | First   |  | M.I.                          |            |
| Banaga  |  | Tageldin  |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 1333 E Main St  |  | Bridgeport  |  | CT                            | 06608-1400 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Information Requested   |  | Information Requested   |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |  | <b>\$500.00</b>               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |  |                               |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/22/2017  |  | \$500.00                      |            |
| Last Name   |  | First   |  | M.I.                          |            |
| Banoff  |  | Andrew  |  | H                             |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 297 Pine Creek Ave  |  | Fairfield   |  | CT                            | 06824-6340 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Nursing Home Administrator  |  | Jewish Senior Services  |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |  |                               |            |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |  | <b>\$250.00</b>               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |  |                               |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/15/2017  |  | \$250.00                      |            |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$950.00     |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |
|---|--|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)<br><b>Ganim for Bridgeport '19</b>                           | TYPE OF REPORT<br><b>April 10 filing</b> |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor) | <b>Subtotal Section A</b> \$0.00         |

**B. Itemized Contributions from Individuals**

|                             |                       |                  |
|-----------------------------|-----------------------|------------------|
| Last Name<br><b>Barrett</b> | First<br><b>Bruce</b> | M.I.<br><b>A</b> |
|-----------------------------|-----------------------|------------------|

|  |                        |                    |                               |
|--|------------------------|--------------------|-------------------------------|
| Residential Street Address<br><b>47 Point Beach Dr</b> | City<br><b>Milford</b> | State<br><b>CT</b> | Zip Code<br><b>06460-7642</b> |
|--|------------------------|--------------------|-------------------------------|

|  |                                    |
|--|------------------------------------|
| Principal Occupation<br><b>Information Requested</b> | Name of Employer<br><b>Barnett</b> |
|--|------------------------------------|

|  |   |                               |
|--|---|-------------------------------|
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | <b>Amount of Contribution</b> |
|--|---|-------------------------------|

|   |   |                 |
|---|---|-----------------|
| Is this contribution associated with an event reported in Section I.1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i> | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No | <b>\$500.00</b> |
|---|---|-----------------|

|  |                                    |  |
|--|------------------------------------|--|
| Method of contribution:<br><input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order | Date Received<br><b>03/17/2017</b> | Aggregate contributions<br><b>\$500.00</b> |
|--|------------------------------------|--|

|                             |                       |      |
|-----------------------------|-----------------------|------|
| Last Name<br><b>Barrett</b> | First<br><b>Kerri</b> | M.I. |
|-----------------------------|-----------------------|------|

|                            |      |       |          |
|----------------------------|------|-------|----------|
| Residential Street Address | City | State | Zip Code |
|----------------------------|------|-------|----------|

|  |  |
|--|--|
| Principal Occupation<br><b>Information Requested</b> | Name of Employer<br><b>Information Requested</b> |
|--|--|

|  |   |                               |
|--|---|-------------------------------|
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | <b>Amount of Contribution</b> |
|--|---|-------------------------------|

|  |   |                 |
|--|---|-----------------|
| Is this contribution associated with an event reported in Section I.1?<br><input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No<br><i>If yes, list Event #</i> <b>032317a</b> | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No | <b>\$250.00</b> |
|--|---|-----------------|

|  |                                    |  |
|--|------------------------------------|--|
| Method of contribution:<br><input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order | Date Received<br><b>03/20/2017</b> | Aggregate contributions<br><b>\$250.00</b> |
|--|------------------------------------|--|

|                                    |                           |      |
|------------------------------------|---------------------------|------|
| Last Name<br><b>Bartlett-Josie</b> | First<br><b>Christine</b> | M.I. |
|------------------------------------|---------------------------|------|

|  |                          |                    |                               |
|--|--------------------------|--------------------|-------------------------------|
| Residential Street Address<br><b>1 University Pl</b> | City<br><b>New Haven</b> | State<br><b>CT</b> | Zip Code<br><b>06511-3240</b> |
|--|--------------------------|--------------------|-------------------------------|

|  |   |
|--|---|
| Principal Occupation<br><b>Deputy Chief of Staff</b> | Name of Employer<br><b>City of Bridgeport</b> |
|--|---|

|  |   |                               |
|--|---|-------------------------------|
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | <b>Amount of Contribution</b> |
|--|---|-------------------------------|

|   |   |                 |
|---|---|-----------------|
| Is this contribution associated with an event reported in Section I.1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i> | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No | <b>\$250.00</b> |
|---|---|-----------------|

|  |                                    |  |
|--|------------------------------------|--|
| Method of contribution:<br><input type="checkbox"/> Cash<br><input type="checkbox"/> Personal Check<br><input checked="" type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order | Date Received<br><b>03/31/2017</b> | Aggregate contributions<br><b>\$250.00</b> |
|--|------------------------------------|--|

|  |                     |
|--|---------------------|
| <b>SUBTOTAL Section B - This Page</b>  | <b>\$1,000.00</b>   |
| <b>TOTAL of Section B Pages</b>  | <b>\$182,255.00</b> |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | <b>\$182,255.00</b> |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |  |                               |            |
|---|--|---|--|-------------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |  | TYPE OF REPORT                |            |
| Ganim for Bridgeport '19  |  |   |  | April 10 filing               |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |  | Subtotal Section A            |            |
|   |  |   |  | \$0.00                        |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |  |                               |            |
| Last Name   |  | First   |  | M.I.                          |            |
| Beasley   |  | Natasha   |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 157 Eagle St  |  | Bridgeport  |  | CT                            | 06607-1619 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Information Requested   |  | Information Requested   |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |  | <b>\$50.00</b>                |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |  |                               |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/22/2017  |  | \$50.00                       |            |
| Last Name   |  | First   |  | M.I.                          |            |
| Benson  |  | Boka  |  | B                             |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 285 Laurel Ave, Fl 2  |  | Bridgeport  |  | CT                            | 06605-1102 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Accountant/Benefits Admin   |  | Bridgeport Housing Authority  |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |  | <b>\$500.00</b>               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |  |                               |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$500.00                      |            |
| Last Name   |  | First   |  | M.I.                          |            |
| Berchem   |  | Robert  |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 125 W River St  |  | Milford   |  | CT                            | 06460-3420 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Attorney  |  | Bercham, Mason & Devlin   |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |  |                               |            |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |  | <b>\$1,000.00</b>             |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |  |                               |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$1,000.00                    |            |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$1,550.00   |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |  |                               |            |
|---|--|---|--|-------------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |  | TYPE OF REPORT                |            |
| Ganim for Bridgeport '19  |  |   |  | April 10 filing               |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |  | <b>Subtotal Section A</b>     |            |
|   |  |   |  | \$0.00                        |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |  |                               |            |
| Last Name   |  | First   |  | MI                            |            |
| Berrios   |  | Francisco   |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 730 Palisade Ave, B-3   |  | Bridgeport  |  | CT                            | 06610-3468 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Sales   |  | Lacuenta & Johnson  |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event # 032317a  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |  |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |  | \$100.00                      |            |
| Method of contribution:   |  | Date Received   |  |                               |            |
| <input checked="" type="checkbox"/> Cash<br><input type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$100.00                      |            |
| Last Name   |  | First   |  | MI                            |            |
| Biggs   |  | Melissa   |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 562 Litchfield Ave  |  | Dayville  |  | CT                            | 06241-2005 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Lobbyist  |  | DePino, Nunez, & Biggs  |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |  |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |  | \$500.00                      |            |
| Method of contribution:   |  | Date Received   |  |                               |            |
| <input type="checkbox"/> Cash<br><input type="checkbox"/> Personal Check<br><input checked="" type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/31/2017  |  | \$500.00                      |            |
| Last Name   |  | First   |  | MI                            |            |
| Bird  |  | Tyrell  |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 157 Court D, 32 Success Park  |  | Bridgeport  |  | CT                            | 06610      |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Information Requested   |  | Information Requested   |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |  |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |  | \$100.00                      |            |
| Method of contribution:   |  | Date Received   |  |                               |            |
| <input checked="" type="checkbox"/> Cash<br><input type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$100.00                      |            |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>   | \$700.00     |
| <b>TOTAL of Section B Pages</b>   | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |                         |                        |            |
|---|--|---|-------------------------|------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |                         | TYPE OF REPORT         |            |
| Ganim for Bridgeport '19  |  |   |                         | April 10 filing        |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |                         | Subtotal Section A     |            |
|   |  |   |                         | \$0.00                 |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                         |                        |            |
| Last Name   |  | First   |                         | M.I.                   |            |
| Bohannon  |  | John  |                         |                        |            |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |
| 115 Balmforth St  |  | Bridgeport  |                         | CT                     | 06605-3505 |
| Principal Occupation  |  | Name of Employer  |                         |                        |            |
| Self  |  | Attorney  |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         | \$1,000.00             |            |
| Is this contribution associated with an event reported in Section L1?<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |                         |                        |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                        |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/23/2017  | \$1,000.00              |                        |            |
| Last Name   |  | First   |                         | M.I.                   |            |
| Bond  |  | Maritza   |                         |                        |            |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |
| 665 W Main St   |  | West Haven  |                         | CT                     | 06516-4825 |
| Principal Occupation  |  | Name of Employer  |                         |                        |            |
| Director of Health  |  | City of Bridgeport  |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         | \$1,000.00             |            |
| Is this contribution associated with an event reported in Section L1?<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |                         |                        |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                        |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/23/2017  | \$1,000.00              |                        |            |
| Last Name   |  | First   |                         | M.I.                   |            |
| Boucher   |  | Paul  |                         |                        |            |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |
| 37 Forest Ct  |  | Bridgeport  |                         | CT                     | 06604-5237 |
| Principal Occupation  |  | Name of Employer  |                         |                        |            |
| Zoning  |  | City of Bridgeport  |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         | \$250.00               |            |
| Is this contribution associated with an event reported in Section L1?<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                         |                        |            |
| <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No<br>032317a   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |                         |                        |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                        |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/31/2017  | \$250.00                |                        |            |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>   | \$2,250.00   |
| <b>TOTAL of Section B Pages</b>   | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |  |                               |            |
|---|--|---|--|-------------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |  | TYPE OF REPORT                |            |
| Ganim for Bridgeport '19  |  |   |  | April 10 filing               |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |  | <b>Subtotal Section A</b>     |            |
|   |  |   |  | <b>\$0.00</b>                 |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |  |                               |            |
| Last Name   |  | First   |  | M.I.                          |            |
| Bradley   |  | Dennis A.   |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 853 Fairfield Ave   |  | Bridgeport  |  | CT                            | 06604-3703 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Lawyer  |  | Bradley Law Group   |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |  | <b>\$100.00</b>               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |  |                               |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions       |            |
| <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$100.00                      |            |
| Last Name   |  | First   |  | M.I.                          |            |
| Brennan   |  | Thomas  |  | M                             |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 435 Gilman St   |  | Bridgeport  |  | CT                            | 06605-3513 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Realtor   |  | Thomas Brennan Real Estate  |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |  | <b>\$1,000.00</b>             |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |  |                               |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/15/2017  |  | \$1,000.00                    |            |
| Last Name   |  | First   |  | M.I.                          |            |
| Buckley   |  | Carmel  |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 70 Garden Ter   |  | Bridgeport  |  | CT                            | 06605-3308 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Information Requested   |  | Information Requested   |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |  | <b>\$200.00</b>               |            |
| <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No<br><i>If yes, list Event # 032317a</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |  |                               |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/06/2017  |  | \$200.00                      |            |

|   |                     |
|---|---------------------|
| <b>SUBTOTAL Section B - This Page</b>                               | <b>\$1,300.00</b>   |
| <b>TOTAL of Section B Pages</b>                                     | <b>\$182,255.00</b> |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b> | <b>\$182,255.00</b> |
| <i>(Enter total on Line 13, Column A of Summary Page)</i>           |                     |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |                                    |                         |                |
|---|--|---|------------------------------------|-------------------------|----------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |                                    | TYPE OF REPORT          |                |
| Ganim for Bridgeport '19  |  |   |                                    | April 10 filing         |                |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |                                    | Subtotal Section A      |                |
|   |  |   |                                    | \$0.00                  |                |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                                    |                         |                |
| Last Name   |  | First   |                                    | M.I.                    |                |
| Bukovsky  |  | Kathryn   |                                    | M                       |                |
| Residential Street Address  |  |   | City                               |                         | State Zip Code |
| 54 Seaside Ave  |  |   | Bridgeport                         |                         | CT 06605-3539  |
| Principal Occupation  |  |   | Name of Employer                   |                         |                |
| Sales   |  |   | Dunn and Bradstreet/MDR            |                         |                |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                                    | Amount of Contribution  |                |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                                    | \$100.00                |                |
| Is this contribution associated with an event reported in Section L1?<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                                    |                         |                |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |                                    |                         |                |
| Method of contribution:   |  |   | Date Received                      | Aggregate contributions |                |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/22/2017                         | \$100.00                |                |
| Last Name   |  | First   |                                    | M.I.                    |                |
| Buturla   |  | Richard   |                                    |                         |                |
| Residential Street Address  |  |   | City                               |                         | State Zip Code |
| 200 N Pasture Ln  |  |   | Stratford                          |                         | CT 06614-1392  |
| Principal Occupation  |  |   | Name of Employer                   |                         |                |
| Lawyer  |  |   | Berchem, Mosest, Orvlin PC         |                         |                |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                                    | Amount of Contribution  |                |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |                                    | \$1,000.00              |                |
| Is this contribution associated with an event reported in Section L1?<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                                    |                         |                |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |                                    |                         |                |
| Method of contribution:   |  |   | Date Received                      | Aggregate contributions |                |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/23/2017                         | \$1,000.00              |                |
| Last Name   |  | First   |                                    | M.I.                    |                |
| Camera  |  | Katrina   |                                    | K                       |                |
| Residential Street Address  |  |   | City                               |                         | State Zip Code |
| 52 Hubbell Ln   |  |   | Shelton                            |                         | CT 06484-2166  |
| Principal Occupation  |  |   | Name of Employer                   |                         |                |
| Lawyer  |  |   | Schalfer & Camera Attorneys at Law |                         |                |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                                    | Amount of Contribution  |                |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |                                    | \$1,000.00              |                |
| Is this contribution associated with an event reported in Section L1?<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                                    |                         |                |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |                                    |                         |                |
| Method of contribution:   |  |   | Date Received                      | Aggregate contributions |                |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/23/2017                         | \$1,000.00              |                |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>   | \$2,100.00   |
| <b>TOTAL of Section B Pages</b>   | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|  |  |   |                         |                        |            |
|--|--|---|-------------------------|------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)   |  |   |                         | TYPE OF REPORT         |            |
| Ganim for Bridgeport '19   |  |   |                         | April 10 filing        |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)  |  |   |                         | Subtotal Section A     |            |
|  |  |   |                         | \$0.00                 |            |
| <b>B. Itemized Contributions from Individuals</b>  |  |   |                         |                        |            |
| Last Name  |  | First   |                         | M.I.                   |            |
| Camilliere   |  | Anthony   |                         |                        |            |
| Residential Street Address   |  | City  |                         | State                  | Zip Code   |
| 60 Old Common Rd   |  | Wethersfield  |                         | CT                     | 06109-3945 |
| Principal Occupation   |  | Name of Employer  |                         |                        |            |
| Lobbyist   |  | CCK   |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                        |            |
| Is this contribution associated with an event reported in Section L1?<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                         | \$250.00               |            |
| Method of contribution:<br><input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received   | Aggregate contributions |                        |            |
|  |  | 03/31/2017  | \$250.00                |                        |            |
| Last Name  |  | First   |                         | M.I.                   |            |
| Candee   |  | Scott   |                         | W                      |            |
| Residential Street Address   |  | City  |                         | State                  | Zip Code   |
| 87 Sport Hill Rd   |  | Redding   |                         | CT                     | 06896-3016 |
| Principal Occupation   |  | Name of Employer  |                         |                        |            |
| Information Requested  |  | H. R. Candee construction   |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No  |                         |                        |            |
| Is this contribution associated with an event reported in Section L1?<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                         | \$1,000.00             |            |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received   | Aggregate contributions |                        |            |
|  |  | 03/30/2017  | \$1,000.00              |                        |            |
| Last Name  |  | First   |                         | M.I.                   |            |
| Cappozziello   |  | Kim   |                         |                        |            |
| Residential Street Address   |  | City  |                         | State                  | Zip Code   |
| 45 Amante Dr   |  | Easton  |                         | CT                     | 06612-1850 |
| Principal Occupation   |  | Name of Employer  |                         |                        |            |
| Information Requested  |  | Information Requested   |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                        |            |
| Is this contribution associated with an event reported in Section L1?<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                         | \$500.00               |            |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received   | Aggregate contributions |                        |            |
|  |  | 03/14/2017  | \$500.00                |                        |            |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>   | \$1,750.00   |
| <b>TOTAL of Section B Pages</b>   | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|  |  |
|--|--|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)<br><b>Ganim for Bridgeport '19</b>                                  | TYPE OF REPORT<br><b>April 10 filing</b>                                   |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br><i>(See instructions for definition of Small Contributor)</i> | <b>Subtotal Section A</b> <span style="float: right;"><b>\$0.00</b></span> |

**B. Itemized Contributions from Individuals**

|  |  |   |  |  |                               |
|--|--|---|--|--|-------------------------------|
| Last Name<br><b>Capuano</b>  |  | First<br><b>Anthony</b>   |  | M.I.<br><b></b>  |                               |
| Residential Street Address<br><b>180 Flagler Ave</b>   |  | City<br><b>Stratford</b>  |  | State<br><b>CT</b>                                     | Zip Code<br><b>06614-2364</b> |
| Principal Occupation<br><b>Excavation</b>  |  | Name of Employer<br><b>Capuano Const LLC</b>  |  |  |                               |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |  | <b>Amount of Contribution</b><br><br><b>\$1,000.00</b> |                               |
| Is this contribution associated with an event reported in Section L.1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No                         |  |  |                               |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received<br><b>03/27/2017</b>  | Aggregate contributions<br><b>\$1,000.00</b> |  |                               |
| Last Name<br><b>Carbone</b>  |  | First<br><b>Joseph</b>  |  | M.I.<br><b>M</b>                                       |                               |
| Residential Street Address<br><b>115 Tuttle Dr</b>   |  | City<br><b>New Haven</b>  |  | State<br><b>CT</b>                                     | Zip Code<br><b>06512-5022</b> |
| Principal Occupation<br><b>CEO</b>   |  | Name of Employer<br><b>The Workplace Inc</b>  |  |  |                               |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |  | <b>Amount of Contribution</b><br><br><b>\$500.00</b>   |                               |
| Is this contribution associated with an event reported in Section L.1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No                         |  |  |                               |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received<br><b>03/23/2017</b>  | Aggregate contributions<br><b>\$500.00</b>   |  |                               |
| Last Name<br><b>Carlson</b>  |  | First<br><b>Robert</b>  |  | M.I.<br><b></b>  |                               |
| Residential Street Address<br><b>68 Soundview Dr</b>   |  | City<br><b>Easton</b>   |  | State<br><b>CT</b>                                     | Zip Code<br><b>06612-1920</b> |
| Principal Occupation<br><b>Exec</b>  |  | Name of Employer<br><b>Carlson Corp</b>   |  |  |                               |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |  | <b>Amount of Contribution</b><br><br><b>\$500.00</b>   |                               |
| Is this contribution associated with an event reported in Section L.1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No                         |  |  |                               |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received<br><b>03/23/2017</b>  | Aggregate contributions<br><b>\$500.00</b>   |  |                               |

|  |                     |
|--|---------------------|
| <b>SUBTOTAL Section B - This Page</b>  | <b>\$2,000.00</b>   |
| <b>TOTAL of Section B Pages</b>  | <b>\$182,255.00</b> |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | <b>\$182,255.00</b> |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |                       |   |                         |
|---|--|---|-----------------------|---|-------------------------|
| NAME OF COMMITTEE <i>(Provide Complete Name as Registered with Filing Repository)</i>   |  |   |                       | TYPE OF REPORT                                  |                         |
| Ganim for Bridgeport '19  |  |   |                       | April 10 filing                                 |                         |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br><i>(See instructions for definition of Small Contributor)</i>  |  |   |                       | Subtotal Section A                              |                         |
|   |  |   |                       | \$0.00  |                         |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                       |   |                         |
| Last Name   |  | First   |                       | M.I.  |                         |
| Carr  |  | Kenneth   |                       |   |                         |
| Residential Street Address  |  | City  |                       | State   | Zip Code                |
| 2 Oak Point Clb   |  | New Milford   |                       | CT  | 06776-4727              |
| Principal Occupation  |  |   | Name of Employer      |   |                         |
| Information Requested   |  |   | Information Requested |   |                         |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                       | <b>Amount of Contribution</b><br><br>\$1,000.00 |                         |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                       |   |                         |
| Is this contribution associated with an event reported in Section L1?<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                       |   |                         |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                       |   |                         |
| Method of contribution:   |  |   |                       | Date Received                                   | Aggregate contributions |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   |                       | 03/21/2017                                      | \$1,000.00              |
| Last Name   |  | First   |                       | M.I.  |                         |
| Carrena   |  | Ethan   |                       |   |                         |
| Residential Street Address  |  | City  |                       | State   | Zip Code                |
| 2370 North Ave, Unit 7F   |  | Bridgeport  |                       | CT  | 06604-2331              |
| Principal Occupation  |  |   | Name of Employer      |   |                         |
| Student   |  |   | student               |   |                         |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                       | <b>Amount of Contribution</b><br><br>\$500.00   |                         |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                       |   |                         |
| Is this contribution associated with an event reported in Section L1?<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                       |   |                         |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                       |   |                         |
| Method of contribution:   |  |   |                       | Date Received                                   | Aggregate contributions |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   |                       | 03/17/2017                                      | \$500.00                |
| Last Name   |  | First   |                       | M.I.  |                         |
| Carrillo  |  | Harry   |                       |   |                         |
| Residential Street Address  |  | City  |                       | State   | Zip Code                |
| 33 Boston Ter, Unit 11  |  | Bridgeport  |                       | CT  | 06610-2570              |
| Principal Occupation  |  |   | Name of Employer      |   |                         |
| Counselor/Social Worker   |  |   | Family ReEntry Inc    |   |                         |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                       | <b>Amount of Contribution</b><br><br>\$100.00   |                         |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                       |   |                         |
| Is this contribution associated with an event reported in Section L1?<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                       |   |                         |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                       |   |                         |
| Method of contribution:   |  |   |                       | Date Received                                   | Aggregate contributions |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   |                       | 03/15/2017                                      | \$100.00                |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$1,600.00   |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|  |  |   |                         |                               |            |
|--|--|---|-------------------------|-------------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)   |  |   |                         | TYPE OF REPORT                |            |
| Ganim for Bridgeport '19   |  |   |                         | April 10 filing               |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)  |  |   |                         | Subtotal Section A            |            |
|  |  |   |                         | \$0.00                        |            |
| <b>B. Itemized Contributions from Individuals</b>  |  |   |                         |                               |            |
| Last Name  |  | First   |                         | M.I.                          |            |
| Carroll  |  | Megan   |                         |                               |            |
| Residential Street Address   |  | City  |                         | State                         | Zip Code   |
| 255 Pumpkin Ground Rd  |  | Stratford   |                         | CT                            | 06614-8928 |
| Principal Occupation   |  | Name of Employer  |                         |                               |            |
| Restaurant Owner   |  | Vazzanos Four Seasons   |                         |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                               |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                         |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                         | <b>\$1,000.00</b>             |            |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received   | Aggregate contributions |                               |            |
|  |  | 03/23/2017  | \$1,000.00              |                               |            |
| Last Name  |  | First   |                         | M.I.                          |            |
| Carroll  |  | Sean  |                         | M                             |            |
| Residential Street Address   |  | City  |                         | State                         | Zip Code   |
| 11 Old Barn Rd   |  | Trumbull  |                         | CT                            | 06611-2919 |
| Principal Occupation   |  | Name of Employer  |                         |                               |            |
| Insurance  |  | Merit Insurance Inc   |                         |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No  |                         |                               |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                         |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                         | <b>\$1,000.00</b>             |            |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received   | Aggregate contributions |                               |            |
|  |  | 03/23/2017  | \$1,000.00              |                               |            |
| Last Name  |  | First   |                         | M.I.                          |            |
| Caslin   |  | Darcy   |                         |                               |            |
| Residential Street Address   |  | City  |                         | State                         | Zip Code   |
| 61 2nd Ave   |  | Westbrook   |                         | CT                            | 06498-2028 |
| Principal Occupation   |  | Name of Employer  |                         |                               |            |
| Insurance Consultant/Admin   |  | Beacon Retired Benefits Group   |                         |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No  |                         |                               |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                         |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                         | <b>\$1,000.00</b>             |            |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received   | Aggregate contributions |                               |            |
|  |  | 03/15/2017  | \$1,000.00              |                               |            |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$3,000.00   |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

I. MONETARY RECEIPTS (Sections A-K)

|   |  |   |                         |                        |            |
|---|--|---|-------------------------|------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |                         | TYPE OF REPORT         |            |
| Ganim for Bridgeport '19  |  |   |                         | April 10 filing        |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |                         | Subtotal Section A     |            |
|   |  |   |                         | \$0.00                 |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                         |                        |            |
| Last Name   |  | First   |                         | M.I.                   |            |
| Caslin  |  | David   |                         | J                      |            |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |
| 61 2nd Ave  |  | Westbrook   |                         | CT                     | 06498-2028 |
| Principal Occupation  |  |   | Name of Employer        |                        |            |
| Insurance Benefit Consultant  |  |   | HP Planning dba /ABP    |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                        |            |
| Is this contribution associated with an event reported in Section L.1?<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                         | \$1,000.00             |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                        |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/15/2017  | \$1,000.00              |                        |            |
| Last Name   |  | First   |                         | M.I.                   |            |
| Cellar  |  | Richard   |                         |                        |            |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |
| 2800 Main St  |  | Bridgeport  |                         | CT                     | 06606-4201 |
| Principal Occupation  |  |   | Name of Employer        |                        |            |
| Night Club  |  |   | Self                    |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                        |            |
| Is this contribution associated with an event reported in Section L.1?<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                         | \$500.00               |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                        |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/23/2017  | \$500.00                |                        |            |
| Last Name   |  | First   |                         | M.I.                   |            |
| Cellarelli  |  | Roberta   |                         | B                      |            |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |
| 153 Coram Rd, Apt 713   |  | Shelton   |                         | CT                     | 06484-4348 |
| Principal Occupation  |  |   | Name of Employer        |                        |            |
| Information Requested   |  |   | Bridgeport Hospital     |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                        |            |
| Is this contribution associated with an event reported in Section L.1?<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                         | \$1,000.00             |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                        |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/23/2017  | \$1,000.00              |                        |            |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>   | \$2,500.00   |
| <b>TOTAL of Section B Pages</b>   | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |  |   |            |
|---|--|---|--|---|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |  | TYPE OF REPORT                                |            |
| Ganim for Bridgeport '19  |  |   |  | April 10 filing                               |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |  | Subtotal Section A                            |            |
|   |  |   |  | \$0.00  |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |  |   |            |
| Last Name   |  | First   |  | M.I.  |            |
| Chaves, Jr.   |  | John  |  |   |            |
| Residential Street Address  |  | City  |  | State   | Zip Code   |
| 220 Buddington Rd   |  | Shelton   |  | CT  | 06484-5308 |
| Principal Occupation  |  | Name of Employer  |  |   |            |
| Manager   |  | Chaves Baker, Inc.  |  |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b><br><br>\$500.00 |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |   |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |  |   |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions                       |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/15/2017  |  | \$500.00                                      |            |
| Last Name   |  | First   |  | M.I.  |            |
| Clarke  |  | Natasha   |  |   |            |
| Residential Street Address  |  | City  |  | State   | Zip Code   |
| 31 Doreen Dr  |  | Bridgeport  |  | CT  | 06604-1002 |
| Principal Occupation  |  | Name of Employer  |  |   |            |
| City of Bridgeport  |  | Support Partner   |  |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b><br><br>\$100.00 |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |   |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |  |   |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions                       |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/16/2017  |  | \$100.00                                      |            |
| Last Name   |  | First   |  | M.I.  |            |
| Clay  |  | Ginne-Rae   |  |   |            |
| Residential Street Address  |  | City  |  | State   | Zip Code   |
| 3015 N Main St  |  | Waterbury   |  | CT  | 06704-1214 |
| Principal Occupation  |  | Name of Employer  |  |   |            |
| Administrator   |  | City of Bridgeport  |  |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b><br><br>\$300.00 |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |   |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |  |   |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions                       |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/22/2017  |  | \$300.00                                      |            |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$900.00     |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |  |                               |            |
|---|--|---|--|-------------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |  | TYPE OF REPORT                |            |
| Ganim for Bridgeport '19  |  |   |  | April 10 filing               |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |  | <b>Subtotal Section A</b>     |            |
|   |  |   |  | <b>\$0.00</b>                 |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |  |                               |            |
| Last Name   |  | First   |  | M.I.                          |            |
| Cloud   |  | Christopher   |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 242 Talcott Notch Rd  |  | Farmington  |  | CT                            | 06032-1621 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Lobbyist  |  | Information Requested   |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |  | <b>\$250.00</b>               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |  |                               |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/22/2017  |  | <b>\$250.00</b>               |            |
| Last Name   |  | First   |  | M.I.                          |            |
| Coble   |  | Thomas  |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 631 Sedgewick Ave   |  | Stratford   |  | CT                            | 06615-6918 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Mgr   |  | City of Bridgeport  |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |  | <b>\$500.00</b>               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |  |                               |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  |  | <b>\$500.00</b>               |            |
| Last Name   |  | First   |  | M.I.                          |            |
| Coble   |  | Vaun  |  | C                             |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 125 Lenox Ave   |  | Bridgeport  |  | CT                            | 06605-1948 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Maintenance   |  | City of Bridgeport  |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |  | <b>\$100.00</b>               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |  |                               |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  |  | <b>\$100.00</b>               |            |

|  |                     |
|--|---------------------|
| <b>SUBTOTAL Section B - This Page</b>  | <b>\$850.00</b>     |
| <b>TOTAL of Section B Pages</b>  | <b>\$182,255.00</b> |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | <b>\$182,255.00</b> |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |  |
|---|--|---|--|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  | TYPE OF REPORT  |  |
| Ganim for Bridgeport '19  |  | April 10 filing   |  |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  | Subtotal Section A  |  |
|   |  | \$0.00  |  |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |  |
| Last Name   |  | First   |  |
| Coelho  |  | Manuel  |  |
| Residential Street Address  |  | City  |  |
| 58 Longmeadow Rd  |  | Trumbull  |  |
| State   |  | Zip Code  |  |
| CT  |  | 06611-2557  |  |
| Principal Occupation  |  | Name of Employer  |  |
| Information Requested   |  | Information Requested   |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |
| Is this contribution associated with an event reported in Section I.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |  |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, indicate which branch or branches of government the contract is with:   |  |
|   |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |  |
| Method of contribution:   |  | Date Received   |  |
| <input checked="" type="checkbox"/> Cash<br><input type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/22/2017  |  |
|   |  | Aggregate contributions   |  |
|   |  | \$100.00  |  |
| Last Name   |  | First   |  |
| Cohen   |  | Melody  |  |
| Residential Street Address  |  | City  |  |
| 38 Meadowcrest Dr   |  | Fairfield   |  |
| State   |  | Zip Code  |  |
| CT  |  | 06825-1313  |  |
| Principal Occupation  |  | Name of Employer  |  |
| OTR/1   |  | Melody Cohen OTR  |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |
| Is this contribution associated with an event reported in Section I.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |  |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, indicate which branch or branches of government the contract is with:   |  |
|   |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |  |
| Method of contribution:   |  | Date Received   |  |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/27/2017  |  |
|   |  | Aggregate contributions   |  |
|   |  | \$500.00  |  |
| Last Name   |  | First   |  |
| Coleman   |  | William   |  |
| Residential Street Address  |  | City  |  |
| 20 Blackall Rd  |  | Milford   |  |
| State   |  | Zip Code  |  |
| CT  |  | 06460-8088  |  |
| Principal Occupation  |  | Name of Employer  |  |
| Economic Development  |  | City of Bridgeport  |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |
| Is this contribution associated with an event reported in Section I.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |  |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, indicate which branch or branches of government the contract is with:   |  |
|   |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |  |
| Method of contribution:   |  | Date Received   |  |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/20/2017  |  |
|   |  | Aggregate contributions   |  |
|   |  | \$1,000.00  |  |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>   | \$1,600.00   |
| <b>TOTAL of Section B Pages</b>   | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |  |  |            |
|---|--|---|--|--|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |  | TYPE OF REPORT                                       |            |
| Ganim for Bridgeport '19  |  |   |  | April 10 filing                                      |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |  | <b>Subtotal Section A</b>                            |            |
|   |  |   |  | <b>\$0.00</b>  |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |  |  |            |
| Last Name   |  | First   |  | M.I.   |            |
| Coles   |  | Kevin   |  | A  |            |
| Residential Street Address  |  | City  |  | State  | Zip Code   |
| 38 Harbour View Pl  |  | Stratford   |  | CT   | 06615-7070 |
| Principal Occupation  |  | Name of Employer  |  |  |            |
| Attorney  |  | Coles, Baldwin and Kaiser LLC   |  |  |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b><br><br><b>\$500.00</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |  |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |  |  |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions                              |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/05/2017  |  | \$500.00   |            |
| Last Name   |  | First   |  | M.I.   |            |
| Conine  |  | Luann   |  |  |            |
| Residential Street Address  |  | City  |  | State  | Zip Code   |
| 63 Lobsterback Rd   |  | Shelton   |  | CT   | 06484-5715 |
| Principal Occupation  |  | Name of Employer  |  |  |            |
| Superintendent of Recreation  |  | City of Bridgeport  |  |  |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b><br><br><b>\$500.00</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |  |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |  |  |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions                              |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$500.00   |            |
| Last Name   |  | First   |  | M.I.   |            |
| Constantini   |  | Mark  |  |  |            |
| Residential Street Address  |  | City  |  | State  | Zip Code   |
| 43 Crescent Pl  |  | Monroe  |  | CT   | 06468-1608 |
| Principal Occupation  |  | Name of Employer  |  |  |            |
| Information Requested   |  | Information Requested   |  |  |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b><br><br><b>\$500.00</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |  |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |  |  |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions                              |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$500.00   |            |

|  |                     |
|--|---------------------|
| <b>SUBTOTAL Section B - This Page</b>  | <b>\$1,500.00</b>   |
| <b>TOTAL of Section B Pages</b>  | <b>\$182,255.00</b> |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | <b>\$182,255.00</b> |

I. MONETARY RECEIPTS (Sections A-K)

|   |  |   |                         |                        |            |
|---|--|---|-------------------------|------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   | TYPE OF REPORT          |                        |            |
| Ganim for Bridgeport '19  |  |   | April 10 filing         |                        |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   | Subtotal Section A      |                        |            |
|   |  |   | \$0.00                  |                        |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                         |                        |            |
| Last Name   |  | First   |                         | M.I.                   |            |
| Conway  |  | Richard   |                         |                        |            |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |
| 80 Blue Ridge Rd  |  | Berlin  |                         | CT                     | 06037-2802 |
| Principal Occupation  |  | Name of Employer  |                         |                        |            |
| Lobbyist  |  | Gaffney Bennett & Associates  |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         | \$500.00               |            |
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |                         |                        |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                        |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  | \$500.00                |                        |            |
| Last Name   |  | First   |                         | M.I.                   |            |
| Cooper  |  | Jimmy   |                         | R                      |            |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |
| 65 Radel St   |  | Bridgeport  |                         | CT                     | 06607-2114 |
| Principal Occupation  |  | Name of Employer  |                         |                        |            |
| Information Requested   |  | Self Employed   |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         | \$600.00               |            |
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |                         |                        |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                        |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  | \$600.00                |                        |            |
| Last Name   |  | First   |                         | M.I.                   |            |
| Cortina   |  | Albert  |                         | A                      |            |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |
| 65 Lilac Ln   |  | Easton  |                         | CT                     | 06612-2065 |
| Principal Occupation  |  | Name of Employer  |                         |                        |            |
| Electrician   |  | County Electric   |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         | \$500.00               |            |
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |                         |                        |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                        |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/21/2017  | \$500.00                |                        |            |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>   | \$1,600.00   |
| <b>TOTAL of Section B Pages</b>   | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |                         |                        |            |
|---|--|---|-------------------------|------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |                         | TYPE OF REPORT         |            |
| Ganim for Bridgeport '19  |  |   |                         | April 10 filing        |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |                         | Subtotal Section A     |            |
|   |  |   |                         | \$0.00                 |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                         |                        |            |
| Last Name   |  | First   |                         | M.I.                   |            |
| Cortina   |  | Michael   |                         | A                      |            |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |
| 73 Tuckahoe Rd  |  | Easton  |                         | CT                     | 06612-2053 |
| Principal Occupation  |  | Name of Employer  |                         |                        |            |
| Electrician   |  | County Electric   |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         | \$500.00               |            |
| Is this contribution associated with an event reported in Section I.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative        |                         |                        |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                        |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/21/2017  | \$500.00                |                        |            |
| Last Name   |  | First   |                         | M.I.                   |            |
| Cotter  |  | John  |                         |                        |            |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |
| 889 E Broadway  |  | Milford   |                         | CT                     | 06460-6235 |
| Principal Occupation  |  | Name of Employer  |                         |                        |            |
| Information Requested   |  | Information Requested   |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         | \$1,000.00             |            |
| Is this contribution associated with an event reported in Section I.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |                         |                        |            |
| <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No<br>If yes, list Event # 032317a  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative        |                         |                        |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                        |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  | \$1,000.00              |                        |            |
| Last Name   |  | First   |                         | M.I.                   |            |
| Coward  |  | Terri   |                         | D                      |            |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |
| 165 Graham St   |  | Stratford   |                         | CT                     | 06615-5536 |
| Principal Occupation  |  | Name of Employer  |                         |                        |            |
| Treasurer   |  | City of Bridgeport  |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         | \$500.00               |            |
| Is this contribution associated with an event reported in Section I.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative        |                         |                        |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                        |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/24/2017  | \$500.00                |                        |            |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>                               | \$2,000.00   |
| <b>TOTAL of Section B Pages</b>                                     | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b> | \$182,255.00 |
| <i>(Enter total on Line 13, Column A of Summary Page)</i>           |              |

|   |  |   |                    |                           |            |
|---|--|---|--------------------|---------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |                    | TYPE OF REPORT            |            |
| Ganim for Bridgeport '19  |  |   |                    | April 10 filing           |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |                    | <b>Subtotal Section A</b> |            |
|   |  |   |                    | \$0.00                    |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                    |                           |            |
| Last Name   |  | First   |                    | M.I.                      |            |
| Cuda  |  | Gabriel   |                    |                           |            |
| Residential Street Address  |  | City  |                    | State                     | Zip Code   |
| 500 River Rd  |  | Stratford   |                    | CT                        | 06614-8827 |
| Principal Occupation<br>Information Requested   |  |   | Name of Employer   |                           |            |
|   |  |   | Self               |                           |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                    | Amount of Contribution    |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                    | \$100.00                  |            |
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                    |                           |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |                    |                           |            |
| Method of contribution:   |  |   | Date Received      | Aggregate contributions   |            |
| <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/16/2017         | \$100.00                  |            |
| Last Name   |  | First   |                    | M.I.                      |            |
| Cummings  |  | William   |                    |                           |            |
| Residential Street Address  |  | City  |                    | State                     | Zip Code   |
| 1511 Essex Rd   |  | Westbrook   |                    | CT                        | 06498-1571 |
| Principal Occupation<br>VP Operations   |  |   | Name of Employer   |                           |            |
|   |  |   | Hocon              |                           |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                    | Amount of Contribution    |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                    | \$250.00                  |            |
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                    |                           |            |
| <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |                    |                           |            |
| Method of contribution:   |  |   | Date Received      | Aggregate contributions   |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/20/2017         | \$250.00                  |            |
| Last Name   |  | First   |                    | M.I.                      |            |
| Curry   |  | Carolanne   |                    |                           |            |
| Residential Street Address  |  | City  |                    | State                     | Zip Code   |
| 29 Hiawatha Lane Ext  |  | Westport  |                    | CT                        | 06880-5812 |
| Principal Occupation<br>Information Requested   |  |   | Name of Employer   |                           |            |
|   |  |   | City of Bridgeport |                           |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                    | Amount of Contribution    |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                    | \$500.00                  |            |
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                    |                           |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |                    |                           |            |
| Method of contribution:   |  |   | Date Received      | Aggregate contributions   |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/17/2017         | \$500.00                  |            |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>   | \$850.00     |
| <b>TOTAL of Section B Pages</b>   | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |  |                               |            |
|---|--|---|--|-------------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |  | TYPE OF REPORT                |            |
| Ganim for Bridgeport '19  |  |   |  | April 10 filing               |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |  | <b>Subtotal Section A</b>     |            |
|   |  |   |  | <b>\$0.00</b>                 |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |  |                               |            |
| Last Name   |  | First   |  | M.I.                          |            |
| DaCruz  |  | Joseph  |  | M                             |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| PO Box 16   |  | Farmington  |  | CT                            | 06034-0016 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| PM  |  | CORE  |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |  | <b>\$1,000.00</b>             |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |  |                               |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$1,000.00                    |            |
| Last Name   |  | First   |  | M.I.                          |            |
| Davis   |  | Michele   |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 11 Valley View Rd   |  | Trumbull  |  | CT                            | 06611-3811 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Comptroller   |  | Sound Development   |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |  | <b>\$200.00</b>               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |  |                               |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/21/2017  |  | \$200.00                      |            |
| Last Name   |  | First   |  | M.I.                          |            |
| Deangelis   |  | Lawrence  |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 20 Southfield Rd  |  | Easton  |  | CT                            | 06612-1737 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Contractor  |  | 49 Deerfield St LLC   |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |  | <b>\$1,000.00</b>             |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |  |                               |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/21/2017  |  | \$1,000.00                    |            |

|  |                     |
|--|---------------------|
| <b>SUBTOTAL Section B - This Page</b>  | <b>\$2,200.00</b>   |
| <b>TOTAL of Section B Pages</b>  | <b>\$182,255.00</b> |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | <b>\$182,255.00</b> |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |                         |                               |            |
|---|--|---|-------------------------|-------------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |                         | TYPE OF REPORT                |            |
| Ganim for Bridgeport '19  |  |   |                         | April 10 filing               |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |                         | <b>Subtotal Section A</b>     |            |
|   |  |   |                         | <b>\$0.00</b>                 |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                         |                               |            |
| Last Name   |  | First   |                         | M.I.                          |            |
| DeFusco   |  | Leopold   |                         |                               |            |
| Residential Street Address  |  | City  |                         | State                         | Zip Code   |
| 35 Catherine St   |  | Trumbull  |                         | CT                            | 06611-2403 |
| Principal Occupation  |  |   | Name of Employer        |                               |            |
| Attorney  |  |   | self                    |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                               |            |
| Is this contribution associated with an event reported in Section L1?<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                         |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                         | <b>\$200.00</b>               |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                               |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/03/2017  | \$200.00                |                               |            |
| Last Name   |  | First   |                         | M.I.                          |            |
| DeJesus   |  | Isolina   |                         |                               |            |
| Residential Street Address  |  | City  |                         | State                         | Zip Code   |
| 33 Court A, # 129   |  | Bridgeport  |                         | CT                            | 06610-3352 |
| Principal Occupation  |  |   | Name of Employer        |                               |            |
| Administration  |  |   | City of Bridgeport      |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                               |            |
| Is this contribution associated with an event reported in Section L1?<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                         |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                         | <b>\$500.00</b>               |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                               |            |
| <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/31/2017  | \$500.00                |                               |            |
| Last Name   |  | First   |                         | M.I.                          |            |
| Delgado   |  | Frank   |                         |                               |            |
| Residential Street Address  |  | City  |                         | State                         | Zip Code   |
| 83 Bonnie View Dr   |  | Trumbull  |                         | CT                            | 06611-4701 |
| Principal Occupation  |  |   | Name of Employer        |                               |            |
| Information Requested   |  |   | Information Requested   |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                               |            |
| Is this contribution associated with an event reported in Section L1?<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                         |                               |            |
| <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                         | <b>\$100.00</b>               |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                               |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/17/2017  | \$100.00                |                               |            |

|  |                     |
|--|---------------------|
| <b>SUBTOTAL Section B - This Page</b>  | <b>\$800.00</b>     |
| <b>TOTAL of Section B Pages</b>  | <b>\$182,255.00</b> |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | <b>\$182,255.00</b> |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |  |                               |            |
|---|--|---|--|-------------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |  | TYPE OF REPORT                |            |
| Ganim for Bridgeport '19  |  |   |  | April 10 filing               |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |  | Subtotal Section A            |            |
|   |  |   |  | \$0.00                        |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |  |                               |            |
| Last Name   |  | First   |  | M.I.                          |            |
| Demoura   |  | Jose  |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 24 Moose Hill Rd  |  | Shelton   |  | CT                            | 06484-3446 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| foreman   |  | City of Bridgeport  |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |  | <b>\$250.00</b>               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |  |                               |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$250.00                      |            |
| Last Name   |  | First   |  | M.I.                          |            |
| DePara  |  | Angel   |  | M                             |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 332 Wells St, Apt 104   |  | Bridgeport  |  | CT                            | 06606-5465 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| CAO Office  |  | City of Bridgeport  |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |  | <b>\$500.00</b>               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |  |                               |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$500.00                      |            |
| Last Name   |  | First   |  | M.I.                          |            |
| DePino  |  | Chris   |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 68 Cosey Beach Ave  |  | East Haven  |  | CT                            | 06512-4948 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Lobbyist  |  | Depino, Nunez, Biggs LLC  |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |  | <b>\$100.00</b>               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |  |                               |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$100.00                      |            |

|  |                     |
|--|---------------------|
| <b>SUBTOTAL Section B - This Page</b>  | <b>\$850.00</b>     |
| <b>TOTAL of Section B Pages</b>  | <b>\$182,255.00</b> |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | <b>\$182,255.00</b> |

I. MONETARY RECEIPTS (Sections A-K)

|  |  |   |                                       |
|--|--|---|---------------------------------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)   |  | TYPE OF REPORT  |                                       |
| Ganim for Bridgeport '19   |  | April 10 filing   |                                       |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)  |  | Subtotal Section A \$0.00   |                                       |
| <b>B. Itemized Contributions from Individuals</b>  |  |   |                                       |
| Last Name<br>DeVuono   |  | First<br>Giuliana   |                                       |
| Residential Street Address<br>294 Bronxville Rd  |  | City<br>Bronxville  | State<br>NY                           |
| Principal Occupation<br>Stylist  |  | Name of Employer<br>John Barrett  |                                       |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |                                       |
| Is this contribution associated with an event reported in Section L.1?<br>If yes, list Event #<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No                          |                                       |
| Method of contribution:<br><input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | Date Received<br>03/22/2017   | Aggregate contributions<br>\$1,000.00 |
| Last Name<br>Dickerson   |  | First<br>Brian  |                                       |
| Residential Street Address<br>98 Hillside Ln   |  | City<br>Monroe  | State<br>CT                           |
| Principal Occupation<br>Information Requested  |  | Name of Employer<br>Information Requested   |                                       |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |                                       |
| Is this contribution associated with an event reported in Section L.1?<br>If yes, list Event #<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No                          |                                       |
| Method of contribution:<br><input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | Date Received<br>03/23/2017   | Aggregate contributions<br>\$500.00   |
| Last Name<br>Digennaro   |  | First<br>Philip   |                                       |
| Residential Street Address<br>607 Fairfield Beach Rd   |  | City<br>Fairfield   | State<br>CT                           |
| Principal Occupation<br>Information Requested  |  | Name of Employer<br>Self  |                                       |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |                                       |
| Is this contribution associated with an event reported in Section L.1?<br>If yes, list Event #<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No                          |                                       |
| Method of contribution:<br><input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | Date Received<br>03/15/2017   | Aggregate contributions<br>\$1,000.00 |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>   | \$2,500.00   |
| <b>TOTAL of Section B Pages</b>   | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |  |                               |            |
|---|--|---|--|-------------------------------|------------|
| NAME OF COMMITTEE <i>(Provide Complete Name as Registered with Filing Repository)</i>   |  |   |  | TYPE OF REPORT                |            |
| Ganim for Bridgeport '19  |  |   |  | April 10 filing               |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br><i>(See instructions for definition of Small Contributor)</i>  |  |   |  | <b>Subtotal Section A</b>     |            |
|   |  |   |  | <b>\$0.00</b>                 |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |  |                               |            |
| Last Name   |  | First   |  | MI                            |            |
| DiLuca  |  | Sylvia  |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 1415 Wood Ave   |  | Bridgeport  |  | CT                            | 06604-1426 |
| Principal Occupation<br>Information Requested   |  |   | Name of Employer                               |                               |            |
|   |  |   | City of Bridgeport                             |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <b>\$200.00</b>               |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |  |                               |            |
| Method of contribution:   |  |   | Date Received                                  | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/21/2017                                     | \$200.00                      |            |
| Last Name   |  | First   |  | MI                            |            |
| DiMarco   |  | John  |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 25 Craig Ln   |  | Trumbull  |  | CT                            | 06611-4405 |
| Principal Occupation<br>Baker   |  |   | Name of Employer<br>Luigi's Italian Pastry Inc |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |  | <b>\$500.00</b>               |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |  |                               |            |
| Method of contribution:   |  |   | Date Received                                  | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/23/2017                                     | \$500.00                      |            |
| Last Name   |  | First   |  | MI                            |            |
| DiNardo   |  | Nancy   |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 61 Suzanne Cir  |  | Trumbull  |  | CT                            | 06611-4537 |
| Principal Occupation<br>Information Requested   |  |   | Name of Employer<br>retired                    |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <b>\$250.00</b>               |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |  |                               |            |
| Method of contribution:   |  |   | Date Received                                  | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/23/2017                                     | \$250.00                      |            |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$950.00     |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |  |   |            |
|---|--|---|--|---|------------|
| NAME OF COMMITTEE <i>(Provide Complete Name as Registered with Filing Repository)</i>   |  |   |  | TYPE OF REPORT                                  |            |
| Ganim for Bridgeport '19  |  |   |  | April 10 filing                                 |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br><i>(See instructions for definition of Small Contributor)</i>  |  |   |  | Subtotal Section A                              |            |
|   |  |   |  | \$0.00  |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |  |   |            |
| Last Name   |  | First   |  | M.I.  |            |
| Dippolito   |  | Charles   |  |   |            |
| Residential Street Address  |  | City  |  | State   | Zip Code   |
| 1615 Mayflower Ave  |  | Bronx   |  | NY  | 10461-4817 |
| Principal Occupation  |  | Name of Employer  |  |   |            |
| President   |  | Approved Medical Waste  |  |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b><br><br>\$1,000.00 |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |   |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |  |   |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions                         |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/24/2017  |  | \$1,000.00                                      |            |
| Last Name   |  | First   |  | M.I.  |            |
| Dippolito   |  | Jeanette  |  |   |            |
| Residential Street Address  |  | City  |  | State   | Zip Code   |
| 1615 Mayflower Ave  |  | Bronx   |  | NY  | 10461-4817 |
| Principal Occupation  |  | Name of Employer  |  |   |            |
| Teacher   |  | Norwich City BOE  |  |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b><br><br>\$1,000.00 |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |   |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |  |   |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions                         |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/24/2017  |  | \$1,000.00                                      |            |
| Last Name   |  | First   |  | M.I.  |            |
| DiSanto   |  | Carmela   |  |   |            |
| Residential Street Address  |  | City  |  | State   | Zip Code   |
| 80 Woodlawn Rd  |  | Monroe  |  | CT  | 06468-2136 |
| Principal Occupation  |  | Name of Employer  |  |   |            |
| Information Requested   |  | Information Requested   |  |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b><br><br>\$100.00   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |   |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |  |   |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions                         |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$100.00  |            |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$2,100.00   |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|  |   |  |   |
|--|---|--|---|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)   |   | TYPE OF REPORT                                 |   |
| Ganim for Bridgeport '19   |   | April 10 filing                                |   |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)  |   | Subtotal Section A                             |   |
|  |   | \$0.00   |   |
| <b>B. Itemized Contributions from Individuals</b>  |   |  |   |
| Last Name<br>Dorio   |   | First<br>Joan                                  |   |
| Residential Street Address<br>946 Shuttle Meadow Rd  |   | City<br>Southington                            | State<br>CT                                     |
| Principal Occupation<br>Receptionist   |   | Name of Employer<br>Construction Resources INC |   |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |  | <b>Amount of Contribution</b><br><br>\$1,000.00 |
| Is this contribution associated with an event reported in Section L1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No                          |  |   |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |   | Date Received<br>03/23/2017                    |   |
| Last Name<br>Dowling   |   | First<br>Sanford                               |   |
| Residential Street Address<br>100 Parrott Dr, Unit 713   |   | City<br>Shelton                                | State<br>CT                                     |
| Principal Occupation<br>Police Officer   |   | Name of Employer<br>Town of Stratford          |   |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |  | <b>Amount of Contribution</b><br><br>\$200.00   |
| Is this contribution associated with an event reported in Section L1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No                          |  |   |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |   | Date Received<br>03/23/2017                    |   |
| Last Name<br>Driscoll  |   | First<br>Maureen                               |   |
| Residential Street Address<br>1959 N Benson Rd   |   | City<br>Fairfield                              | State<br>CT                                     |
| Principal Occupation<br>Attorney   |   | Name of Employer<br>Self                       |   |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No |  | <b>Amount of Contribution</b><br><br>\$1,000.00 |
| Is this contribution associated with an event reported in Section L1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No                          |  |   |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |   | Date Received<br>03/23/2017                    |   |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>   | \$2,200.00   |
| <b>TOTAL of Section B Pages</b>   | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |  |                               |            |
|---|--|---|--|-------------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |  | TYPE OF REPORT                |            |
| Ganim for Bridgeport '19  |  |   |  | April 10 filing               |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |  | <b>Subtotal Section A</b>     |            |
|   |  |   |  | <b>\$0.00</b>                 |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |  |                               |            |
| Last Name   |  | First   |  | M.I.                          |            |
| Drury   |  | Michael   |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 23 Concord Ave  |  | Milford   |  | CT                            | 06460-4112 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| City of Bridgeport  |  | Supervisor / Machinist  |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section I.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |  | <b>\$300.00</b>               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |  |                               |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/16/2017  |  | \$300.00                      |            |
| Last Name   |  | First   |  | M.I.                          |            |
| Duby  |  | Christopher   |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 255 Whitney Ave, # 203  |  | Hamden  |  | CT                            | 06511-3728 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Attorney  |  | Self  |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section I.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |  | <b>\$500.00</b>               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |  |                               |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$500.00                      |            |
| Last Name   |  | First   |  | M.I.                          |            |
| Duffin  |  | John  |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 2675 Park Ave, Unit 7   |  | Bridgeport  |  | CT                            | 06604-1357 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Sales   |  | Media Merce   |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section I.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |  | <b>\$100.00</b>               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |  |                               |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions       |            |
| <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$100.00                      |            |

|  |                     |
|--|---------------------|
| <b>Subtotal Section B - This Page</b>  | <b>\$900.00</b>     |
| <b>TOTAL of Section B Pages</b>  | <b>\$182,255.00</b> |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | <b>\$182,255.00</b> |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |                         |
|---|--|---|-------------------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  | TYPE OF REPORT  |                         |
| Ganim for Bridgeport '19  |  | April 10 filing   |                         |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  | Subtotal Section A  |                         |
|   |  | \$0.00  |                         |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                         |
| Last Name   |  | First   |                         |
| Dunn  |  | David   |                         |
| Residential Street Address  |  | City  | State                   |
| 484 Curtis Ave  |  | Stratford   | CT                      |
| Principal Occupation  |  | Name of Employer  |                         |
| Director  |  | City of Bridgeport  |                         |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |                         |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative           |                         |
| Method of contribution:   |  | Date Received   | Aggregate contributions |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/08/2017  | \$1,000.00              |
| Last Name   |  | First   |                         |
| Eastman   |  | Brian   |                         |
| Residential Street Address  |  | City  | State                   |
| 113 Wyldewood Rd  |  | Easton  | CT                      |
| Principal Occupation  |  | Name of Employer  |                         |
| Asphalt maintenance   |  | self employed   |                         |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |                         |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative           |                         |
| Method of contribution:   |  | Date Received   | Aggregate contributions |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/22/2017  | \$500.00                |
| Last Name   |  | First   |                         |
| Epstein   |  | Juda  |                         |
| Residential Street Address  |  | City  | State                   |
| 245 Wilson St   |  | Fairfield   | CT                      |
| Principal Occupation  |  | Name of Employer  |                         |
| Lawyer  |  | Self  |                         |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |                         |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative           |                         |
| Method of contribution:   |  | Date Received   | Aggregate contributions |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/22/2017  | \$1,000.00              |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>   | \$2,500.00   |
| <b>TOTAL of Section B Pages</b>   | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |                         |                        |            |
|---|--|---|-------------------------|------------------------|------------|
| NAME OF COMMITTEE <i>(Provide Complete Name as Registered with Filing Repository)</i>   |  |   |                         | TYPE OF REPORT         |            |
| Ganim for Bridgeport '19  |  |   |                         | April 10 filing        |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br><i>(See instructions for definition of Small Contributor)</i>  |  |   |                         | Subtotal Section A     |            |
|   |  |   |                         | \$0.00                 |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                         |                        |            |
| Last Name   |  | First   |                         | MI                     |            |
| Ericson   |  | Robert  |                         | W                      |            |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |
| 64 Michigan Rd  |  | New Canaan  |                         | CT                     | 06840-2218 |
| Principal Occupation  |  | Name of Employer  |                         |                        |            |
| Attorney  |  | New Day Aluminum  |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         | \$1,000.00             |            |
| Is this contribution associated with an event reported in Section L1?<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |                         |                        |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                        |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  | \$1,000.00              |                        |            |
| Last Name   |  | First   |                         | MI                     |            |
| Estephan  |  | Doris   |                         |                        |            |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |
| 1559 Laurel Ave   |  | Bridgeport  |                         | CT                     | 06604-1514 |
| Principal Occupation  |  | Name of Employer  |                         |                        |            |
| Payroll Clerk II  |  | Board of Education Nutrition Center   |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         | \$250.00               |            |
| Is this contribution associated with an event reported in Section L1?<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |                         |                        |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                        |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  | \$250.00                |                        |            |
| Last Name   |  | First   |                         | MI                     |            |
| Eucalitto   |  | Susan   |                         | L                      |            |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |
| 55 Proprietors Ln   |  | Torrington  |                         | CT                     | 06790-8602 |
| Principal Occupation  |  | Name of Employer  |                         |                        |            |
| Information Requested   |  | Information Requested   |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         | \$1,000.00             |            |
| Is this contribution associated with an event reported in Section L1?<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |                         |                        |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                        |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/21/2017  | \$1,000.00              |                        |            |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$2,250.00   |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|  |  |  |  |  |                               |
|--|--|--|--|--|-------------------------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)   |  |  | TYPE OF REPORT                               |  |                               |
| Ganim for Bridgeport '19   |  |  | April 10 filing                              |  |                               |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)  |  |  | Subtotal Section A <b>\$0.00</b>             |  |                               |
| <b>B. Itemized Contributions from Individuals</b>  |  |  |  |  |                               |
| Last Name<br><b>Farrow</b>   |  | First<br><b>Edwin</b>  |  | M.I.<br>   |                               |
| Residential Street Address<br><b>357 Pearl St. Apt 5</b>   |  | City<br><b>Bridgeport</b>  |  | State<br><b>CT</b>                                     | Zip Code<br><b>06608-1227</b> |
| Principal Occupation<br><b>Attorney</b>  |  | Name of Employer<br><b>The Marcus Law Firm</b>   |  |  |                               |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |  | <b>Amount of Contribution</b><br><br><b>\$250.00</b>   |                               |
| Is this contribution associated with an event reported in Section I.1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No                      |  |  |                               |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received<br><b>03/23/2017</b>   | Aggregate contributions<br><b>\$250.00</b>   |  |                               |
| Last Name<br><b>Fedick</b>   |  | First<br><b>Lisa</b>   |  | M.I.<br><b>A</b>                                       |                               |
| Residential Street Address<br><b>51 Bartling Dr</b>  |  | City<br><b>Easton</b>  |  | State<br><b>CT</b>                                     | Zip Code<br><b>06612-2006</b> |
| Principal Occupation<br><b>Business Owner/General Mgr</b>  |  | Name of Employer<br><b>Wonderland of Ice Assoc</b>   |  |  |                               |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  | <b>Amount of Contribution</b><br><br><b>\$1,000.00</b> |                               |
| Is this contribution associated with an event reported in Section I.1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No                      |  |  |                               |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received<br><b>03/23/2017</b>   | Aggregate contributions<br><b>\$1,000.00</b> |  |                               |
| Last Name<br><b>Ferreri</b>  |  | First<br><b>Michael</b>  |  | M.I.<br>   |                               |
| Residential Street Address<br><b>106 Valley View Ct</b>  |  | City<br><b>Southington</b>   |  | State<br><b>CT</b>                                     | Zip Code<br><b>06489-3888</b> |
| Principal Occupation<br><b>Insurance</b>   |  | Name of Employer<br><b>Corporate Risk Solutions</b>  |  |  |                               |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  | <b>Amount of Contribution</b><br><br><b>\$250.00</b>   |                               |
| Is this contribution associated with an event reported in Section I.1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No                      |  |  |                               |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received<br><b>03/22/2017</b>   | Aggregate contributions<br><b>\$250.00</b>   |  |                               |

|   |                     |
|---|---------------------|
| <b>SUBTOTAL Section B - This Page</b>                               | <b>\$1,500.00</b>   |
| <b>TOTAL of Section B Pages</b>                                     | <b>\$182,255.00</b> |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b> | <b>\$182,255.00</b> |
| <i>(Enter total on Line 13, Column A of Summary Page)</i>           |                     |

**I. MONETARY RECEIPTS (Sections A-K)**

|  |   |   |  |
|--|---|---|--|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)   |   | TYPE OF REPORT                                |  |
| Ganim for Bridgeport '19   |   | April 10 filing                               |  |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)  |   | <b>Subtotal Section A</b> \$0.00              |  |
| <b>B. Itemized Contributions from Individuals</b>  |   |   |  |
| Last Name<br><b>Fitzgerald</b>   |   | First<br><b>Christin</b>                      | M.I.   |
| Residential Street Address<br><b>38 Gibson Ave</b>   |   | City<br><b>Trumbull</b>                       | State<br><b>CT</b> Zip Code<br><b>06611-3736</b> |
| Principal Occupation<br><b>Police Captain</b>  |   | Name of Employer<br><b>City of Bridgeport</b> |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |   | <b>Amount of Contribution</b><br><br>\$250.00    |
| Is this contribution associated with an event reported in Section I.1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No                      |   |  |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |   | Date Received<br><b>03/29/2017</b>            | Aggregate contributions<br><b>\$250.00</b>       |
| Last Name<br><b>Flatto</b>   |   | First<br><b>Kenneth</b>                       | M.I.   |
| Residential Street Address<br><b>3200 Park Ave, 2D1</b>  |   | City<br><b>Bridgeport</b>                     | State<br><b>CT</b> Zip Code<br><b>06604-1124</b> |
| Principal Occupation<br><b>Manager</b>   |   | Name of Employer<br><b>City of Bridgeport</b> |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |   | <b>Amount of Contribution</b><br><br>\$500.00    |
| Is this contribution associated with an event reported in Section I.1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No                      |   |  |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |   | Date Received<br><b>03/06/2017</b>            | Aggregate contributions<br><b>\$1,000.00</b>     |
| Last Name<br><b>Flatto</b>   |   | First<br><b>Kenneth</b>                       | M.I.   |
| Residential Street Address<br><b>3200 Park Ave, 2D1</b>  |   | City<br><b>Bridgeport</b>                     | State<br><b>CT</b> Zip Code<br><b>06604-1124</b> |
| Principal Occupation<br><b>Manager</b>   |   | Name of Employer<br><b>City of Bridgeport</b> |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |   | <b>Amount of Contribution</b><br><br>\$500.00    |
| Is this contribution associated with an event reported in Section I.1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No                      |   |  |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |   | Date Received<br><b>03/23/2017</b>            | Aggregate contributions<br><b>\$1,000.00</b>     |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$1,250.00   |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |                         |                               |            |
|---|--|---|-------------------------|-------------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |                         | TYPE OF REPORT                |            |
| Ganim for Bridgeport '19  |  |   |                         | April 10 filing               |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |                         | <b>Subtotal Section A</b>     |            |
|   |  |   |                         | <b>\$0.00</b>                 |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                         |                               |            |
| Last Name   |  | First   |                         | M.I.                          |            |
| Foldy   |  | Thomas  |                         | F                             |            |
| Residential Street Address  |  | City  |                         | State                         | Zip Code   |
| 326 Folino Dr   |  | Bridgeport  |                         | CT                            | 06606-1014 |
| Principal Occupation  |  | Name of Employer  |                         |                               |            |
| State Marshal   |  | Self  |                         |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                               |            |
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                         |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                         | <b>\$1,000.00</b>             |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                               |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/22/2017  | \$1,000.00              |                               |            |
| Last Name   |  | First   |                         | M.I.                          |            |
| Framularo   |  | Nicholas  |                         | G                             |            |
| Residential Street Address  |  | City  |                         | State                         | Zip Code   |
| 2900 Main St, 2B  |  | Stratford   |                         | CT                            | 06614-4946 |
| Principal Occupation  |  | Name of Employer  |                         |                               |            |
| Attorney  |  | Self  |                         |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                               |            |
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                         |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                         | <b>\$100.00</b>               |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                               |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/17/2017  | \$100.00                |                               |            |
| Last Name   |  | First   |                         | M.I.                          |            |
| Franco  |  | Tony  |                         | R                             |            |
| Residential Street Address  |  | City  |                         | State                         | Zip Code   |
| 63 Catherine St   |  | Trumbull  |                         | CT                            | 06611-2403 |
| Principal Occupation  |  | Name of Employer  |                         |                               |            |
| Information Requested   |  | Information Requested   |                         |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                               |            |
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                         |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                         | <b>\$100.00</b>               |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                               |            |
| <input checked="" type="checkbox"/> Cash<br><input type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/16/2017  | \$100.00                |                               |            |

|  |                     |
|--|---------------------|
| <b>SUBTOTAL Section B - This Page</b>  | <b>\$1,200.00</b>   |
| <b>TOTAL of Section B Pages</b>  | <b>\$182,255.00</b> |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | <b>\$182,255.00</b> |

I. MONETARY RECEIPTS (Sections A-K)

|  |   |   |  |
|--|---|---|--|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)   |   | TYPE OF REPORT                                      |  |
| Ganim for Bridgeport '19   |   | April 10 filing                                     |  |
| A. Total Contributions from Small Contributors - Received this Period ONLY<br>(See instructions for definition of Small Contributor)   |   | Subtotal Section A \$0.00                           |  |
| <b>B. Itemized Contributions from Individuals</b>  |   |   |  |
| Last Name<br>Freeman   |   | First<br>Deborah                                    |  |
| Residential Street Address<br>18 Avery Cir   |   | City<br>New Milford                                 | State<br>CT                            |
| Principal Occupation<br>Retired  |   | Name of Employer<br>Retired                         |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No     |   | Amount of Contribution<br><br>\$25.00  |
| Is this contribution associated with an event reported in Section I.I?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #   | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |   |  |
| Method of contribution:<br><input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |   | Date Received<br>03/31/2017                         |  |
| Last Name<br>Fries   |   | First<br>Mark                                       |  |
| Residential Street Address<br>31 Zoar Rd   |   | City<br>Sandy Hook                                  | State<br>CT                            |
| Principal Occupation<br>Insurance Sales  |   | Name of Employer<br>Peoples United Insurance Agency |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No     |   | Amount of Contribution<br><br>\$500.00 |
| Is this contribution associated with an event reported in Section I.I?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #   | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |   |  |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |   | Date Received<br>03/23/2017                         |  |
| Last Name<br>Gad   |   | First<br>Albert                                     |  |
| Residential Street Address<br>845 United Nations Plz, Apt 50E  |   | City<br>New York                                    | State<br>NY                            |
| Principal Occupation<br>Information Requested  |   | Name of Employer<br>Information Requested           |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No     |   | Amount of Contribution<br><br>\$500.00 |
| Is this contribution associated with an event reported in Section I.I?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #   | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |   |  |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |   | Date Received<br>03/22/2017                         |  |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>   | \$1,025.00   |
| <b>TOTAL of Section B Pages</b>   | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |                       |                               |            |
|---|--|---|-----------------------|-------------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |                       | TYPE OF REPORT                |            |
| Ganim for Bridgeport '19  |  |   |                       | April 10 filing               |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |                       | <b>Subtotal Section A</b>     |            |
|   |  |   |                       | <b>\$0.00</b>                 |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                       |                               |            |
| Last Name   |  | First   |                       | MI                            |            |
| Gagliardi   |  | John  |                       |                               |            |
| Residential Street Address  |  | City  |                       | State                         | Zip Code   |
| 30 Poplar Hill Dr   |  | Farmington  |                       | CT                            | 06032-2419 |
| Principal Occupation  |  |   | Name of Employer      |                               |            |
| Information Requested   |  |   | Information Requested |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                       | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                       |                               |            |
| Is this contribution associated with an event reported in Section L.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |                       | <b>\$1,000.00</b>             |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |                       |                               |            |
| Method of contribution:   |  |   | Date Received         | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/24/2017            | <b>\$1,000.00</b>             |            |
| Last Name   |  | First   |                       | MI                            |            |
| Gaglio  |  | Anthony   |                       |                               |            |
| Residential Street Address  |  | City  |                       | State                         | Zip Code   |
| 75 Haviland Rd  |  | Stamford  |                       | CT                            | 06903-3328 |
| Principal Occupation  |  |   | Name of Employer      |                               |            |
| President   |  |   | Viking Construction   |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                       | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                       |                               |            |
| Is this contribution associated with an event reported in Section L.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |                       | <b>\$1,000.00</b>             |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |                       |                               |            |
| Method of contribution:   |  |   | Date Received         | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/23/2017            | <b>\$1,000.00</b>             |            |
| Last Name   |  | First   |                       | MI                            |            |
| Gaglio  |  | Anthony   |                       |                               |            |
| Residential Street Address  |  | City  |                       | State                         | Zip Code   |
| 72 Little Hill Dr   |  | Stamford  |                       | CT                            | 06905-2319 |
| Principal Occupation  |  |   | Name of Employer      |                               |            |
| VP  |  |   | Viking Construction   |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                       | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                       |                               |            |
| Is this contribution associated with an event reported in Section L.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |                       | <b>\$500.00</b>               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |                       |                               |            |
| Method of contribution:   |  |   | Date Received         | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/23/2017            | <b>\$500.00</b>               |            |

|   |                     |
|---|---------------------|
| <b>SUBTOTAL Section B - This Page</b>                               | <b>\$2,500.00</b>   |
| <b>TOTAL of Section B Pages</b>                                     | <b>\$182,255.00</b> |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b> | <b>\$182,255.00</b> |
| <i>(Enter total on Line 13, Column A of Summary Page)</i>           |                     |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |   |  |                         |
|---|--|---|---|--|-------------------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |   | TYPE OF REPORT   |                         |
| Ganim for Bridgeport '19  |  |   |   | April 10 filing  |                         |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |   | <b>Subtotal Section A</b>                              |                         |
|   |  |   |   | <b>\$0.00</b>  |                         |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |   |  |                         |
| Last Name   |  | First   |   | M.I.   |                         |
| Ganim   |  | George  |   |  |                         |
| Residential Street Address  |  | City  |   | State  | Zip Code                |
| 4666 Main St  |  | Bridgeport  |   | CT   | 06606-1839              |
| Principal Occupation<br>Information Requested   |  |   | Name of Employer<br>Information Requested |  |                         |
|   |  |   |   |  |                         |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |   | <b>Amount of Contribution</b><br><br><b>\$1,000.00</b> |                         |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |   |  |                         |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |   |  |                         |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |   |  |                         |
| Method of contribution:   |  |   |   | Date Received  | Aggregate contributions |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   |   | 03/16/2017   | \$1,000.00              |
| Last Name   |  | First   |   | M.I.   |                         |
| Ganim   |  | Josephine   |   |  |                         |
| Residential Street Address  |  | City  |   | State  | Zip Code                |
| 130 Center Rd   |  | Easton  |   | CT   | 06612-1353              |
| Principal Occupation  |  |   | Name of Employer                          |  |                         |
| Homemaker   |  |   | none/homemaker                            |  |                         |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |   | <b>Amount of Contribution</b><br><br><b>\$500.00</b>   |                         |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |   |  |                         |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |   |  |                         |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |   |  |                         |
| Method of contribution:   |  |   |   | Date Received  | Aggregate contributions |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   |   | 03/23/2017   | \$500.00                |
| Last Name   |  | First   |   | M.I.   |                         |
| Garcia  |  | Alyssa Rose   |   |  |                         |
| Residential Street Address  |  | City  |   | State  | Zip Code                |
| 72 Brookdale Rd   |  | Seymour   |   | CT   | 06483-2430              |
| Principal Occupation  |  |   | Name of Employer                          |  |                         |
| Accounting  |  |   | City of Bridgeport                        |  |                         |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |   | <b>Amount of Contribution</b><br><br><b>\$500.00</b>   |                         |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |   |  |                         |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |   |  |                         |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |   |  |                         |
| Method of contribution:   |  |   |   | Date Received  | Aggregate contributions |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   |   | 03/21/2017   | \$500.00                |

|  |                     |
|--|---------------------|
| <b>SUBTOTAL Section B - This Page</b>  | <b>\$2,000.00</b>   |
| <b>TOTAL of Section B Pages</b>  | <b>\$182,255.00</b> |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | <b>\$182,255.00</b> |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |                 |
|---|--|-----------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  | TYPE OF REPORT  |
| Ganim for Bridgeport '19  |  | April 10 filing |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor) |  |                 |
| Subtotal Section A  |  | \$0.00          |

| B. Itemized Contributions from Individuals   |   |   |  |
|--|---|---|--|
| Last Name<br>Garcia  |   | First<br>Marissa                          |  |
| Residential Street Address<br>72 Brookdale Rd  |   | City<br>Seymour                           | State<br>CT                              |
| Principal Occupation<br>RN   |   | Name of Employer<br>B.O.E Bridgeport      |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |   | Amount of Contribution<br><br>\$1,000.00 |
| Is this contribution associated with an event reported in Section L1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No                                |   |  |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |   | Date Received<br>03/22/2017               |  |
| Last Name<br>Garcia  |   | First<br>Norma                            |  |
| Residential Street Address<br>780 Colorado Ave, Fl 1   |   | City<br>Bridgeport                        | State<br>CT                              |
| Principal Occupation<br>Information Requested  |   | Name of Employer<br>Information Requested |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |   | Amount of Contribution<br><br>\$100.00   |
| Is this contribution associated with an event reported in Section L1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No                                |   |  |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |   | Date Received<br>03/17/2017               |  |
| Last Name<br>Garcia  |   | First<br>Ramon                            |  |
| Residential Street Address<br>72 Brookdale Rd  |   | City<br>Seymour                           | State<br>CT                              |
| Principal Occupation<br>Detective  |   | Name of Employer<br>City of Bridgeport    |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |   | Amount of Contribution<br><br>\$1,000.00 |
| Is this contribution associated with an event reported in Section L1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No                                |   |  |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |   | Date Received<br>03/17/2017               |  |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>                               | \$2,100.00   |
| <b>TOTAL of Section B Pages</b>                                     | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b> | \$182,255.00 |
| <i>(Enter total on Line 13, Column A of Summary Page)</i>           |              |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |                         |                        |            |
|---|--|---|-------------------------|------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |                         | TYPE OF REPORT         |            |
| Ganim for Bridgeport '19  |  |   |                         | April 10 filing        |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |                         | Subtotal Section A     |            |
|   |  |   |                         | \$0.00                 |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                         |                        |            |
| Last Name   |  | First   |                         | MI                     |            |
| Garcia  |  | Richard   |                         |                        |            |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |
| 782 Colorado Ave, Fl 2  |  | Bridgeport  |                         | CT                     | 06604-2311 |
| Principal Occupation  |  | Name of Employer  |                         |                        |            |
| District Manager  |  | New Haven Housing District Manager  |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         | \$250.00               |            |
| Is this contribution associated with an event reported in Section L1?<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |                         |                        |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                        |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/21/2017  | \$250.00                |                        |            |
| Last Name   |  | First   |                         | MI                     |            |
| Gaudett   |  | Thomas  |                         | J                      |            |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |
| 96 Beechmont Ave  |  | Bridgeport  |                         | CT                     | 06606-4308 |
| Principal Occupation  |  | Name of Employer  |                         |                        |            |
| Mayor's Office  |  | city of Bridgeport  |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         | \$1,000.00             |            |
| Is this contribution associated with an event reported in Section L1?<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                         |                        |            |
| <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |                         |                        |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                        |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 02/20/2017  | \$1,000.00              |                        |            |
| Last Name   |  | First   |                         | MI                     |            |
| Gecewicz  |  | Thomas  |                         |                        |            |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |
| 3900 Park Ave, Unit 7E  |  | Bridgeport  |                         | CT                     | 06604-1032 |
| Principal Occupation  |  | Name of Employer  |                         |                        |            |
| Program Mgr   |  | City of Bridgeport  |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No  |                         | \$500.00               |            |
| Is this contribution associated with an event reported in Section L1?<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |                         |                        |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                        |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/21/2017  | \$500.00                |                        |            |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>   | \$1,750.00   |
| <b>TOTAL of Section B Pages</b>   | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|  |  |   |                                     |
|--|--|---|-------------------------------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)   |  | TYPE OF REPORT  |                                     |
| Ganim for Bridgeport '19   |  | April 10 filing   |                                     |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)  |  | Subtotal Section A \$0.00   |                                     |
| <b>B. Itemized Contributions from Individuals</b>  |  |   |                                     |
| Last Name<br>Gee   |  | First<br>Fred   |                                     |
| Residential Street Address<br>125 Hillcrest Rd   |  | City<br>Bridgeport  | State<br>CT Zip Code<br>06606-3124  |
| Principal Occupation<br>Program Coordinator  |  | Name of Employer<br>City of Bridgeport  |                                     |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |                                     |
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |                                     |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received<br>03/22/2017   | Aggregate contributions<br>\$150.00 |
| Last Name<br>Gerrity   |  | First<br>Ellen  |                                     |
| Residential Street Address<br>167 Stratfield Pl  |  | City<br>Bridgeport  | State<br>CT Zip Code<br>06606-4003  |
| Principal Occupation<br>Payroll Clerk  |  | Name of Employer<br>City of Bridgeport  |                                     |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |                                     |
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |                                     |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received<br>03/15/2017   | Aggregate contributions<br>\$200.00 |
| Last Name<br>Geter   |  | First<br>Wanda  |                                     |
| Residential Street Address<br>93 Gurdon St   |  | City<br>Bridgeport  | State<br>CT Zip Code<br>06606-5032  |
| Principal Occupation<br>Information Requested  |  | Name of Employer<br>City of Bridgeport  |                                     |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |                                     |
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |                                     |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received<br>03/22/2017   | Aggregate contributions<br>\$250.00 |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>   | \$600.00     |
| <b>TOTAL of Section B Pages</b>   | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |                      |                               |            |
|---|--|---|----------------------|-------------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |                      | TYPE OF REPORT                |            |
| Ganim for Bridgeport '19  |  |   |                      | April 10 filing               |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |                      | Subtotal Section A            |            |
|   |  |   |                      | \$0.00                        |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                      |                               |            |
| Last Name   |  | First   |                      | M.I.                          |            |
| Gill  |  | Thomas  |                      | F                             |            |
| Residential Street Address  |  | City  |                      | State                         | Zip Code   |
| 244 Sailors Ln  |  | Bridgeport  |                      | CT                            | 06605-3624 |
| Principal Occupation  |  |   | Name of Employer     |                               |            |
| Director Planning and Economic Devel  |  |   | City of Bridgeport   |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                      | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                      |                               |            |
| Is this contribution associated with an event reported in Section L.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                      |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |                      | \$1,000.00                    |            |
| Method of contribution:   |  | Date Received   |                      |                               |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/15/2017  |                      | \$1,000.00                    |            |
| Last Name   |  | First   |                      | M.I.                          |            |
| Goldberg  |  | Justin  |                      | J                             |            |
| Residential Street Address  |  | City  |                      | State                         | Zip Code   |
| 192 Overlook Rd   |  | New Rochelle  |                      | NY                            | 10804-3806 |
| Principal Occupation  |  |   | Name of Employer     |                               |            |
| Property Mgr  |  |   | Marine Property Mgmt |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                      | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                      |                               |            |
| Is this contribution associated with an event reported in Section L.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                      |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |                      | \$1,000.00                    |            |
| Method of contribution:   |  | Date Received   |                      |                               |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/23/2017  |                      | \$1,000.00                    |            |
| Last Name   |  | First   |                      | M.I.                          |            |
| Golger  |  | Robert  |                      | G                             |            |
| Residential Street Address  |  | City  |                      | State                         | Zip Code   |
| 81 Towerview Dr   |  | Trumbull  |                      | CT                            | 06611-3241 |
| Principal Occupation  |  |   | Name of Employer     |                               |            |
| Information Requested   |  |   | Q&R Associates       |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                      | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                      |                               |            |
| Is this contribution associated with an event reported in Section L.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                      |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |                      | \$500.00                      |            |
| Method of contribution:   |  | Date Received   |                      |                               |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/23/2017  |                      | \$500.00                      |            |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$2,500.00   |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|  |  |
|--|--|
| NAME OF COMMITTEE <i>(Provide Complete Name as Registered with Filing Repository)</i><br><b>Ganim for Bridgeport '19</b> | TYPE OF REPORT<br><b>April 10 filing</b> |
|--|--|

|  |                                  |
|--|----------------------------------|
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br><i>(See instructions for definition of Small Contributor)</i> | Subtotal Section A <b>\$0.00</b> |
|--|----------------------------------|

**B. Itemized Contributions from Individuals**

|                           |                      |      |
|---------------------------|----------------------|------|
| Last Name<br><b>Gomes</b> | First<br><b>John</b> | M.I. |
|---------------------------|----------------------|------|

|  |                           |                    |                               |
|--|---------------------------|--------------------|-------------------------------|
| Residential Street Address<br><b>150 Alpine St</b> | City<br><b>Bridgeport</b> | State<br><b>CT</b> | Zip Code<br><b>06610-1727</b> |
|--|---------------------------|--------------------|-------------------------------|

|                                     |   |
|-------------------------------------|---|
| Principal Occupation<br><b>ACAO</b> | Name of Employer<br><b>City of Bridgeport</b> |
|-------------------------------------|---|

|   |  |                        |
|---|--|------------------------|
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount of Contribution |
|---|--|------------------------|

|  |  |                        |
|--|--|------------------------|
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event # | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with: | Amount of Contribution |
|--|--|------------------------|

|  |                                    |  |
|--|------------------------------------|--|
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order | Date Received<br><b>03/23/2017</b> | Aggregate contributions<br><b>\$1,000.00</b> |
|--|------------------------------------|--|

|                               |                       |      |
|-------------------------------|-----------------------|------|
| Last Name<br><b>Goncalves</b> | First<br><b>Grace</b> | M.I. |
|-------------------------------|-----------------------|------|

|   |                           |                    |                               |
|---|---------------------------|--------------------|-------------------------------|
| Residential Street Address<br><b>15 Cole St</b> | City<br><b>Bridgeport</b> | State<br><b>CT</b> | Zip Code<br><b>06604-5225</b> |
|---|---------------------------|--------------------|-------------------------------|

|                                      |   |
|--------------------------------------|---|
| Principal Occupation<br><b>Pulic</b> | Name of Employer<br><b>City of Bridgeport</b> |
|--------------------------------------|---|

|   |  |                        |
|---|--|------------------------|
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount of Contribution |
|---|--|------------------------|

|  |  |                        |
|--|--|------------------------|
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event # | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with: | Amount of Contribution |
|--|--|------------------------|

|  |                                    |  |
|--|------------------------------------|--|
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order | Date Received<br><b>03/12/2017</b> | Aggregate contributions<br><b>\$550.00</b> |
|--|------------------------------------|--|

|                               |                       |      |
|-------------------------------|-----------------------|------|
| Last Name<br><b>Goncalves</b> | First<br><b>Grace</b> | M.I. |
|-------------------------------|-----------------------|------|

|   |                           |                    |                               |
|---|---------------------------|--------------------|-------------------------------|
| Residential Street Address<br><b>15 Cole St</b> | City<br><b>Bridgeport</b> | State<br><b>CT</b> | Zip Code<br><b>06604-5225</b> |
|---|---------------------------|--------------------|-------------------------------|

|                                      |   |
|--------------------------------------|---|
| Principal Occupation<br><b>Pulic</b> | Name of Employer<br><b>City of Bridgeport</b> |
|--------------------------------------|---|

|   |  |                        |
|---|--|------------------------|
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Amount of Contribution |
|---|--|------------------------|

|  |  |                        |
|--|--|------------------------|
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event # | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with: | Amount of Contribution |
|--|--|------------------------|

|  |                                    |  |
|--|------------------------------------|--|
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order | Date Received<br><b>03/30/2017</b> | Aggregate contributions<br><b>\$550.00</b> |
|--|------------------------------------|--|

|   |                     |
|---|---------------------|
| <b>SUBTOTAL Section B - This Page</b>                               | <b>\$1,550.00</b>   |
| <b>TOTAL of Section B Pages</b>                                     | <b>\$182,255.00</b> |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b> | <b>\$182,255.00</b> |
| <i>(Enter total on Line 13, Column A of Summary Page)</i>           |                     |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |  |                         |            |
|---|--|---|--|-------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |  | TYPE OF REPORT          |            |
| Ganim for Bridgeport '19  |  |   |  | April 10 filing         |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |  | Subtotal Section A      |            |
|   |  |   |  | \$0.00                  |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |  |                         |            |
| Last Name   |  | First   |  | M.I.                    |            |
| Gonzalez  |  | Barbara   |  |                         |            |
| Residential Street Address  |  | City  |  | State                   | Zip Code   |
| 114 Intervale Rd, # 3   |  | Bridgeport  |  | CT                      | 06610-1014 |
| Principal Occupation  |  | Name of Employer  |  |                         |            |
| Self Employed   |  | Beyond Homecare   |  |                         |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | Amount of Contribution  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | \$500.00                |            |
| Is this contribution associated with an event reported in Section L1?<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |                         |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |  |                         |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$500.00                |            |
| Last Name   |  | First   |  | M.I.                    |            |
| Gresko  |  | Joseph  |  | P                       |            |
| Residential Street Address  |  | City  |  | State                   | Zip Code   |
| 284 Mary Ave  |  | Stratford   |  | CT                      | 06614-5327 |
| Principal Occupation  |  | Name of Employer  |  |                         |            |
| State Representative  |  | State of CT   |  |                         |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | Amount of Contribution  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | \$500.00                |            |
| Is this contribution associated with an event reported in Section L1?<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |                         |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |  |                         |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$500.00                |            |
| Last Name   |  | First   |  | M.I.                    |            |
| Guedes  |  | Eleanor   |  |                         |            |
| Residential Street Address  |  | City  |  | State                   | Zip Code   |
| 1425 Noble Ave  |  | Bridgeport  |  | CT                      | 06610-1609 |
| Principal Occupation  |  | Name of Employer  |  |                         |            |
| Manager   |  | self employed   |  |                         |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | Amount of Contribution  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | \$250.00                |            |
| Is this contribution associated with an event reported in Section L1?<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |                         |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |  |                         |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/16/2017  |  | \$250.00                |            |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$1,250.00   |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |                         |                               |            |
|---|--|---|-------------------------|-------------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |                         | TYPE OF REPORT                |            |
| Ganim for Bridgeport '19  |  |   |                         | April 10 filing               |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |                         | <b>Subtotal Section A</b>     |            |
|   |  |   |                         | \$0.00                        |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                         |                               |            |
| Last Name   |  | First   |                         | MI                            |            |
| Guedes  |  | John  |                         |                               |            |
| Residential Street Address  |  | City  |                         | State                         | Zip Code   |
| 207 Huntington St, Apt 713  |  | Shelton   |                         | CT                            | 06484-5238 |
| Principal Occupation  |  | Name of Employer  |                         |                               |            |
| Primrose Co   |  | President   |                         |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                               |            |
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event # 032317a  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                         |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |                         | \$250.00                      |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                               |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/15/2017  | \$250.00                |                               |            |
| Last Name   |  | First   |                         | MI                            |            |
| Guilmartin  |  | Scott   |                         |                               |            |
| Residential Street Address  |  | City  |                         | State                         | Zip Code   |
| 759 Hale St   |  | Suffield  |                         | CT                            | 06078-2507 |
| Principal Occupation  |  | Name of Employer  |                         |                               |            |
| Energy Development  |  | Self  |                         |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                               |            |
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                         |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |                         | \$300.00                      |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                               |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/23/2017  | \$300.00                |                               |            |
| Last Name   |  | First   |                         | MI                            |            |
| Hall  |  | Fredrick  |                         | A                             |            |
| Residential Street Address  |  | City  |                         | State                         | Zip Code   |
| 51 S Country Rd   |  | Bellport  |                         | NY                            | 11713-2501 |
| Principal Occupation  |  | Name of Employer  |                         |                               |            |
| VP  |  | Bridgeport Ferry  |                         |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                               |            |
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                         |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |                         | \$500.00                      |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                               |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/28/2017  | \$500.00                |                               |            |

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|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$1,050.00   |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|  |  |  |  |
|--|--|--|--|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)   |  | TYPE OF REPORT   |  |
| Ganim for Bridgeport '19   |  | April 10 filing  |  |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)  |  | <b>Subtotal Section A</b> \$0.00   |  |
| <b>B. Itemized Contributions from Individuals</b>  |  |  |  |
| Last Name<br><b>Harris</b>   |  | First<br><b>Avraham</b> M.I.   |  |
| Residential Street Address<br><b>23 Washington Ave</b>   |  | City<br><b>Holyoke</b>   | State<br><b>MA</b> Zip Code<br><b>01040-3536</b> |
| Principal Occupation<br><b>Director of Legislative Affairs</b>   |  | Name of Employer<br><b>City of Bridgeport</b>  |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No     |  |
| Is this contribution associated with an event reported in Section I.1?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |  |
| Method of contribution:<br><input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received<br><b>03/31/2017</b>   | Aggregate contributions<br><b>\$250.00</b>       |
| Last Name<br><b>Harris</b>   |  | First<br><b>Barbara</b> M.I.<br><b>A</b>   |  |
| Residential Street Address<br><b>256 Governors Hill Rd</b>   |  | City<br><b>Oxford</b>  | State<br><b>CT</b> Zip Code<br><b>06478-1348</b> |
| Principal Occupation<br><b>Information Requested</b>   |  | Name of Employer<br><b>Retired</b>   |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No     |  |
| Is this contribution associated with an event reported in Section I.1?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |  |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received<br><b>03/22/2017</b>   | Aggregate contributions<br><b>\$1,000.00</b>     |
| Last Name<br><b>Hawkins</b>  |  | First<br><b>Janene</b> M.I.  |  |
| Residential Street Address<br><b>116 Haven Ave</b>   |  | City<br><b>Mount Vernon</b>  | State<br><b>NY</b> Zip Code<br><b>10553-1331</b> |
| Principal Occupation<br><b>Minister</b>  |  | Name of Employer<br><b>Varick Memorial Church</b>  |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No     |  |
| Is this contribution associated with an event reported in Section I.1?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |  |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received<br><b>03/23/2017</b>   | Aggregate contributions<br><b>\$500.00</b>       |

|   |                     |
|---|---------------------|
| <b>SUBTOTAL Section B - This Page</b>   | <b>\$1,750.00</b>   |
| <b>TOTAL of Section B Pages</b>   | <b>\$182,255.00</b> |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | <b>\$182,255.00</b> |

**I. MONETARY RECEIPTS (Sections A-K)**

|  |  |   |  |   |                               |
|--|--|---|--|---|-------------------------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)   |  |   |  | TYPE OF REPORT                                |                               |
| Ganim for Bridgeport '19   |  |   |  | April 10 filing                               |                               |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)  |  |   |  | Subtotal Section A                            |                               |
|  |  |   |  | \$0.00  |                               |
| <b>B. Itemized Contributions from Individuals</b>  |  |   |  |   |                               |
| Last Name<br><b>Heller</b>   |  | First<br><b>Adam</b>  |  | M.I.  |                               |
| Residential Street Address<br><b>20 Emerald Ridge Ct</b>   |  | City<br><b>Shelton</b>  |  | State<br><b>CT</b>                            | Zip Code<br><b>06484-2178</b> |
| Principal Occupation<br><b>IT</b>  |  | Name of Employer<br><b>City of Bridgeport</b>   |  |   |                               |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |  | <b>Amount of Contribution</b><br><br>\$500.00 |                               |
| Is this contribution associated with an event reported in Section I.1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No                             |  |   |                               |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received<br><b>03/23/2017</b>  | Aggregate contributions<br><b>\$500.00</b> |   |                               |
| Last Name<br><b>Heltzel</b>  |  | First<br><b>Kenneth</b>   |  | M.I.<br><b>D</b>                              |                               |
| Residential Street Address<br><b>46 Chelsea St</b>   |  | City<br><b>Stratford</b>  |  | State<br><b>CT</b>                            | Zip Code<br><b>06615-6660</b> |
| Principal Occupation<br><b>Appraiser</b>   |  | Name of Employer<br><b>City of Bridgeport</b>   |  |   |                               |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |  | <b>Amount of Contribution</b><br><br>\$500.00 |                               |
| Is this contribution associated with an event reported in Section I.1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No                             |  |   |                               |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received<br><b>03/20/2017</b>  | Aggregate contributions<br><b>\$500.00</b> |   |                               |
| Last Name<br><b>Henry</b>  |  | First<br><b>Patrick</b>   |  | M.I.<br><b>K</b>                              |                               |
| Residential Street Address<br><b>130 Eastfield Dr</b>  |  | City<br><b>Fairfield</b>  |  | State<br><b>CT</b>                            | Zip Code<br><b>06825-1178</b> |
| Principal Occupation<br><b>Attorney</b>  |  | Name of Employer<br><b>Information Requested</b>  |  |   |                               |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No    |  | <b>Amount of Contribution</b><br><br>\$100.00 |                               |
| Is this contribution associated with an event reported in Section I.1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No                             |  |   |                               |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received<br><b>03/07/2017</b>  | Aggregate contributions<br><b>\$100.00</b> |   |                               |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>   | \$1,100.00   |
| <b>TOTAL of Section B Pages</b>   | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |  |   |            |
|---|--|---|--|---|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |  | TYPE OF REPORT                                  |            |
| Ganim for Bridgeport '19  |  |   |  | April 10 filing                                 |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |  | Subtotal Section A                              |            |
|   |  |   |  | \$0.00  |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |  |   |            |
| Last Name   |  | First   |  | M.I.  |            |
| Hernandez   |  | Juan  |  | O   |            |
| Residential Street Address  |  | City  |  | State   | Zip Code   |
| 2045 Park Ave   |  | Bridgeport  |  | CT  | 06604-1911 |
| Principal Occupation  |  | Name of Employer  |  |   |            |
| Real Estate   |  | Self  |  |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b><br><br>\$1,000.00 |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |   |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with.</i>   |  |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |  |   |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions                         |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$1,000.00                                      |            |
| Last Name   |  | First   |  | M.I.  |            |
| Hickey  |  | Jeffrey   |  | L   |            |
| Residential Street Address  |  | City  |  | State   | Zip Code   |
| 22 Trolley Rd   |  | Guilford  |  | CT  | 06437-3110 |
| Principal Occupation  |  | Name of Employer  |  |   |            |
| Owner   |  | Sonitrol Security Systems   |  |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b><br><br>\$500.00   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No  |  |   |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with.</i>   |  |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |  |   |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions                         |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/17/2017  |  | \$500.00  |            |
| Last Name   |  | First   |  | M.I.  |            |
| Hladun  |  | Stephen   |  |   |            |
| Residential Street Address  |  | City  |  | State   | Zip Code   |
| 18 Villa Rosa Ter   |  | Milford   |  | CT  | 06460-7915 |
| Principal Occupation  |  | Name of Employer  |  |   |            |
| Special Project Coordinator   |  | City of Bridgeport Parks and Rec Dept   |  |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b><br><br>\$100.00   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |   |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with.</i>   |  |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |  |   |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions                         |            |
| <input checked="" type="checkbox"/> Cash<br><input type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/29/2017  |  | \$100.00  |            |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$1,600.00   |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|  |  |  |                                     |   |
|--|--|--|-------------------------------------|---|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)   |  |  | TYPE OF REPORT                      |   |
| Ganim for Bridgeport '19   |  |  | April 10 filing                     |   |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)  |  |  | <b>Subtotal Section A</b> \$0.00    |   |
| <b>B. Itemized Contributions from Individuals</b>  |  |  |                                     |   |
| Last Name<br>Holloway  |  | First<br>James   |                                     | MI<br>  |
| Residential Street Address<br>171 Prince St  |  | City<br>Bridgeport   | State<br>CT                         | Zip Code<br>06610-2926                        |
| Principal Occupation<br>Supervisor   |  | Name of Employer<br>City of Bridgeport   |                                     |   |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No            |                                     | <b>Amount of Contribution</b><br><br>\$100.00 |
| Is this contribution associated with an event reported in Section L1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |                                     |   |
| Method of contribution:<br><input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received<br>03/23/2017  | Aggregate contributions<br>\$100.00 |   |
| Last Name<br>Ivanko  |  | First<br>James   |                                     | MI<br>A                                       |
| Residential Street Address<br>310 Redwood Ln   |  | City<br>Cheshire   | State<br>CT                         | Zip Code<br>06410-2342                        |
| Principal Occupation<br>Sgt Police   |  | Name of Employer<br>City of Bridgeport   |                                     |   |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No            |                                     | <b>Amount of Contribution</b><br><br>\$200.00 |
| Is this contribution associated with an event reported in Section L1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |                                     |   |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received<br>03/22/2017  | Aggregate contributions<br>\$200.00 |   |
| Last Name<br>Kadi  |  | First<br>Sam   |                                     | MI<br>  |
| Residential Street Address<br>1062 Church Hill Rd  |  | City<br>Fairfield  | State<br>CT                         | Zip Code<br>06825-1323                        |
| Principal Occupation<br>Greenskeeper   |  | Name of Employer<br>City of Bridgeport   |                                     |   |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No            |                                     | <b>Amount of Contribution</b><br><br>\$500.00 |
| Is this contribution associated with an event reported in Section L1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |                                     |   |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received<br>03/21/2017  | Aggregate contributions<br>\$500.00 |   |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$800.00     |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |  |
|---|--|---|--|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  | TYPE OF REPORT  |  |
| Ganim for Bridgeport '19  |  | April 10 filing   |  |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  | Subtotal Section A  |  |
|   |  | \$0.00  |  |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |  |
| Last Name   |  | First   |  |
| Katz  |  | Eric  |  |
| M.I.  |  |   |  |
| Residential Street Address  |  | City  |  |
| 3180 Main St  |  | Bridgeport  |  |
| State   |  | Zip Code  |  |
| CT  |  | 06606-4237  |  |
| Principal Occupation  |  | Name of Employer  |  |
| MD  |  | self  |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |
| Amount of Contribution  |  |   |  |
|   |  | \$500.00  |  |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |  |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, indicate which branch or branches of government the contract is with:   |  |
|   |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |  |
| Method of contribution:   |  | Date Received   |  |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/06/2017  |  |
|   |  | Aggregate contributions   |  |
|   |  | \$500.00  |  |
| Last Name   |  | First   |  |
| Kelly   |  | Thomas  |  |
| M.I.  |  |   |  |
| Residential Street Address  |  | City  |  |
| 155 Brewster St   |  | Bridgeport  |  |
| State   |  | Zip Code  |  |
| CT  |  | 06605-3149  |  |
| Principal Occupation  |  | Name of Employer  |  |
| Information Requested   |  | Retired   |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |
| Amount of Contribution  |  |   |  |
|   |  | \$100.00  |  |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |  |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, indicate which branch or branches of government the contract is with:   |  |
|   |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |  |
| Method of contribution:   |  | Date Received   |  |
| <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/20/2017  |  |
|   |  | Aggregate contributions   |  |
|   |  | \$100.00  |  |
| Last Name   |  | First   |  |
| Kelp  |  | John  |  |
| M.I.  |  |   |  |
| Residential Street Address  |  | City  |  |
| 167 Grovers Ave   |  | Bridgeport  |  |
| State   |  | Zip Code  |  |
| CT  |  | 06605-3450  |  |
| Principal Occupation  |  | Name of Employer  |  |
| Real Estate Agent   |  | Bershire Hathaway Home Svcs   |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |
| Amount of Contribution  |  |   |  |
|   |  | \$250.00  |  |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |  |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, indicate which branch or branches of government the contract is with:   |  |
|   |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |  |
| Method of contribution:   |  | Date Received   |  |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/22/2017  |  |
|   |  | Aggregate contributions   |  |
|   |  | \$250.00  |  |

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|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$850.00     |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |  |                         |            |
|---|--|---|--|-------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |  | TYPE OF REPORT          |            |
| Ganim for Bridgeport '19  |  |   |  | April 10 filing         |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |  | Subtotal Section A      |            |
|   |  |   |  | \$0.00                  |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |  |                         |            |
| Last Name   |  | First   |  | M.I.                    |            |
| Kennedy   |  | Edward  |  | M                       |            |
| Residential Street Address  |  | City  |  | State                   | Zip Code   |
| 17 Juniper Point Rd   |  | Branford  |  | CT                      | 06405-5631 |
| Principal Occupation  |  | Name of Employer  |  |                         |            |
| Attorney  |  | Epstein, Becker, Green  |  |                         |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | Amount of Contribution  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | \$500.00                |            |
| Is this contribution associated with an event reported in Section I.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |  |                         |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative        |  |                         |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$500.00                |            |
| Last Name   |  | First   |  | M.I.                    |            |
| Kinney  |  | Stephen   |  |                         |            |
| Residential Street Address  |  | City  |  | State                   | Zip Code   |
| 20 Cromwell Pl  |  | Old Saybrook  |  | CT                      | 06475-2512 |
| Principal Occupation  |  | Name of Employer  |  |                         |            |
| Lobbyist  |  | Gaffney Bennett   |  |                         |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | Amount of Contribution  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | \$500.00                |            |
| Is this contribution associated with an event reported in Section I.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |  |                         |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative        |  |                         |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$500.00                |            |
| Last Name   |  | First   |  | M.I.                    |            |
| Krasznai  |  | Charles   |  |                         |            |
| Residential Street Address  |  | City  |  | State                   | Zip Code   |
| 1015 Lakeside Dr  |  | Bridgeport  |  | CT                      | 06606-1953 |
| Principal Occupation  |  | Name of Employer  |  |                         |            |
| Consulting Chief Engineer   |  | A&E Global Des  |  |                         |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | Amount of Contribution  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | \$100.00                |            |
| Is this contribution associated with an event reported in Section I.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |  |                         |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative        |  |                         |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/02/2017  |  | \$600.00                |            |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>   | \$1,100.00   |
| <b>TOTAL of Section B Pages</b>   | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|  |  |   |                         |                               |            |
|--|--|---|-------------------------|-------------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)   |  |   |                         | TYPE OF REPORT                |            |
| Ganim for Bridgeport '19   |  |   |                         | April 10 filing               |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)  |  |   |                         | Subtotal Section A            |            |
|  |  |   |                         | \$0.00                        |            |
| <b>B. Itemized Contributions from Individuals</b>  |  |   |                         |                               |            |
| Last Name  |  | First   |                         | M.I.                          |            |
| Krasznoi   |  | Charles   |                         |                               |            |
| Residential Street Address   |  | City  |                         | State                         | Zip Code   |
| 1015 Lakeside Dr   |  | Bridgeport  |                         | CT                            | 06606-1953 |
| Principal Occupation   |  | Name of Employer  |                         |                               |            |
| Consulting Chief Engineer  |  | A&E Global Des  |                         |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                               |            |
| Is this contribution associated with an event reported in Section L1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                         |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                         | \$500.00                      |            |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received   | Aggregate contributions |                               |            |
|  |  | 03/23/2017  | \$600.00                |                               |            |
| Last Name  |  | First   |                         | M.I.                          |            |
| LaConte  |  | Lawrence  |                         |                               |            |
| Residential Street Address   |  | City  |                         | State                         | Zip Code   |
| 1349 Huntington Tpke   |  | Trumbull  |                         | CT                            | 06611-5318 |
| Principal Occupation   |  | Name of Employer  |                         |                               |            |
| retired  |  | retired   |                         |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                               |            |
| Is this contribution associated with an event reported in Section L1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                         |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                         | \$1,000.00                    |            |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received   | Aggregate contributions |                               |            |
|  |  | 03/22/2017  | \$1,000.00              |                               |            |
| Last Name  |  | First   |                         | M.I.                          |            |
| LaConte  |  | Lawrence  |                         |                               |            |
| Residential Street Address   |  | City  |                         | State                         | Zip Code   |
| 389 Booth Hill Rd  |  | Trumbull  |                         | CT                            | 06611-4942 |
| Principal Occupation   |  | Name of Employer  |                         |                               |            |
| Information Requested  |  | Self employed   |                         |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                               |            |
| Is this contribution associated with an event reported in Section L1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                         |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                         | \$1,000.00                    |            |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received   | Aggregate contributions |                               |            |
|  |  | 03/23/2017  | \$1,000.00              |                               |            |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$2,500.00   |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |  |                               |            |
|---|--|---|--|-------------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |  | TYPE OF REPORT                |            |
| Ganim for Bridgeport '19  |  |   |  | April 10 filing               |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |  | Subtotal Section A            |            |
|   |  |   |  | \$0.00                        |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |  |                               |            |
| Last Name   |  | First   |  | M.I.                          |            |
| Lambert   |  | Bonnie  |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 46 Ferry Ct   |  | Stratford   |  | CT                            | 06615-6061 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Ass't Special Proj Coord  |  | City of Bridgeport  |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |  | <b>\$200.00</b>               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |  |                               |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$200.00                      |            |
| Last Name   |  | First   |  | M.I.                          |            |
| Larracuente   |  | Raymond   |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 318 Dover St  |  | Bridgeport  |  | CT                            | 06610-2209 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Deputy Sealer Weights and Measures  |  | City of Bridgeport  |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |  | <b>\$100.00</b>               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |  |                               |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions       |            |
| <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$100.00                      |            |
| Last Name   |  | First   |  | M.I.                          |            |
| Lattin  |  | Thomas  |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 113 Ellsworth St  |  | Bridgeport  |  | CT                            | 06605-3122 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Project Manager   |  | City of Bridgeport  |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |  | <b>\$200.00</b>               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |  |                               |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/19/2017  |  | \$200.00                      |            |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>                               | \$500.00     |
| <b>TOTAL of Section B Pages</b>                                     | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b> | \$182,255.00 |
| <i>(Enter total on Line 13, Column A of Summary Page)</i>           |              |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |                         |                               |            |
|---|--|---|-------------------------|-------------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |                         | TYPE OF REPORT                |            |
| Ganim for Bridgeport '19  |  |   |                         | April 10 filing               |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |                         | <b>Subtotal Section A</b>     |            |
|   |  |   |                         | \$0.00                        |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                         |                               |            |
| Last Name   |  | First   |                         | M.I.                          |            |
| Laydon  |  | Elmer   |                         | F                             |            |
| Residential Street Address  |  | City  |                         | State                         | Zip Code   |
| 46 Beach Ave  |  | Milford   |                         | CT                            | 06460-8154 |
| Principal Occupation  |  | Name of Employer  |                         |                               |            |
| Executive   |  | Laydon Industries   |                         |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                               |            |
| Is this contribution associated with an event reported in Section I.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |                         | <b>\$1,000.00</b>             |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |                         |                               |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                               |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/16/2017  | \$1,000.00              |                               |            |
| Last Name   |  | First   |                         | M.I.                          |            |
| Laydon  |  | Jeffrey   |                         | E                             |            |
| Residential Street Address  |  | City  |                         | State                         | Zip Code   |
| 16 Forest Glen Dr   |  | Woodbridge  |                         | CT                            | 06525-1449 |
| Principal Occupation  |  | Name of Employer  |                         |                               |            |
| Executive   |  | Laydon Industries   |                         |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                               |            |
| Is this contribution associated with an event reported in Section I.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |                         | <b>\$1,000.00</b>             |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |                         |                               |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                               |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/13/2017  | \$1,000.00              |                               |            |
| Last Name   |  | First   |                         | M.I.                          |            |
| LeClerc   |  | Bryan   |                         | L                             |            |
| Residential Street Address  |  | City  |                         | State                         | Zip Code   |
| 199 Henderson Rd  |  | Fairfield   |                         | CT                            | 06824-4940 |
| Principal Occupation  |  | Name of Employer  |                         |                               |            |
| Attorney  |  | Berchem, Moses, Devlin P.C.   |                         |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |                         |                               |            |
| Is this contribution associated with an event reported in Section I.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |                         | <b>\$1,000.00</b>             |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |                         |                               |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                               |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  | \$1,000.00              |                               |            |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$3,000.00   |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |                         |                               |            |
|---|--|---|-------------------------|-------------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |                         | TYPE OF REPORT                |            |
| Ganim for Bridgeport '19  |  |   |                         | April 10 filing               |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |                         | <b>Subtotal Section A</b>     |            |
|   |  |   |                         | <b>\$0.00</b>                 |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                         |                               |            |
| Last Name   |  | First   |                         | M.I.                          |            |
| Leichtman   |  | Jeffrey   |                         | M                             |            |
| Residential Street Address  |  | City  |                         | State                         | Zip Code   |
| 60 Silo Hill Rd   |  | Madison   |                         | CT                            | 06443      |
| Principal Occupation  |  |   | Name of Employer        |                               |            |
| Information Requested   |  |   | Information Requested   |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                               |            |
| Is this contribution associated with an event reported in Section I.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |                         | <b>\$250.00</b>               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |                         |                               |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                               |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/28/2017  | <b>\$250.00</b>         |                               |            |
| Last Name   |  | First   |                         | M.I.                          |            |
| Leka  |  | Justin  |                         |                               |            |
| Residential Street Address  |  | City  |                         | State                         | Zip Code   |
| 4444 Madison Ave  |  | Trumbull  |                         | CT                            | 06611-2137 |
| Principal Occupation  |  |   | Name of Employer        |                               |            |
| Precast Gel   |  |   | Tule Technology         |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                               |            |
| Is this contribution associated with an event reported in Section I.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |                         | <b>\$250.00</b>               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |                         |                               |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                               |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  | <b>\$250.00</b>         |                               |            |
| Last Name   |  | First   |                         | M.I.                          |            |
| Leverty   |  | John  |                         |                               |            |
| Residential Street Address  |  | City  |                         | State                         | Zip Code   |
| 67 Hamilton Ct  |  | Fairfield   |                         | CT                            | 06824-7831 |
| Principal Occupation  |  |   | Name of Employer        |                               |            |
| Information Requested   |  |   | retired                 |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                               |            |
| Is this contribution associated with an event reported in Section I.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |                         | <b>\$1,000.00</b>             |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |                         |                               |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                               |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/08/2017  | <b>\$1,000.00</b>       |                               |            |

|   |                     |
|---|---------------------|
| <b>SUBTOTAL Section B - This Page</b>                               | <b>\$1,500.00</b>   |
| <b>TOTAL of Section B Pages</b>                                     | <b>\$182,255.00</b> |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b> | <b>\$182,255.00</b> |
| <i>(Enter total on Line 13, Column A of Summary Page)</i>           |                     |

**I. MONETARY RECEIPTS (Sections A-K)**

|  |   |  |   |
|--|---|--|---|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)   |   | TYPE OF REPORT   |   |
| Ganim for Bridgeport '19   |   | April 10 filing  |   |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)  |   | <b>Subtotal Section A</b>                                |   |
|  |   | <b>\$0.00</b>  |   |
| <b>B. Itemized Contributions from Individuals</b>  |   |  |   |
| Last Name<br>Levin   |   | First<br>Bruce   |   |
| Residential Street Address<br>49 Penny Ln  |   | City<br>Woodbridge                                       | State<br>CT                                     |
| Principal Occupation<br>Attorney   |   | Name of Employer<br>City of Bridgeport                   |   |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |  | <b>Amount of Contribution</b><br><br>\$1,000.00 |
| Is this contribution associated with an event reported in Section L1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No                                |  |   |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |   | Date Received<br>03/02/2017                              |   |
| Last Name<br>Levin   |   | First<br>Jay   |   |
| Residential Street Address<br>23 Worthington Rd  |   | City<br>New London                                       | State<br>CT                                     |
| Principal Occupation<br>Attorney   |   | Name of Employer<br>Jay B Levin Gov't Rel Consulting LLC |   |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |  | <b>Amount of Contribution</b><br><br>\$100.00   |
| Is this contribution associated with an event reported in Section L1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No                                |  |   |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |   | Date Received<br>03/06/2017                              |   |
| Last Name<br>Lewis   |   | First<br>Sarah   |   |
| Residential Street Address<br>70 King St   |   | City<br>Bridgeport                                       | State<br>CT                                     |
| Principal Occupation<br>Non Profit   |   | Name of Employer<br>The Workplace                        |   |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |  | <b>Amount of Contribution</b><br><br>\$100.00   |
| Is this contribution associated with an event reported in Section L1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No                                |  |   |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |   | Date Received<br>03/23/2017                              |   |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>   | \$1,200.00   |
| <b>TOTAL of Section B Pages</b>   | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |  |  |                         |
|---|--|---|--|--|-------------------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |  | TYPE OF REPORT                         |                         |
| Ganim for Bridgeport '19  |  |   |  | April 10 filing                        |                         |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |  | Subtotal Section A \$0.00              |                         |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |  |  |                         |
| Last Name   |  | First   |  | M.I.                                   |                         |
| Lilly   |  | Scott   |  | J                                      |                         |
| Residential Street Address  |  | City  |  | State                                  | Zip Code                |
| 296 Dayton Rd   |  | Trumbull  |  | CT                                     | 06611-1802              |
| Principal Occupation  |  | Name of Employer  |  |  |                         |
| Marketing   |  | Self employed   |  |  |                         |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | Amount of Contribution<br><br>\$100.00 |                         |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |  |                         |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |  | \$100.00                               |                         |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |  |  |                         |
| Method of contribution:   |  |   |  | Date Received                          | Aggregate contributions |
| <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   |  | 03/23/2017                             | \$100.00                |
| Last Name   |  | First   |  | M.I.                                   |                         |
| Lipsett   |  | Michael   |  | J                                      |                         |
| Residential Street Address  |  | City  |  | State                                  | Zip Code                |
| 780 Ocean Ave   |  | West Haven  |  | CT                                     | 06516-6842              |
| Principal Occupation  |  | Name of Employer  |  |  |                         |
| Exterminator  |  | CT Pest Elimination   |  |  |                         |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | Amount of Contribution<br><br>\$500.00 |                         |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |  |                         |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |  | \$500.00                               |                         |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |  |  |                         |
| Method of contribution:   |  |   |  | Date Received                          | Aggregate contributions |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   |  | 03/16/2017                             | \$500.00                |
| Last Name   |  | First   |  | M.I.                                   |                         |
| Liskov  |  | Russell   |  |  |                         |
| Residential Street Address  |  | City  |  | State                                  | Zip Code                |
| 59 Clover Hill Rd   |  | Trumbull  |  | CT                                     | 06611-2512              |
| Principal Occupation  |  | Name of Employer  |  |  |                         |
| Attorney  |  | City of Bridgeport  |  |  |                         |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | Amount of Contribution<br><br>\$500.00 |                         |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |  |                         |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |  | \$500.00                               |                         |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |  |  |                         |
| Method of contribution:   |  |   |  | Date Received                          | Aggregate contributions |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   |  | 03/23/2017                             | \$500.00                |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$1,100.00   |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |  |   |            |
|---|--|---|--|---|------------|
| NAME OF COMMITTEE <i>(Provide Complete Name as Registered with Filing Repository)</i>   |  |   |  | TYPE OF REPORT                                  |            |
| Ganim for Bridgeport '19  |  |   |  | April 10 filing                                 |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br><i>(See instructions for definition of Small Contributor)</i>  |  |   |  | Subtotal Section A                              |            |
|   |  |   |  | \$0.00  |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |  |   |            |
| Last Name   |  | First   |  | M.I.  |            |
| LoMonte   |  | John  |  |   |            |
| Residential Street Address  |  | City  |  | State   | Zip Code   |
| 39 W Wynd Ter   |  | Middletown  |  | CT  | 06457-8729 |
| Principal Occupation  |  | Name of Employer  |  |   |            |
| Appraisers/Broker   |  | John LoMonte R.E. Appraisers  |  |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b><br><br>\$1,000.00 |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |   |            |
| Is this contribution associated with an event reported in Section I.I?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |  |   |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions                         |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/28/2017  |  | \$1,000.00                                      |            |
| Last Name   |  | First   |  | M.I.  |            |
| LoMonte   |  | Teresa  |  |   |            |
| Residential Street Address  |  | City  |  | State   | Zip Code   |
| 39 W Wynd Ter   |  | Middletown  |  | CT  | 06457-8729 |
| Principal Occupation  |  | Name of Employer  |  |   |            |
| Office Mgr  |  | Self  |  |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b><br><br>\$1,000.00 |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |   |            |
| Is this contribution associated with an event reported in Section I.I?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |  |   |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions                         |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/28/2017  |  | \$1,000.00                                      |            |
| Last Name   |  | First   |  | M.I.  |            |
| Longo   |  | Raymond   |  | G   |            |
| Residential Street Address  |  | City  |  | State   | Zip Code   |
| 65 Stillman St  |  | Bridgeport  |  | CT  | 06608-1530 |
| Principal Occupation  |  | Name of Employer  |  |   |            |
| President   |  | Yellow Taxi Svc Inc   |  |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b><br><br>\$500.00   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |   |            |
| Is this contribution associated with an event reported in Section I.I?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |  |   |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions                         |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$500.00  |            |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$2,500.00   |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |               |                         |            |
|---|--|---|---------------|-------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |               | TYPE OF REPORT          |            |
| Ganim for Bridgeport '19  |  |   |               | April 10 filing         |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |               | Subtotal Section A      |            |
|   |  |   |               | \$0.00                  |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |               |                         |            |
| Last Name   |  | First   |               | MI                      |            |
| Lopez   |  | Awilda  |               |                         |            |
| Residential Street Address  |  | City  |               | State                   | Zip Code   |
| 2045 Park Ave   |  | Bridgeport  |               | CT                      | 06604-1911 |
| Principal Occupation  |  | Name of Employer  |               |                         |            |
| School Custodian  |  | COB   |               |                         |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |               | Amount of Contribution  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |               |                         |            |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |               | \$1,000.00              |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative           |               |                         |            |
| Method of contribution:   |  |   | Date Received | Aggregate contributions |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/22/2017    | \$1,000.00              |            |
| Last Name   |  | First   |               | MI                      |            |
| Macauda   |  | Sandra  |               |                         |            |
| Residential Street Address  |  | City  |               | State                   | Zip Code   |
| 338 Washington Pkwy   |  | Stratford   |               | CT                      | 06615-7738 |
| Principal Occupation  |  | Name of Employer  |               |                         |            |
| Realtor   |  | Information Requested   |               |                         |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |               | Amount of Contribution  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |               |                         |            |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |               | \$250.00                |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative           |               |                         |            |
| Method of contribution:   |  |   | Date Received | Aggregate contributions |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/23/2017    | \$250.00                |            |
| Last Name   |  | First   |               | MI                      |            |
| Magliocco   |  | Angelo  |               |                         |            |
| Residential Street Address  |  | City  |               | State                   | Zip Code   |
| 49 Harvester Rd   |  | Trumbull  |               | CT                      | 06611-2138 |
| Principal Occupation  |  | Name of Employer  |               |                         |            |
| Landscape   |  | Artistic Designs  |               |                         |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |               | Amount of Contribution  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |               |                         |            |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |               | \$500.00                |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative           |               |                         |            |
| Method of contribution:   |  |   | Date Received | Aggregate contributions |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/22/2017    | \$500.00                |            |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>   | \$1,750.00   |
| <b>TOTAL of Section B Pages</b>   | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |               |  |            |
|---|--|---|---------------|--|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |               | TYPE OF REPORT                         |            |
| Ganim for Bridgeport '19  |  |   |               | April 10 filing                        |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |               | Subtotal Section A                     |            |
|   |  |   |               | \$0.00                                 |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |               |  |            |
| Last Name   |  | First   |               | M.I.                                   |            |
| Magliocco   |  | Jenifer   |               |  |            |
| Residential Street Address  |  | City  |               | State                                  | Zip Code   |
| 49 Harvester Rd   |  | Trumbull  |               | CT                                     | 06611-2138 |
| Principal Occupation  |  | Name of Employer  |               |  |            |
| Home maker  |  | Information Requested   |               |  |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |               | Amount of Contribution<br><br>\$750.00 |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |               |  |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |               |  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |               |  |            |
| Method of contribution:   |  |   | Date Received | Aggregate contributions                |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/23/2017    | \$750.00                               |            |
| Last Name   |  | First   |               | M.I.                                   |            |
| Malcynsky   |  | Jay   |               |  |            |
| Residential Street Address  |  | City  |               | State                                  | Zip Code   |
| 25 Parkers Point Rd   |  | Chester   |               | CT                                     | 06412-1206 |
| Principal Occupation  |  | Name of Employer  |               |  |            |
| Attorney/Lobbyist   |  | Gaffney Bennett & Assoc   |               |  |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |               | Amount of Contribution<br><br>\$500.00 |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |               |  |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |               |  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |               |  |            |
| Method of contribution:   |  |   | Date Received | Aggregate contributions                |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/23/2017    | \$500.00                               |            |
| Last Name   |  | First   |               | M.I.                                   |            |
| Malheiro  |  | Virginia  |               |  |            |
| Residential Street Address  |  | City  |               | State                                  | Zip Code   |
| 11 Botsford Pl  |  | Trumbull  |               | CT                                     | 06611-4702 |
| Principal Occupation  |  | Name of Employer  |               |  |            |
| Port Authority Executive Director   |  | City of Bridgeport  |               |  |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |               | Amount of Contribution<br><br>\$500.00 |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |               |  |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |               |  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |               |  |            |
| Method of contribution:   |  |   | Date Received | Aggregate contributions                |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/16/2017    | \$850.00                               |            |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$1,750.00   |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|  |  |   |                                     |
|--|--|---|-------------------------------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)   |  | TYPE OF REPORT  |                                     |
| Ganim for Bridgeport '19   |  | April 10 filing   |                                     |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)  |  | Subtotal Section A  |                                     |
|  |  | \$0.00  |                                     |
| <b>B. Itemized Contributions from Individuals</b>  |  |   |                                     |
| Last Name<br>Malone  |  | First<br>William  |                                     |
| Residential Street Address<br>260 Milbank Ave  |  | City<br>Greenwich   | State<br>CT                         |
|  |  | Zip Code<br>06830-6628  |                                     |
| Principal Occupation<br>Executive  |  | Name of Employer<br>A Royal Flush   |                                     |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |                                     |
| Is this contribution associated with an event reported in Section L1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No                          |                                     |
| Method of contribution:<br><input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | Date Received<br>03/22/2017   | Aggregate contributions<br>\$500.00 |
| Last Name<br>Manzo   |  | First<br>JoAnn  |                                     |
| Residential Street Address<br>163 Scofield Ave   |  | City<br>Bridgeport  | State<br>CT                         |
|  |  | Zip Code<br>06605-2954  |                                     |
| Principal Occupation<br>Information Requested  |  | Name of Employer<br>City of Bridgeport Board of Education   |                                     |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |                                     |
| Is this contribution associated with an event reported in Section L1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No                          |                                     |
| Method of contribution:<br><input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | Date Received<br>03/23/2017   | Aggregate contributions<br>\$100.00 |
| Last Name<br>Marcinek  |  | First<br>Michael  |                                     |
| Residential Street Address<br>6 Dahlia Ln  |  | City<br>Seymour   | State<br>CT                         |
|  |  | Zip Code<br>06483-2379  |                                     |
| Principal Occupation<br>Accountant   |  | Name of Employer<br>Fletcher Thompson   |                                     |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No |                                     |
| Is this contribution associated with an event reported in Section L1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No                          |                                     |
| Method of contribution:<br><input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | Date Received<br>03/22/2017   | Aggregate contributions<br>\$500.00 |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>   | \$1,100.00   |
| <b>TOTAL of Section B Pages</b>   | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |                         |                        |            |  |  |
|---|--|---|-------------------------|------------------------|------------|--|--|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |                         | TYPE OF REPORT         |            |  |  |
| Ganim for Bridgeport '19  |  |   |                         | April 10 filing        |            |  |  |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |                         | Subtotal Section A     |            |  |  |
|   |  |   |                         | \$0.00                 |            |  |  |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                         |                        |            |  |  |
| Last Name   |  | First   |                         | M.I.                   |            |  |  |
| Marks   |  | Miller  |                         |                        |            |  |  |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |  |  |
| 2677 Main St  |  | Bridgeport  |                         | CT                     | 06606-5309 |  |  |
| Principal Occupation  |  | Name of Employer  |                         |                        |            |  |  |
| Information Requested   |  | Self employed   |                         |                        |            |  |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |  |  |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                        |            |  |  |
| Is this contribution associated with an event reported in Section 1.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |                         |                        |            |  |  |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative           |                         | \$100.00               |            |  |  |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                        |            |  |  |
| <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  | \$100.00                |                        |            |  |  |
| Last Name   |  | First   |                         | M.I.                   |            |  |  |
| Marks   |  | Sam   |                         |                        |            |  |  |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |  |  |
| 2677 Main St  |  | Bridgeport  |                         | CT                     | 06606-5309 |  |  |
| Principal Occupation  |  | Name of Employer  |                         |                        |            |  |  |
| Information Requested   |  | City of Bridgeport  |                         |                        |            |  |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |  |  |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                        |            |  |  |
| Is this contribution associated with an event reported in Section 1.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |                         |                        |            |  |  |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative           |                         | \$100.00               |            |  |  |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                        |            |  |  |
| <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  | \$100.00                |                        |            |  |  |
| Last Name   |  | First   |                         | M.I.                   |            |  |  |
| Marks   |  | Santino   |                         |                        |            |  |  |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |  |  |
| 2677 Main St  |  | Bridgeport  |                         | CT                     | 06606-5309 |  |  |
| Principal Occupation  |  | Name of Employer  |                         |                        |            |  |  |
| Information Requested   |  | Information Requested   |                         |                        |            |  |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |  |  |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                        |            |  |  |
| Is this contribution associated with an event reported in Section 1.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |                         |                        |            |  |  |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative           |                         | \$100.00               |            |  |  |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                        |            |  |  |
| <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  | \$100.00                |                        |            |  |  |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>   | \$300.00     |
| <b>TOTAL of Section B Pages</b>   | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |                       |                               |            |
|---|--|---|-----------------------|-------------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |                       | TYPE OF REPORT                |            |
| Ganim for Bridgeport '19  |  |   |                       | April 10 filing               |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |                       | Subtotal Section A            |            |
|   |  |   |                       | \$0.00                        |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                       |                               |            |
| Last Name   |  | First   |                       | MI.                           |            |
| Martinez  |  | Frank   |                       |                               |            |
| Residential Street Address  |  | City  |                       | State                         | Zip Code   |
| 194 Velvet St   |  | Monroe  |                       | CT                            | 06468-1541 |
| Principal Occupation  |  |   | Name of Employer      |                               |            |
| Landlord  |  |   | Self                  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                       | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                       |                               |            |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |                       | <b>\$1,000.00</b>             |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |                       |                               |            |
| Method of contribution:   |  |   | Date Received         | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/23/2017            | \$1,000.00                    |            |
| Last Name   |  | First   |                       | MI.                           |            |
| Martinez  |  | Wilfredo J.   |                       |                               |            |
| Residential Street Address  |  | City  |                       | State                         | Zip Code   |
| 466 Boston Ave.   |  | Bridgeport  |                       | CT                            | 06610-1704 |
| Principal Occupation  |  |   | Name of Employer      |                               |            |
| Information Requested   |  |   | Information Requested |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                       | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                       |                               |            |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |                       | <b>\$100.00</b>               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |                       |                               |            |
| Method of contribution:   |  |   | Date Received         | Aggregate contributions       |            |
| <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/23/2017            | \$100.00                      |            |
| Last Name   |  | First   |                       | MI.                           |            |
| Masciangelo   |  | Nicholas  |                       |                               |            |
| Residential Street Address  |  | City  |                       | State                         | Zip Code   |
| 99 Brennan St   |  | East Haven  |                       | CT                            | 06513-2607 |
| Principal Occupation  |  |   | Name of Employer      |                               |            |
| Director Construction Mgmt  |  |   | City of Bridgeport    |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                       | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |                       |                               |            |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |                       | <b>\$200.00</b>               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |                       |                               |            |
| Method of contribution:   |  |   | Date Received         | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/23/2017            | \$200.00                      |            |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$1,300.00   |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|  |  |  |  |
|--|--|--|--|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)   |  | TYPE OF REPORT   |  |
| Ganim for Bridgeport '19   |  | April 10 filing  |  |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)  |  | Subtotal Section A \$0.00  |  |
| <b>B. Itemized Contributions from Individuals</b>  |  |  |  |
| Last Name<br><b>Massimino</b>  |  | First<br><b>Camen</b>  |  |
| Residential Street Address<br><b>145 Far Horizon Dr</b>  |  | City<br><b>Easton</b>  |  |
| Principal Occupation<br><b>Partner</b>   |  | Name of Employer<br><b>Colonial Ford Inc</b>   |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  |
| Is this contribution associated with an event reported in Section L.1?<br><i>If yes, list Event #</i><br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No                      |  |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received<br><b>03/27/2017</b>   | Aggregate contributions<br><b>\$500.00</b> |
| Last Name<br><b>Mauzerall</b>  |  | First<br><b>Michael</b>  |  |
| Residential Street Address<br><b>95 Copper Kettle Rd</b>   |  | City<br><b>Stratford</b>   |  |
| Principal Occupation<br><b>Contractor</b>  |  | Name of Employer<br><b>M&amp;M Fence &amp; Works Inc</b>   |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  |
| Is this contribution associated with an event reported in Section L.1?<br><i>If yes, list Event #</i><br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No                      |  |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received<br><b>03/23/2017</b>   | Aggregate contributions<br><b>\$500.00</b> |
| Last Name<br><b>McBride</b>  |  | First<br><b>Willie</b>   |  |
| Residential Street Address<br><b>52 Trumbull Ave</b>   |  | City<br><b>Trumbull</b>  |  |
| Principal Occupation<br><b>Electrician</b>   |  | Name of Employer<br><b>WC McBride Electrical Contractors</b>   |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |  |
| Is this contribution associated with an event reported in Section L.1?<br><i>If yes, list Event #</i><br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No                      |  |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received<br><b>03/08/2017</b>   | Aggregate contributions<br><b>\$500.00</b> |

|  |                     |
|--|---------------------|
| <b>SUBTOTAL Section B - This Page</b>  | <b>\$1,500.00</b>   |
| <b>TOTAL of Section B Pages</b>  | <b>\$182,255.00</b> |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | <b>\$182,255.00</b> |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |                    |  |
|---|--|---|--------------------|--|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   | TYPE OF REPORT     |  |
| Ganim for Bridgeport '19  |  |   | April 10 filing    |  |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   | Subtotal Section A |  |
|   |  |   | \$0.00             |  |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                    |  |
| Last Name   |  | First   |                    | M.I.                                     |
| McClutchy   |  | Kristin   |                    | W  |
| Residential Street Address  |  | City  | State              | Zip Code                                 |
| 158 Holmes Ave  |  | Darien  | CT                 | 06820-3818                               |
| Principal Occupation  |  | Name of Employer  |                    |  |
| Fitness   |  | Self Employed   |                    |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?     |                    | Amount of Contribution<br><br>\$1,000.00 |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No  |                    |  |
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event # 032317a  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |                    |  |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                    |  |
| Method of contribution:   |  |   | Date Received      | Aggregate contributions                  |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/31/2017         | \$1,000.00                               |
| Last Name   |  | First   |                    | M.I.                                     |
| McClutchy   |  | Todd  |                    |  |
| Residential Street Address  |  | City  | State              | Zip Code                                 |
| 156 Holmes Ave  |  | Darien  | CT                 | 06820-3818                               |
| Principal Occupation  |  | Name of Employer  |                    |  |
| Real Estate   |  | JHM Financial Group LLC   |                    |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?     |                    | Amount of Contribution<br><br>\$1,000.00 |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No  |                    |  |
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event # 032317a  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |                    |  |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                    |  |
| Method of contribution:   |  |   | Date Received      | Aggregate contributions                  |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/31/2017         | \$1,000.00                               |
| Last Name   |  | First   |                    | M.I.                                     |
| McGovern  |  | Elizabeth   |                    | A  |
| Residential Street Address  |  | City  | State              | Zip Code                                 |
| 900 Lakeside Dr   |  | Bridgeport  | CT                 | 06606-1956                               |
| Principal Occupation  |  | Name of Employer  |                    |  |
| Insurance Sales   |  | Self employed   |                    |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?     |                    | Amount of Contribution<br><br>\$100.00   |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                    |  |
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |                    |  |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                    |  |
| Method of contribution:   |  |   | Date Received      | Aggregate contributions                  |
| <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/23/2017         | \$100.00                                 |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>   | \$2,100.00   |
| <b>TOTAL of Section B Pages</b>   | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|  |  |   |                         |                        |            |
|--|--|---|-------------------------|------------------------|------------|
| NAME OF COMMITTEE: <i>(Provide Complete Name as Registered with Filing Repository)</i>   |  |   |                         | TYPE OF REPORT         |            |
| Ganim for Bridgeport '19   |  |   |                         | April 10 filing        |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br><i>(See instructions for definition of Small Contributor)</i>   |  |   |                         | Subtotal Section A     |            |
|  |  |   |                         | \$0.00                 |            |
| <b>B. Itemized Contributions from Individuals</b>  |  |   |                         |                        |            |
| Last Name  |  | First   |                         | M.I.                   |            |
| McGuire  |  | David   |                         |                        |            |
| Residential Street Address   |  | City  |                         | State                  | Zip Code   |
| 218 Lenore Dr  |  | Shelton   |                         | CT                     | 06484-1839 |
| Principal Occupation   |  | Name of Employer  |                         |                        |            |
| Manager  |  | Hocon Gas Inc   |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                        |            |
| Is this contribution associated with an event reported in Section L1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |                         | \$250.00               |            |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received   | Aggregate contributions |                        |            |
|  |  | 03/23/2017  | \$250.00                |                        |            |
| Last Name  |  | First   |                         | M.I.                   |            |
| Meehan   |  | Michael   |                         | S                      |            |
| Residential Street Address   |  | City  |                         | State                  | Zip Code   |
| 113 Seaside Ave  |  | Bridgeport  |                         | CT                     | 06605-3529 |
| Principal Occupation   |  | Name of Employer  |                         |                        |            |
| Firefighter  |  | City of Bridgeport  |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                        |            |
| Is this contribution associated with an event reported in Section L1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                         |                        |            |
| <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |                         | \$200.00               |            |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received   | Aggregate contributions |                        |            |
|  |  | 03/20/2017  | \$200.00                |                        |            |
| Last Name  |  | First   |                         | M.I.                   |            |
| Melfi  |  | Thomas  |                         |                        |            |
| Residential Street Address   |  | City  |                         | State                  | Zip Code   |
| 24 Collins Dr  |  | Branford  |                         | CT                     | 06405-3907 |
| Principal Occupation   |  | Name of Employer  |                         |                        |            |
| Attorney   |  | The Marcus Law Firm   |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No  |                         |                        |            |
| Is this contribution associated with an event reported in Section L1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |                         | \$250.00               |            |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received   | Aggregate contributions |                        |            |
|  |  | 03/23/2017  | \$250.00                |                        |            |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$700.00     |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

I. MONETARY RECEIPTS (Sections A-K)

|   |  |   |  |                         |            |
|---|--|---|--|-------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |  | TYPE OF REPORT          |            |
| Ganim for Bridgeport '19  |  |   |  | April 10 filing         |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |  | Subtotal Section A      |            |
|   |  |   |  | \$0.00                  |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |  |                         |            |
| Last Name   |  | First   |  | M.I.                    |            |
| Meyer   |  | R. Christopher  |  |                         |            |
| Residential Street Address  |  | City  |  | State                   | Zip Code   |
| 435 Midland St  |  | Bridgeport  |  | CT                      | 06605-3346 |
| Principal Occupation  |  | Name of Employer  |  |                         |            |
| Attorney  |  | city of bridgeport  |  |                         |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | Amount of Contribution  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | \$1,000.00              |            |
| Is this contribution associated with an event reported in Section L.1?<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |  |                         |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |  |                         |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 02/24/2017  |  | \$1,000.00              |            |
| Last Name   |  | First   |  | M.I.                    |            |
| Migliore  |  | James   |  |                         |            |
| Residential Street Address  |  | City  |  | State                   | Zip Code   |
| 99 MacArthur Rd   |  | Trumbull  |  | CT                      | 06611-3751 |
| Principal Occupation  |  | Name of Employer  |  |                         |            |
| Painter   |  | City of Bridgeport  |  |                         |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | Amount of Contribution  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | \$50.00                 |            |
| Is this contribution associated with an event reported in Section L.1?<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |  |                         |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |  |                         |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$50.00                 |            |
| Last Name   |  | First   |  | M.I.                    |            |
| Miko  |  | Dennis  |  | A                       |            |
| Residential Street Address  |  | City  |  | State                   | Zip Code   |
| 9 Kenwood Ln  |  | Trumbull  |  | CT                      | 06611-4609 |
| Principal Occupation  |  | Name of Employer  |  |                         |            |
| Information Requested   |  | Information Requested   |  |                         |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | Amount of Contribution  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No  |  | \$500.00                |            |
| Is this contribution associated with an event reported in Section L.1?<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |  |                         |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |  |                         |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/21/2017  |  | \$500.00                |            |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>   | \$1,550.00   |
| <b>TOTAL of Section B Pages</b>   | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |               |                               |            |
|---|--|---|---------------|-------------------------------|------------|
| NAME OF COMMITTEE <i>(Provide Complete Name as Registered with Filing Repository)</i>   |  |   |               | TYPE OF REPORT                |            |
| Ganim for Bridgeport '19  |  |   |               | April 10 filing               |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br><i>(See instructions for definition of Small Contributor)</i>  |  |   |               | Subtotal Section A            |            |
|   |  |   |               | \$0.00                        |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |               |                               |            |
| Last Name   |  | First   |               | M.I.                          |            |
| Miley   |  | Mathew  |               | E                             |            |
| Residential Street Address  |  | City  |               | State                         | Zip Code   |
| 145 Canal St, Unit 311  |  | Shelton   |               | CT                            | 06484-8111 |
| Principal Occupation  |  | Name of Employer  |               |                               |            |
| Safety Engineer   |  | Hocon Gas Inc   |               |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |               | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |               |                               |            |
| Is this contribution associated with an event reported in Section I.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |               |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | If yes, indicate which branch or branches of government the contract is with:   |               | \$250.00                      |            |
| If yes, list Event #  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |               |                               |            |
| Method of contribution:   |  |   | Date Received | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/22/2017    | \$250.00                      |            |
| Last Name   |  | First   |               | M.I.                          |            |
| Miozzi  |  | William   |               | G                             |            |
| Residential Street Address  |  | City  |               | State                         | Zip Code   |
| 1021 Aponi Rd SE  |  | Vienna  |               | VA                            | 22180-5910 |
| Principal Occupation  |  | Name of Employer  |               |                               |            |
| Attorney  |  | Winston & Strawn LLP  |               |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |               | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |               |                               |            |
| Is this contribution associated with an event reported in Section I.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |               |                               |            |
| <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No  |  | If yes, indicate which branch or branches of government the contract is with:   |               | \$100.00                      |            |
| If yes, list Event #  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |               |                               |            |
| Method of contribution:   |  |   | Date Received | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/21/2017    | \$100.00                      |            |
| Last Name   |  | First   |               | M.I.                          |            |
| Mladina   |  | Donna   |               |                               |            |
| Residential Street Address  |  | City  |               | State                         | Zip Code   |
| 120 Bick Ter  |  | Bridgeport  |               | CT                            | 06604-1407 |
| Principal Occupation  |  | Name of Employer  |               |                               |            |
| Service Agent   |  | Merit Insurance   |               |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |               | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |               |                               |            |
| Is this contribution associated with an event reported in Section I.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |               |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | If yes, indicate which branch or branches of government the contract is with:   |               | \$500.00                      |            |
| If yes, list Event #  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |               |                               |            |
| Method of contribution:   |  |   | Date Received | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/14/2017    | \$500.00                      |            |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>                               | \$850.00     |
| <b>TOTAL of Section B Pages</b>                                     | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b> | \$182,255.00 |
| <i>(Enter total on Line 13, Column A of Summary Page)</i>           |              |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |               |                         |            |
|---|--|---|---------------|-------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |               | TYPE OF REPORT          |            |
| Ganim for Bridgeport '19  |  |   |               | April 10 filing         |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |               | Subtotal Section A      |            |
|   |  |   |               | \$0.00                  |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |               |                         |            |
| Last Name   |  | First   |               | M.I.                    |            |
| Monahan   |  | Ursula  |               |                         |            |
| Residential Street Address  |  | City  |               | State                   | Zip Code   |
| 753 Lakeside Dr   |  | Bridgeport  |               | CT                      | 06606-1950 |
| Principal Occupation  |  | Name of Employer  |               |                         |            |
| Bookkeeper  |  | Self Employed   |               |                         |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |               | Amount of Contribution  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |               | \$100.00                |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |               |                         |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |               |                         |            |
| Method of contribution:   |  |   | Date Received | Aggregate contributions |            |
| <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/23/2017    | \$100.00                |            |
| Last Name   |  | First   |               | M.I.                    |            |
| Monelli   |  | Anthony   |               |                         |            |
| Residential Street Address  |  | City  |               | State                   | Zip Code   |
| 58 Amity Rd   |  | Bethany   |               | CT                      | 06524-3402 |
| Principal Occupation  |  | Name of Employer  |               |                         |            |
| Attorney  |  | self  |               |                         |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |               | Amount of Contribution  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |               | \$100.00                |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |               |                         |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |               |                         |            |
| Method of contribution:   |  |   | Date Received | Aggregate contributions |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/23/2017    | \$100.00                |            |
| Last Name   |  | First   |               | M.I.                    |            |
| Monteiro  |  | David   |               |                         |            |
| Residential Street Address  |  | City  |               | State                   | Zip Code   |
| 124 Henry Ave   |  | Stratford   |               | CT                      | 06614-4577 |
| Principal Occupation  |  | Name of Employer  |               |                         |            |
| Information Requested   |  | Severen T Svcs  |               |                         |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |               | Amount of Contribution  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |               | \$55.00                 |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |               |                         |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |               |                         |            |
| Method of contribution:   |  |   | Date Received | Aggregate contributions |            |
| <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/23/2017    | \$55.00                 |            |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$255.00     |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|  |  |   |                                       |   |                        |
|--|--|---|---------------------------------------|---|------------------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)   |  |   |                                       | TYPE OF REPORT                                  |                        |
| Ganim for Bridgeport '19   |  |   |                                       | April 10 filing                                 |                        |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)  |  |   |                                       | <b>Subtotal Section A</b>                       |                        |
|  |  |   |                                       | \$0.00  |                        |
| <b>B. Itemized Contributions from Individuals</b>  |  |   |                                       |   |                        |
| Last Name<br>Moran   |  | First<br>Jonue  |                                       | M.I.  |                        |
| Residential Street Address<br>95 Marion St   |  | City<br>Bridgeport  |                                       | State<br>CT                                     | Zip Code<br>06606-4678 |
| Principal Occupation<br>Insurance Agent  |  | Name of Employer<br>Allstate Insurance  |                                       |   |                        |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |                                       | <b>Amount of Contribution</b><br><br>\$1,000.00 |                        |
| Is this contribution associated with an event reported in Section L1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No                         |                                       |   |                        |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received<br>03/17/2017   | Aggregate contributions<br>\$1,000.00 |   |                        |
| Last Name<br>Moran   |  | First<br>Paige  |                                       | M.I.<br>D                                       |                        |
| Residential Street Address<br>6 Colonial Pl  |  | City<br>West Haven  |                                       | State<br>CT                                     | Zip Code<br>06516-7101 |
| Principal Occupation<br>Maintainer 1   |  | Name of Employer<br>City of Bridgeport  |                                       |   |                        |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |                                       | <b>Amount of Contribution</b><br><br>\$100.00   |                        |
| Is this contribution associated with an event reported in Section L1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No                         |                                       |   |                        |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received<br>03/22/2017   | Aggregate contributions<br>\$100.00   |   |                        |
| Last Name<br>Morque  |  | First<br>Kim  |                                       | M.I.  |                        |
| Residential Street Address<br>65 Grace Church St   |  | City<br>Rye   |                                       | State<br>NY                                     | Zip Code<br>10580-3947 |
| Principal Occupation<br>Real Estate Exec   |  | Name of Employer<br>Spinnaker Real Estate Partners  |                                       |   |                        |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |                                       | <b>Amount of Contribution</b><br><br>\$500.00   |                        |
| Is this contribution associated with an event reported in Section L1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No                         |                                       |   |                        |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received<br>03/21/2017   | Aggregate contributions<br>\$500.00   |   |                        |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$1,600.00   |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |                       |                         |            |
|---|--|---|-----------------------|-------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |                       | TYPE OF REPORT          |            |
| Ganim for Bridgeport '19  |  |   |                       | April 10 filing         |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |                       | Subtotal Section A      |            |
|   |  |   |                       | \$0.00                  |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                       |                         |            |
| Last Name   |  | First   |                       | M.I.                    |            |
| Nastu   |  | Lee   |                       | P                       |            |
| Residential Street Address  |  | City  |                       | State                   | Zip Code   |
| 172 Toll House Ln   |  | Fairfield   |                       | CT                      | 06825-1052 |
| Principal Occupation  |  |   | Name of Employer      |                         |            |
| Information Requested   |  |   | Information Requested |                         |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                       | Amount of Contribution  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No  |                       | \$100.00                |            |
| Is this contribution associated with an event reported in Section L1?<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                       |                         |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                       |                         |            |
| Method of contribution:   |  |   | Date Received         | Aggregate contributions |            |
| <input checked="" type="checkbox"/> Cash<br><input type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  |   | 03/20/2017            | \$100.00                |            |
| Last Name   |  | First   |                       | M.I.                    |            |
| Nault   |  | Ronald  |                       |                         |            |
| Residential Street Address  |  | City  |                       | State                   | Zip Code   |
| 21 Bayberry Ln  |  | Guilford  |                       | CT                      | 06437-3135 |
| Principal Occupation  |  |   | Name of Employer      |                         |            |
| Engineer  |  |   | DeCarlo and Dell      |                         |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                       | Amount of Contribution  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                       | \$500.00                |            |
| Is this contribution associated with an event reported in Section L1?<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                       |                         |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                       |                         |            |
| Method of contribution:   |  |   | Date Received         | Aggregate contributions |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  |   | 03/31/2017            | \$500.00                |            |
| Last Name   |  | First   |                       | M.I.                    |            |
| Nelson  |  | Peter   |                       | E                       |            |
| Residential Street Address  |  | City  |                       | State                   | Zip Code   |
| 219 Anson St  |  | Stratford   |                       | CT                      | 06614-2802 |
| Principal Occupation  |  |   | Name of Employer      |                         |            |
| Information Requested   |  |   | Information Requested |                         |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                       | Amount of Contribution  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                       | \$200.00                |            |
| Is this contribution associated with an event reported in Section L1?<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                       |                         |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                       |                         |            |
| Method of contribution:   |  |   | Date Received         | Aggregate contributions |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  |   | 03/21/2017            | \$200.00                |            |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$800.00     |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|  |  |   |                                       |
|--|--|---|---------------------------------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)   |  | TYPE OF REPORT  |                                       |
| Ganim for Bridgeport '19   |  | April 10 filing   |                                       |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)  |  | Subtotal Section A  |                                       |
|  |  | \$0.00  |                                       |
| <b>B. Itemized Contributions from Individuals</b>  |  |   |                                       |
| Last Name<br>Nelson  |  | First<br>Stephen  |                                       |
| Residential Street Address<br>24A Stone Ridge Rd   |  | City<br>Bridgeport  | State<br>CT                           |
|  |  | Zip Code<br>06606-2576  |                                       |
| Principal Occupation<br>Retired  |  | Name of Employer<br>City of Bridgeport  |                                       |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |                                       |
| Is this contribution associated with an event reported in Section I.1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No                          |                                       |
| Method of contribution:<br><input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit/Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | Date Received<br>03/23/2017   | Aggregate contributions<br>\$250.00   |
| Last Name<br>Nkwo  |  | First<br>Nestor   |                                       |
| Residential Street Address<br>75 Eaton St  |  | City<br>Bridgeport  | State<br>CT                           |
|  |  | Zip Code<br>06604-2219  |                                       |
| Principal Occupation<br>Accounting/Finance   |  | Name of Employer<br>City of Bridgeport  |                                       |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |                                       |
| Is this contribution associated with an event reported in Section I.1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No                          |                                       |
| Method of contribution:<br><input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | Date Received<br>03/12/2017   | Aggregate contributions<br>\$1,000.00 |
| Last Name<br>Nunez   |  | First<br>Paul   |                                       |
| Residential Street Address<br>70 Marvel Rd   |  | City<br>New Haven   | State<br>CT                           |
|  |  | Zip Code<br>06515-2118  |                                       |
| Principal Occupation<br>Lobbyist   |  | Name of Employer<br>DePiro, Nunez & Biggs   |                                       |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |                                       |
| Is this contribution associated with an event reported in Section I.1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No                          |                                       |
| Method of contribution:<br><input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit/Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | Date Received<br>03/22/2017   | Aggregate contributions<br>\$500.00   |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>   | \$1,750.00   |
| <b>TOTAL of Section B Pages</b>   | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |                         |                        |            |
|---|--|---|-------------------------|------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |                         | TYPE OF REPORT         |            |
| Ganim for Bridgeport '19  |  |   |                         | April 10 filing        |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br><i>(See instructions for definition of Small Contributor)</i>  |  |   |                         | Subtotal Section A     |            |
|   |  |   |                         | \$0.00                 |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                         |                        |            |
| Last Name   |  | First   |                         | MI                     |            |
| O'Brien   |  | James   |                         | K                      |            |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |
| 22 Fernwood Rd  |  | West Hartford   |                         | CT                     | 06119-1163 |
| Principal Occupation  |  | Name of Employer  |                         |                        |            |
| Lobbyist  |  | The Connecticut Group LLC   |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                        |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                         | \$500.00               |            |
| Method of contribution:   |  |   |                         |                        |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | Date Received   | Aggregate contributions |                        |            |
|   |  | 03/23/2017  | \$500.00                |                        |            |
| Last Name   |  | First   |                         | MI                     |            |
| O'Donnell   |  | Nancy   |                         |                        |            |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |
| 10 Eastern Pkwy   |  | Milford   |                         | CT                     | 06460-5001 |
| Principal Occupation  |  | Name of Employer  |                         |                        |            |
| Police Lieutenant   |  | City of Bridgeport  |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                        |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                         | \$500.00               |            |
| Method of contribution:   |  |   |                         |                        |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | Date Received   | Aggregate contributions |                        |            |
|   |  | 03/19/2017  | \$500.00                |                        |            |
| Last Name   |  | First   |                         | MI                     |            |
| Oliveira  |  | Fernanda  |                         |                        |            |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |
| 34 Brookfield Rd  |  | Seymour   |                         | CT                     | 06483-2378 |
| Principal Occupation  |  | Name of Employer  |                         |                        |            |
| Project Coordinator   |  | Information Requested   |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                        |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                         | \$100.00               |            |
| Method of contribution:   |  |   |                         |                        |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | Date Received   | Aggregate contributions |                        |            |
|   |  | 03/06/2017  | \$100.00                |                        |            |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$1,100.00   |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

I. MONETARY RECEIPTS (Sections A-K)

|   |  |   |                    |                           |                         |
|---|--|---|--------------------|---------------------------|-------------------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |                    | TYPE OF REPORT            |                         |
| Ganim for Bridgeport '19  |  |   |                    | April 10 filing           |                         |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |                    | <b>Subtotal Section A</b> |                         |
|   |  |   |                    | \$0.00                    |                         |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                    |                           |                         |
| Last Name   |  | First   |                    | M.I.                      |                         |
| Ortiz   |  | Veronica  |                    |                           |                         |
| Residential Street Address  |  | City  |                    | State                     | Zip Code                |
| 88 Raleigh Rd   |  | Bridgeport  |                    | CT                        | 06606-1037              |
| Principal Occupation  |  |   | Name of Employer   |                           |                         |
| Mayor's Aide  |  |   | City of Bridgeport |                           |                         |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                    | Amount of Contribution    |                         |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                    |                           |                         |
| Is this contribution associated with an event reported in Section I.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |                    | \$500.00                  |                         |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative        |                    |                           |                         |
| Method of contribution:   |  |   |                    | Date Received             | Aggregate contributions |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   |                    | 03/15/2017                | \$500.00                |
| Last Name   |  | First   |                    | M.I.                      |                         |
| Ossei   |  | Kingsley  |                    |                           |                         |
| Residential Street Address  |  | City  |                    | State                     | Zip Code                |
| 120 Hinting TnPk  |  | Bridgeport  |                    | CT                        | 06610                   |
| Principal Occupation  |  |   | Name of Employer   |                           |                         |
| Information Requested   |  |   | City of Bridgeport |                           |                         |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                    | Amount of Contribution    |                         |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                    |                           |                         |
| Is this contribution associated with an event reported in Section I.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |                    | \$50.00                   |                         |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative        |                    |                           |                         |
| Method of contribution:   |  |   |                    | Date Received             | Aggregate contributions |
| <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   |                    | 03/23/2017                | \$50.00                 |
| Last Name   |  | First   |                    | M.I.                      |                         |
| Owen  |  | Austin  |                    | J                         |                         |
| Residential Street Address  |  | City  |                    | State                     | Zip Code                |
| 4 Whippoorwill Ln   |  | Stratford   |                    | CT                        | 06614-2470              |
| Principal Occupation  |  |   | Name of Employer   |                           |                         |
| Contribution Manager  |  |   | City of Bridgeport |                           |                         |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                    | Amount of Contribution    |                         |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                    |                           |                         |
| Is this contribution associated with an event reported in Section I.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |                    | \$100.00                  |                         |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative        |                    |                           |                         |
| Method of contribution:   |  |   |                    | Date Received             | Aggregate contributions |
| <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   |                    | 03/22/2017                | \$100.00                |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>   | \$650.00     |
| <b>TOTAL of Section B Pages</b>   | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | \$182,255.00 |

I. MONETARY RECEIPTS (Sections A-K)

|  |   |   |  |
|--|---|---|--|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)   |   | TYPE OF REPORT                            |  |
| Ganim for Bridgeport '19   |   | April 10 filing                           |  |
| A. Total Contributions from Small Contributors - Received this Period ONLY<br>(See instructions for definition of Small Contributor)   |   | Subtotal Section A \$0.00                 |  |
| <b>B. Itemized Contributions from Individuals</b>  |   |   |  |
| Last Name<br>Owens   |   | First<br>Ronell                           |  |
| Residential Street Address<br>399 Main Ave, Apt 721  |   | City<br>Norwalk                           | State<br>CT                            |
| Principal Occupation<br>Information Requested  |   | Name of Employer<br>Information Requested |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |   | Amount of Contribution<br><br>\$250.00 |
| Is this contribution associated with an event reported in Section L.1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #   | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No                             |   |  |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |   | Date Received<br>03/23/2017               |  |
| Last Name<br>Pacacha   |   | First<br>Ronald                           |  |
| Residential Street Address<br>PO Box 5481M   |   | City<br>Madison                           | State<br>CT                            |
| Principal Occupation<br>Information Requested  |   | Name of Employer<br>Information Requested |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |   | Amount of Contribution<br><br>\$250.00 |
| Is this contribution associated with an event reported in Section L.1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #   | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No                             |   |  |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |   | Date Received<br>03/17/2017               |  |
| Last Name<br>Pagnozzi  |   | First<br>Mark                             |  |
| Residential Street Address<br>340 Goldenrod Ave  |   | City<br>Bridgeport                        | State<br>CT                            |
| Principal Occupation<br>Construction Supervisor  |   | Name of Employer<br>Severn Trent Services |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |   | Amount of Contribution<br><br>\$100.00 |
| Is this contribution associated with an event reported in Section L.1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #   | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No                             |   |  |
| Method of contribution:<br><input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |   | Date Received<br>03/23/2017               |  |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>   | \$600.00     |
| <b>TOTAL of Section B Pages</b>   | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |  |                               |            |
|---|--|---|--|-------------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |  | TYPE OF REPORT                |            |
| Ganim for Bridgeport '19  |  |   |  | April 10 filing               |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |  | Subtotal Section A            |            |
|   |  |   |  | \$0.00                        |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |  |                               |            |
| Last Name   |  | First   |  | M.I.                          |            |
| Paoletto  |  | Anthony   |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 321 Lynne Pl  |  | Bridgeport  |  | CT                            | 06610-1233 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Security  |  | St Vincent's Hospital   |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |  | <b>\$100.00</b>               |            |
| <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No<br>If yes, list Event # 032317a  |  | If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions       |            |
| <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$100.00                      |            |
| Last Name   |  | First   |  | M.I.                          |            |
| Paoletto  |  | Richard   |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 321 Lynne Pl  |  | Bridgeport  |  | CT                            | 06610-1233 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Retired   |  | retired   |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |  | <b>\$100.00</b>               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  |  | If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$100.00                      |            |
| Last Name   |  | First   |  | M.I.                          |            |
| Papa  |  | Joan  |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 415 Buckskin Ln   |  | Stratford   |  | CT                            | 06614      |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Information Requested   |  | Information Requested   |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |  | <b>\$500.00</b>               |            |
| <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No<br>If yes, list Event # 032317a  |  | If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/30/2017  |  | \$500.00                      |            |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>   | \$700.00     |
| <b>TOTAL of Section B Pages</b>   | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |                         |                        |            |
|---|--|---|-------------------------|------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |                         | TYPE OF REPORT         |            |
| Ganim for Bridgeport '19  |  |   |                         | April 10 filing        |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |                         | Subtotal Section A     |            |
|   |  |   |                         | \$0.00                 |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                         |                        |            |
| Last Name   |  | First   |                         | M.I.                   |            |
| Papa  |  | Tammy   |                         | L                      |            |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |
| 223 Algonquin Trl   |  | Trumbull  |                         | CT                     | 06611-4580 |
| Principal Occupation  |  | Name of Employer  |                         |                        |            |
| Director of Youth Svcs  |  | City of Bridgeport  |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No  |                         |                        |            |
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                         | \$250.00               |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                        |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/16/2017  | \$250.00                |                        |            |
| Last Name   |  | First   |                         | M.I.                   |            |
| Parafati  |  | Katie   |                         |                        |            |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |
| 33 Spring St, Apt B1  |  | Plainville  |                         | CT                     | 06062-3263 |
| Principal Occupation  |  | Name of Employer  |                         |                        |            |
| Information Requested   |  | Construction Resources Inc  |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                        |            |
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                         | \$1,000.00             |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                        |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/22/2017  | \$1,000.00              |                        |            |
| Last Name   |  | First   |                         | M.I.                   |            |
| Parente   |  | Michael   |                         |                        |            |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |
| 91 Shelton Rd   |  | Trumbull  |                         | CT                     | 06611-5147 |
| Principal Occupation  |  | Name of Employer  |                         |                        |            |
| Information Requested   |  | Information Requested   |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                        |            |
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                         | \$250.00               |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                        |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/23/2017  | \$250.00                |                        |            |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>   | \$1,500.00   |
| <b>TOTAL of Section B Pages</b>   | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |                         |   |            |
|---|--|---|-------------------------|---|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |                         | TYPE OF REPORT                                  |            |
| Ganim for Bridgeport '19  |  |   |                         | April 10 filing                                 |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |                         | <b>Subtotal Section A</b> \$0.00                |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                         |   |            |
| Last Name   |  | First   |                         | M.I.  |            |
| Parente-Dimartino   |  | Michelle  |                         |   |            |
| Residential Street Address  |  | City  |                         | State   | Zip Code   |
| 23 Randolph Farm Rd   |  | Milford   |                         | CT  | 06461-1968 |
| Principal Occupation  |  | Name of Employer  |                         |   |            |
| consultant  |  | Self  |                         |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | <b>Amount of Contribution</b><br><br>\$250.00   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |   |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                         |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                         |   |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |   |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  | \$250.00                |   |            |
| Last Name   |  | First   |                         | M.I.  |            |
| Paris   |  | Catherine   |                         | D   |            |
| Residential Street Address  |  | City  |                         | State   | Zip Code   |
| 620 Silver Ln   |  | Stratford   |                         | CT  | 06614-2042 |
| Principal Occupation  |  | Name of Employer  |                         |   |            |
| Manager   |  | Sports Center of CT   |                         |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | <b>Amount of Contribution</b><br><br>\$1,000.00 |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |   |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                         |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                         |   |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |   |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  | \$1,000.00              |   |            |
| Last Name   |  | First   |                         | M.I.  |            |
| Parisi  |  | Gabrielle   |                         |   |            |
| Residential Street Address  |  | City  |                         | State   | Zip Code   |
| 151 Astoria Ave   |  | Bridgeport  |                         | CT  | 06604-1707 |
| Principal Occupation  |  | Name of Employer  |                         |   |            |
| Internal Auditor  |  | City of Bridgeport  |                         |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | <b>Amount of Contribution</b><br><br>\$500.00   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |   |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                         |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                         |   |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |   |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/16/2017  | \$700.00                |   |            |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$1,750.00   |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |  |                               |            |
|---|--|---|--|-------------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |  | TYPE OF REPORT                |            |
| Ganim for Bridgeport '19  |  |   |  | April 10 filing               |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |  | <b>Subtotal Section A</b>     |            |
|   |  |   |  | \$0.00                        |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |  |                               |            |
| Last Name   |  | First   |  | M.I.                          |            |
| Parisi  |  | Gabrielle   |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 151 Astoria Ave   |  | Bridgeport  |  | CT                            | 06604-1707 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Internal Auditor  |  | City of Bridgeport  |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |  | \$200.00                      |            |
| Method of contribution:   |  | Date Received   |  |                               |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$700.00                      |            |
| Last Name   |  | First   |  | M.I.                          |            |
| Parisi  |  | Stephen   |  | P                             |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 151 Astoria Ave   |  | Bridgeport  |  | CT                            | 06604-1707 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Custodian   |  | Fairfield Public School   |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |  | \$50.00                       |            |
| Method of contribution:   |  | Date Received   |  |                               |            |
| <input checked="" type="checkbox"/> Cash<br><input type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/17/2017  |  | \$50.00                       |            |
| Last Name   |  | First   |  | M.I.                          |            |
| Parisi  |  | Virginia  |  | F                             |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 151 Astoria Ave   |  | Bridgeport  |  | CT                            | 06604-1707 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Retired   |  | Information Requested   |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |  | \$50.00                       |            |
| Method of contribution:   |  | Date Received   |  |                               |            |
| <input checked="" type="checkbox"/> Cash<br><input type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/15/2017  |  | \$50.00                       |            |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$300.00     |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |  |                               |            |
|---|--|---|--|-------------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |  | TYPE OF REPORT                |            |
| Ganim for Bridgeport '19  |  |   |  | April 10 filing               |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |  | <b>Subtotal Section A</b>     |            |
|   |  |   |  | <b>\$0.00</b>                 |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |  |                               |            |
| Last Name   |  | First   |  | M.I.                          |            |
| Passaretti  |  | Joseph  |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 5 Lincoln Dr  |  | Wallingford   |  | CT                            | 06492-5117 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Attorney  |  | Montstream and May LLP  |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section I.I?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |  | <b>\$500.00</b>               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |  |                               |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$500.00                      |            |
| Last Name   |  | First   |  | M.I.                          |            |
| Patel   |  | Pranay  |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 20 French Ave   |  | East Haven  |  | CT                            | 06512-3314 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Liquor Store Owner  |  | Self  |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section I.I?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |  | <b>\$1,000.00</b>             |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |  |                               |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/30/2017  |  | \$1,000.00                    |            |
| Last Name   |  | First   |  | M.I.                          |            |
| Paterno   |  | Thomas  |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 130 Folino Dr   |  | Bridgeport  |  | CT                            | 06606-1011 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Retired   |  | Retired   |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section I.I?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |  | <b>\$250.00</b>               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |  |                               |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/20/2017  |  | \$250.00                      |            |

|  |                     |
|--|---------------------|
| <b>SUBTOTAL Section B - This Page</b>  | <b>\$1,750.00</b>   |
| <b>TOTAL of Section B Pages</b>  | <b>\$182,255.00</b> |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | <b>\$182,255.00</b> |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |                       |                         |            |
|---|--|---|-----------------------|-------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |                       | TYPE OF REPORT          |            |
| Ganim for Bridgeport '19  |  |   |                       | April 10 filing         |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |                       | Subtotal Section A      |            |
|   |  |   |                       | \$0.00                  |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                       |                         |            |
| Last Name   |  | First   |                       | M.I.                    |            |
| Perez   |  | Armando J.  |                       |                         |            |
| Residential Street Address  |  | City  |                       | State                   | Zip Code   |
| 14 Sally Ann Dr   |  | Trumbull  |                       | CT                      | 06611-1807 |
| Principal Occupation  |  |   | Name of Employer      |                         |            |
| Chief of Police   |  |   | City of Bridgeport    |                         |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                       | Amount of Contribution  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                       | \$1,000.00              |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                       |                         |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |                       |                         |            |
| Method of contribution:   |  |   | Date Received         | Aggregate contributions |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit-Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/16/2017            | \$1,000.00              |            |
| Last Name   |  | First   |                       | M.I.                    |            |
| Perez   |  | Kelly   |                       |                         |            |
| Residential Street Address  |  | City  |                       | State                   | Zip Code   |
| 76 Evers Pl   |  | Bridgeport  |                       | CT                      | 06610-1430 |
| Principal Occupation  |  |   | Name of Employer      |                         |            |
| Administrative Assistant  |  |   | City of Bridgeport    |                         |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                       | Amount of Contribution  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                       | \$100.00                |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                       |                         |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |                       |                         |            |
| Method of contribution:   |  |   | Date Received         | Aggregate contributions |            |
| <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit-Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/18/2017            | \$100.00                |            |
| Last Name   |  | First   |                       | M.I.                    |            |
| Perez   |  | Max   |                       |                         |            |
| Residential Street Address  |  | City  |                       | State                   | Zip Code   |
| 25 Driftwood Ln   |  | Trumbull  |                       | CT                      | 06611-1803 |
| Principal Occupation  |  |   | Name of Employer      |                         |            |
| Information Requested   |  |   | Information Requested |                         |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                       | Amount of Contribution  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                       | \$100.00                |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                       |                         |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |                       |                         |            |
| Method of contribution:   |  |   | Date Received         | Aggregate contributions |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit-Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/16/2017            | \$600.00                |            |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$1,200.00   |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |  |
|---|--|---|--|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  | TYPE OF REPORT  |  |
| Ganim for Bridgeport '19  |  | April 10 filing   |  |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  | Subtotal Section A  |  |
|   |  | \$0.00  |  |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |  |
| Last Name   |  | First   |  |
| Perez   |  | Max   |  |
| Residential Street Address  |  | City  |  |
| 25 Driftwood Ln   |  | Trumbull  |  |
| State   |  | Zip Code  |  |
| CT  |  | 06611-1803  |  |
| Principal Occupation  |  | Name of Employer  |  |
| Information Requested   |  | Information Requested   |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |
| Is this contribution associated with an event reported in Section L.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |  |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative        |  |
| Method of contribution:   |  | Date Received   |  |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/17/2017  |  |
|   |  | Aggregate contributions   |  |
|   |  | \$600.00  |  |
| Last Name   |  | First   |  |
| Perez   |  | Rosa  |  |
| Residential Street Address  |  | City  |  |
| 76 Evers Pl   |  | Bridgeport  |  |
| State   |  | Zip Code  |  |
| CT  |  | 06610-1430  |  |
| Principal Occupation  |  | Name of Employer  |  |
| Information Requested   |  | Information Requested   |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |
| Is this contribution associated with an event reported in Section L.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |  |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative        |  |
| Method of contribution:   |  | Date Received   |  |
| <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/18/2017  |  |
|   |  | Aggregate contributions   |  |
|   |  | \$100.00  |  |
| Last Name   |  | First   |  |
| Perrera   |  | John  |  |
| Residential Street Address  |  | City  |  |
| 15 Larkey Rd  |  | Oxford  |  |
| State   |  | Zip Code  |  |
| CT  |  | 06478-1120  |  |
| Principal Occupation  |  | Name of Employer  |  |
| Maintenance Supervisor  |  | Severn Trent Svcs   |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |
| Is this contribution associated with an event reported in Section L.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |  |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative        |  |
| Method of contribution:   |  | Date Received   |  |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  |  |
|   |  | Aggregate contributions   |  |
|   |  | \$1,000.00  |  |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>   | \$1,600.00   |
| <b>TOTAL of Section B Pages</b>   | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |                              |  |            |
|---|--|---|------------------------------|--|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |                              | TYPE OF REPORT                               |            |
| Ganim for Bridgeport '19  |  |   |                              | April 10 filing                              |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |                              | Subtotal Section A                           |            |
|   |  |   |                              | \$0.00                                       |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                              |  |            |
| Last Name   |  | First   |                              | M.I.   |            |
| Petrocelli  |  | Tara  |                              |  |            |
| Residential Street Address  |  | City  |                              | State  | Zip Code   |
| 16 Fox St   |  | Bridgeport  |                              | CT   | 06605-3230 |
| Principal Occupation  |  |   | Name of Employer             |  |            |
| CDBG Program Mgr  |  |   | City of Bridgeport           |  |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                              | <b>Amount of Contribution</b>                |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                              |  |            |
| Is this contribution associated with an event reported in Section L1?<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                              |  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                              | <b>\$150.00</b>                              |            |
| Method of contribution:   |  | Date Received   |                              |  |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/20/2017  |                              | Aggregate contributions<br><b>\$150.00</b>   |            |
| Last Name   |  | First   |                              | M.I.   |            |
| Piccirillo  |  | Jay   |                              |  |            |
| Residential Street Address  |  | City  |                              | State  | Zip Code   |
| 712 Madison Ave   |  | Bridgeport  |                              | CT   | 06606-5511 |
| Principal Occupation  |  |   | Name of Employer             |  |            |
| Ice cream/Entertainment   |  |   | Micalaizzi's                 |  |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                              | <b>Amount of Contribution</b>                |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                              |  |            |
| Is this contribution associated with an event reported in Section L1?<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                              |  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                              | <b>\$200.00</b>                              |            |
| Method of contribution:   |  | Date Received   |                              |  |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/10/2017  |                              | Aggregate contributions<br><b>\$200.00</b>   |            |
| Last Name   |  | First   |                              | M.I.   |            |
| Pierpont  |  | Samuel  |                              |  |            |
| Residential Street Address  |  | City  |                              | State  | Zip Code   |
| 19 5 Mile River Rd  |  | Darien  |                              | CT   | 06820-6231 |
| Principal Occupation  |  |   | Name of Employer             |  |            |
| Real Estate   |  |   | Bridgeport Innovation Center |  |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                              | <b>Amount of Contribution</b>                |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                              |  |            |
| Is this contribution associated with an event reported in Section L1?<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                              |  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                              | <b>\$1,000.00</b>                            |            |
| Method of contribution:   |  | Date Received   |                              |  |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/15/2017  |                              | Aggregate contributions<br><b>\$1,000.00</b> |            |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>                               | \$1,350.00   |
| <b>TOTAL of Section B Pages</b>                                     | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b> | \$182,255.00 |
| <i>(Enter total on Line 13, Column A of Summary Page)</i>           |              |

**I. MONETARY RECEIPTS (Sections A-K)**

|  |  |   |   |  |                               |
|--|--|---|---|--|-------------------------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)   |  |   |   | TYPE OF REPORT   |                               |
| Ganim for Bridgeport '19   |  |   |   | April 10 filing  |                               |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)  |  |   |   | Subtotal Section A                                     |                               |
|  |  |   |   | \$0.00   |                               |
| <b>B. Itemized Contributions from Individuals</b>  |  |   |   |  |                               |
| Last Name<br><b>Pires</b>  |  | First<br><b>Antonio</b>   |   | M.I.   |                               |
| Residential Street Address<br><b>47 Saint Nicholas Dr</b>  |  | City<br><b>Bridgeport</b>   |   | State<br><b>CT</b>                                     | Zip Code<br><b>06604-1023</b> |
| Principal Occupation<br><b>Information Requested</b>   |  |   | Name of Employer<br><b>Retired</b>            |  |                               |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |   | <b>Amount of Contribution</b><br><br><b>\$500.00</b>   |                               |
| Is this contribution associated with an event reported in Section I.1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No                   |   |  |                               |
| Method of contribution:<br><input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit/Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | Date Received<br><b>03/22/2017</b>  | Aggregate contributions<br><b>\$500.00</b>    |  |                               |
| Last Name<br><b>Pires</b>  |  | First<br><b>Maria</b>   |   | M.I.   |                               |
| Residential Street Address<br><b>45 Fleet St</b>   |  | City<br><b>Bridgeport</b>   |   | State<br><b>CT</b>                                     | Zip Code<br><b>06606-2325</b> |
| Principal Occupation<br><b>Special Project Coordinator</b>   |  |   | Name of Employer<br><b>City of Bridgeport</b> |  |                               |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |   | <b>Amount of Contribution</b><br><br><b>\$1,000.00</b> |                               |
| Is this contribution associated with an event reported in Section I.1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No                   |   |  |                               |
| Method of contribution:<br><input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit/Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | Date Received<br><b>03/15/2017</b>  | Aggregate contributions<br><b>\$1,000.00</b>  |  |                               |
| Last Name<br><b>Piviotto</b>   |  | First<br><b>Elaine</b>  |   | M.I.   |                               |
| Residential Street Address<br><b>2625 Park Ave, 9E</b>   |  | City<br><b>Bridgeport</b>   |   | State<br><b>CT</b>                                     | Zip Code<br><b>06604-1322</b> |
| Principal Occupation<br><b>Process Server</b>  |  |   | Name of Employer<br><b>Self</b>               |  |                               |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |   | <b>Amount of Contribution</b><br><br><b>\$200.00</b>   |                               |
| Is this contribution associated with an event reported in Section I.1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No                   |   |  |                               |
| Method of contribution:<br><input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit/Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | Date Received<br><b>03/19/2017</b>  | Aggregate contributions<br><b>\$200.00</b>    |  |                               |

|  |                     |
|--|---------------------|
| <b>SUBTOTAL Section B - This Page</b>  | <b>\$1,700.00</b>   |
| <b>TOTAL of Section B Pages</b>  | <b>\$182,255.00</b> |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | <b>\$182,255.00</b> |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |  |                               |            |
|---|--|---|--|-------------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |  | TYPE OF REPORT                |            |
| Ganim for Bridgeport '19  |  |   |  | April 10 filing               |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |  | Subtotal Section A            |            |
|   |  |   |  | \$0.00                        |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |  |                               |            |
| Last Name   |  | First   |  | M.I.                          |            |
| Pizarro   |  | Daniel  |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 1491 Huntington Tpke  |  | Trumbull  |  | CT                            | 06611-5341 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Information Requested   |  | City of Bridgeport  |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section L.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |  | <b>\$1,000.00</b>             |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i>  |  |                               |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/21/2017  |  | \$1,000.00                    |            |
| Last Name   |  | First   |  | M.I.                          |            |
| Pontoriero  |  | Mary  |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 120 Oneida Dr   |  | Greenwich   |  | CT                            | 06830-7132 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Retired   |  | Information Requested   |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section L.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |  | <b>\$500.00</b>               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i>  |  |                               |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/27/2017  |  | \$500.00                      |            |
| Last Name   |  | First   |  | M.I.                          |            |
| Portnova  |  | Daniel  |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 95 Teller Rd  |  | Trumbull  |  | CT                            | 06611-1421 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Attorney  |  | Self  |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section L.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |  | <b>\$500.00</b>               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i>  |  |                               |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/05/2017  |  | \$500.00                      |            |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>                               | \$2,000.00   |
| <b>TOTAL of Section B Pages</b>                                     | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b> | \$182,255.00 |
| <i>(Enter total on Line 13, Column A of Summary Page)</i>           |              |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |  |   |            |
|---|--|---|--|---|------------|
| NAME OF COMMITTEE <i>(Provide Complete Name as Registered with Filing Repository)</i>   |  |   |  | TYPE OF REPORT                                  |            |
| Ganim for Bridgeport '19  |  |   |  | April 10 filing                                 |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br><i>(See instructions for definition of Small Contributor)</i>  |  |   |  | Subtotal Section A                              |            |
|   |  |   |  | \$0.00  |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |  |   |            |
| Last Name   |  | First   |  | M.I.  |            |
| Prete   |  | Neil  |  |   |            |
| Residential Street Address  |  | City  |  | State   | Zip Code   |
| 800 Grassy Hill Rd  |  | Orange  |  | CT  | 06477-1653 |
| Principal Occupation  |  | Name of Employer  |  |   |            |
| President   |  | A Prete Construction  |  |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b><br><br>\$1,000.00 |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |   |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |  |   |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions                         |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$1,000.00                                      |            |
| Last Name   |  | First   |  | M.I.  |            |
| Prezioso  |  | Eileen  |  |   |            |
| Residential Street Address  |  | City  |  | State   | Zip Code   |
| 100 Parrott Dr, Unit 501  |  | Shelton   |  | CT  | 06484-4787 |
| Principal Occupation  |  | Name of Employer  |  |   |            |
| Mgr   |  | Vanzzano's Four Seasons   |  |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b><br><br>\$200.00   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |   |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |  |   |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions                         |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$200.00  |            |
| Last Name   |  | First   |  | M.I.  |            |
| Quellette   |  | Lawrence  |  | A   |            |
| Residential Street Address  |  | City  |  | State   | Zip Code   |
| 11 Fernwood Ln  |  | Clinton   |  | CT  | 06413-1250 |
| Principal Occupation  |  | Name of Employer  |  |   |            |
| Associate City Attorney   |  | City of Bridgeport  |  |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b><br><br>\$1,000.00 |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |   |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |  |   |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions                         |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/15/2017  |  | \$1,000.00                                      |            |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$2,200.00   |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |  |   |            |
|---|--|---|--|---|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |  | TYPE OF REPORT                                  |            |
| Ganim for Bridgeport '19  |  |   |  | April 10 filing                                 |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |  | Subtotal Section A                              |            |
|   |  |   |  | \$0.00  |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |  |   |            |
| Last Name   |  | First   |  | M.I.  |            |
| Ravenstine  |  | Geof  |  |   |            |
| Residential Street Address  |  | City  |  | State   | Zip Code   |
| 92 Botsford Hill Rd   |  | Roxbury   |  | CT  | 06783-1603 |
| Principal Occupation  |  | Name of Employer  |  |   |            |
| CFO   |  | Corvas Capital Partners LLC   |  |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b><br><br>\$1,000.00 |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |   |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |  |   |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions                         |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/22/2017  |  | \$1,000.00                                      |            |
| Last Name   |  | First   |  | M.I.  |            |
| Recchia   |  | Frank   |  | P   |            |
| Residential Street Address  |  | City  |  | State   | Zip Code   |
| 20 Bishop St  |  | New Haven   |  | CT  | 06511-3932 |
| Principal Occupation  |  | Name of Employer  |  |   |            |
| TV Reporter   |  | New 12 CT   |  |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b><br><br>\$100.00   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |   |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |  |   |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions                         |            |
| <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$100.00  |            |
| Last Name   |  | First   |  | M.I.  |            |
| Recchia   |  | Patsy   |  |   |            |
| Residential Street Address  |  | City  |  | State   | Zip Code   |
| 20 Bishop St  |  | New Haven   |  | CT  | 06511-3932 |
| Principal Occupation  |  | Name of Employer  |  |   |            |
| Information Requested   |  | retired   |  |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b><br><br>\$100.00   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |   |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |  |   |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions                         |            |
| <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$100.00  |            |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$1,200.00   |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |                    |   |            |
|---|--|---|--------------------|---|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   | TYPE OF REPORT     |   |            |
| Ganim for Bridgeport '19  |  |   | April 10 filing    |   |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   | Subtotal Section A |   |            |
|   |  |   | \$0.00             |   |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                    |   |            |
| Last Name   |  | First   |                    | M.I.  |            |
| Reed  |  | Luis  |                    | L   |            |
| Residential Street Address  |  | City  |                    | State   | Zip Code   |
| 189 Smith St  |  | Bridgeport  |                    | CT  | 06607-2220 |
| Principal Occupation  |  | Name of Employer  |                    |   |            |
| Mira Pgm Manager  |  | City of Bridgeport  |                    |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                    | <b>Amount of Contribution</b><br><br>\$250.00   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                    |   |            |
| Is this contribution associated with an event reported in Section L1?<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                    |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |                    |   |            |
| Method of contribution:   |  |   | Date Received      | Aggregate contributions                         |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/23/2017         | \$250.00  |            |
| Last Name   |  | First   |                    | M.I.  |            |
| Reid  |  | Roger   |                    |   |            |
| Residential Street Address  |  | City  |                    | State   | Zip Code   |
| 62 Howard Ave, Apt 713  |  | Shelton   |                    | CT  | 06484-6014 |
| Principal Occupation  |  | Name of Employer  |                    |   |            |
| Information Requested   |  | Information Requested   |                    |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                    | <b>Amount of Contribution</b><br><br>\$200.00   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                    |   |            |
| Is this contribution associated with an event reported in Section L1?<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                    |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |                    |   |            |
| Method of contribution:   |  |   | Date Received      | Aggregate contributions                         |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/24/2017         | \$200.00  |            |
| Last Name   |  | First   |                    | M.I.  |            |
| Reilly  |  | John  |                    | P   |            |
| Residential Street Address  |  | City  |                    | State   | Zip Code   |
| 14 Tyroll Ln  |  | West Haven  |                    | CT  | 06516-7719 |
| Principal Occupation  |  | Name of Employer  |                    |   |            |
| Builder   |  | The TFJ Company   |                    |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                    | <b>Amount of Contribution</b><br><br>\$1,000.00 |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                    |   |            |
| Is this contribution associated with an event reported in Section L1?<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                    |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |                    |   |            |
| Method of contribution:   |  |   | Date Received      | Aggregate contributions                         |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/21/2017         | \$1,000.00                                      |            |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>                               | \$1,450.00   |
| <b>TOTAL of Section B Pages</b>                                     | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b> | \$182,255.00 |
| <i>(Enter total on Line 13, Column A of Summary Page)</i>           |              |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |  |                               |            |
|---|--|---|--|-------------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |  | TYPE OF REPORT                |            |
| Ganim for Bridgeport '19  |  |   |  | April 10 filing               |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |  | Subtotal Section A            |            |
|   |  |   |  | \$0.00                        |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |  |                               |            |
| Last Name   |  | First   |  | M.I.                          |            |
| Reyes   |  | Eduardo   |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 56 Redspire Ct  |  | Trumbull  |  | CT                            | 06611-5726 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Information Requested   |  | EL Quito  |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |  | <b>\$200.00</b>               |            |
| Method of contribution:   |  | Date Received   |  |                               |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/30/2017  |  | \$200.00                      |            |
| Last Name   |  | First   |  | M.I.                          |            |
| Reynolds  |  | Kevin   |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 71 Sycamore Road  |  | Wilton  |  | CT                            | 06118      |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Lobbyist  |  | RSG   |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |  | <b>\$1,000.00</b>             |            |
| Method of contribution:   |  | Date Received   |  |                               |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/10/2017  |  | \$1,000.00                    |            |
| Last Name   |  | First   |  | M.I.                          |            |
| Ricci   |  | John  |  | K                             |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 2675 Park Ave, Unit 2   |  | Bridgeport  |  | CT                            | 06604-1357 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Self-employed   |  | Retired   |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |  | <b>\$1,000.00</b>             |            |
| Method of contribution:   |  | Date Received   |  |                               |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 02/21/2017  |  | \$1,000.00                    |            |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$2,200.00   |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |                         |                        |            |
|---|--|---|-------------------------|------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |                         | TYPE OF REPORT         |            |
| Ganim for Bridgeport '19  |  |   |                         | April 10 filing        |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |                         | Subtotal Section A     |            |
|   |  |   |                         | \$0.00                 |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                         |                        |            |
| Last Name   |  | First   |                         | MI                     |            |
| Richardson  |  | Jacqueline  |                         | M                      |            |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |
| 346 Spring St   |  | Bridgeport  |                         | CT                     | 06608-1241 |
| Principal Occupation  |  | Name of Employer  |                         |                        |            |
| Anit Blight Spec  |  | City of Bridgeport  |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         | \$100.00               |            |
| Is this contribution associated with an event reported in Section L1?<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |                         |                        |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                        |            |
| <input checked="" type="checkbox"/> Cash<br><input type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/23/2017  | \$100.00                |                        |            |
| Last Name   |  | First   |                         | MI                     |            |
| Rinaldo   |  | Louis   |                         | M                      |            |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |
| 58 Rose St  |  | Bridgeport  |                         | CT                     | 06610-1725 |
| Principal Occupation  |  | Name of Employer  |                         |                        |            |
| Information Requested   |  | City of Bridgeport  |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         | \$100.00               |            |
| Is this contribution associated with an event reported in Section L1?<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |                         |                        |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                        |            |
| <input checked="" type="checkbox"/> Cash<br><input type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/23/2017  | \$100.00                |                        |            |
| Last Name   |  | First   |                         | MI                     |            |
| Rizio   |  | Linda   |                         | P                      |            |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |
| 931 Old Post Rd   |  | Fairfield   |                         | CT                     | 06824-5906 |
| Principal Occupation  |  | Name of Employer  |                         |                        |            |
| Information Requested   |  | Information Requested   |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         | \$1,000.00             |            |
| Is this contribution associated with an event reported in Section L1?<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |                         |                        |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                        |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/22/2017  | \$1,000.00              |                        |            |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>   | \$1,200.00   |
| <b>TOTAL of Section B Pages</b>   | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|  |  |   |                                       |  |
|--|--|---|---------------------------------------|--|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)   |  |   | TYPE OF REPORT                        |  |
| Ganim for Bridgeport '19   |  |   | April 10 filing                       |  |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)  |  |   | Subtotal Section A \$0.00             |  |
| <b>B. Itemized Contributions from Individuals</b>  |  |   |                                       |  |
| Last Name<br>Rizio   |  | First<br>Raymond  |                                       | M.I.                                     |
| Residential Street Address<br>931 Old Post Rd  |  | City<br>Fairfield   |                                       | State<br>CT Zip Code<br>06824-5906       |
| Principal Occupation<br>Attorney   |  | Name of Employer<br>?   |                                       |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |                                       | Amount of Contribution<br><br>\$1,000.00 |
| Is this contribution associated with an event reported in Section 1.1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No                           |                                       |  |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received<br>03/22/2017   | Aggregate contributions<br>\$1,000.00 |  |
| Last Name<br>Roach   |  | First<br>Bonita   |                                       | M.I.<br>B                                |
| Residential Street Address<br>19 Quinlan Ave   |  | City<br>Bridgeport  |                                       | State<br>CT Zip Code<br>06605-3527       |
| Principal Occupation<br>Information Requested  |  | Name of Employer<br>Information Requested   |                                       |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |                                       | Amount of Contribution<br><br>\$100.00   |
| Is this contribution associated with an event reported in Section 1.1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No                           |                                       |  |
| Method of contribution:<br><input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received<br>03/23/2017   | Aggregate contributions<br>\$100.00   |  |
| Last Name<br>Roach   |  | First<br>Daniel   |                                       | M.I.                                     |
| Residential Street Address<br>19 Quilian Avenue  |  | City<br>Bridgeport  |                                       | State<br>CT Zip Code<br>06605            |
| Principal Occupation<br>Projects Coordinator   |  | Name of Employer<br>City of Bridgeport  |                                       |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |                                       | Amount of Contribution<br><br>\$1,000.00 |
| Is this contribution associated with an event reported in Section 1.1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No                           |                                       |  |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received<br>03/20/2017   | Aggregate contributions<br>\$1,000.00 |  |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>   | \$2,100.00   |
| <b>TOTAL of Section B Pages</b>   | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |                       |   |            |
|---|--|---|-----------------------|---|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |                       | TYPE OF REPORT                                |            |
| Ganim for Bridgeport '19  |  |   |                       | April 10 filing                               |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |                       | Subtotal Section A                            |            |
|   |  |   |                       | \$0.00  |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                       |   |            |
| Last Name   |  | First   |                       | M.I.  |            |
| Roach   |  | Stephen   |                       | P   |            |
| Residential Street Address  |  | City  |                       | State   | Zip Code   |
| 55 Haddon St  |  | Bridgeport  |                       | CT  | 06605-3009 |
| Principal Occupation  |  |   | Name of Employer      |   |            |
| PGA Golf Professiona  |  |   | First Tee Met NY      |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                       | <b>Amount of Contribution</b><br><br>\$500.00 |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                       |   |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                       |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |                       |   |            |
| Method of contribution:   |  |   | Date Received         | Aggregate contributions                       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/22/2017            | \$500.00                                      |            |
| Last Name   |  | First   |                       | M.I.  |            |
| Rodriquez   |  | Edgar   |                       |   |            |
| Residential Street Address  |  | City  |                       | State   | Zip Code   |
| 426 E Washington Ave  |  | Bridgeport  |                       | CT  | 06608-2232 |
| Principal Occupation  |  |   | Name of Employer      |   |            |
| Funeral Director/Business Owner   |  |   | Funeraria Luz de Paz  |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                       | <b>Amount of Contribution</b><br><br>\$250.00 |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                       |   |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                       |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |                       |   |            |
| Method of contribution:   |  |   | Date Received         | Aggregate contributions                       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/23/2017            | \$250.00                                      |            |
| Last Name   |  | First   |                       | M.I.  |            |
| Rohan   |  | Shelley   |                       |   |            |
| Residential Street Address  |  | City  |                       | State   | Zip Code   |
| 107 Great Pond Rd   |  | South Glastonbury   |                       | CT  | 06073-3105 |
| Principal Occupation  |  |   | Name of Employer      |   |            |
| homemaker   |  |   | Information Requested |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                       | <b>Amount of Contribution</b><br><br>\$500.00 |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No  |                       |   |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                       |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |                       |   |            |
| Method of contribution:   |  |   | Date Received         | Aggregate contributions                       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/23/2017            | \$500.00                                      |            |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$1,250.00   |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |                              |   |            |
|---|--|---|------------------------------|---|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |                              | TYPE OF REPORT                                  |            |
| Ganim for Bridgeport '19  |  |   |                              | April 10 filing                                 |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |                              | <b>Subtotal Section A</b>                       |            |
|   |  |   |                              | \$0.00  |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                              |   |            |
| Last Name   |  | First   |                              | M.I.  |            |
| Rohan   |  | Steven  |                              | J   |            |
| Residential Street Address  |  | City  |                              | State   | Zip Code   |
| 107 Great Pond Rd   |  | South Glastonbury   |                              | CT  | 06073-3105 |
| Principal Occupation  |  |   | Name of Employer             |   |            |
| Sales Mgmt  |  |   | Presidio Networked Solutions |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                              | <b>Amount of Contribution</b><br><br>\$1,000.00 |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No  |                              |   |            |
| Is this contribution associated with an event reported in Section L1?<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                              |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |                              |   |            |
| Method of contribution:   |  |   | Date Received                | Aggregate contributions                         |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/23/2017                   | \$1,000.00                                      |            |
| Last Name   |  | First   |                              | M.I.  |            |
| Rolfe   |  | Ron   |                              |   |            |
| Residential Street Address  |  | City  |                              | State   | Zip Code   |
| 95 Fog Plain Rd   |  | Waterford   |                              | CT  | 06385-1705 |
| Principal Occupation  |  |   | Name of Employer             |   |            |
| Fire Captain  |  |   | City of Bridgeport           |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                              | <b>Amount of Contribution</b><br><br>\$500.00   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                              |   |            |
| Is this contribution associated with an event reported in Section L1?<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                              |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |                              |   |            |
| Method of contribution:   |  |   | Date Received                | Aggregate contributions                         |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/23/2017                   | \$500.00  |            |
| Last Name   |  | First   |                              | M.I.  |            |
| Romano  |  | Patrick   |                              |   |            |
| Residential Street Address  |  | City  |                              | State   | Zip Code   |
| 56 Norton Ave   |  | Guilford  |                              | CT  | 06437-3412 |
| Principal Occupation  |  |   | Name of Employer             |   |            |
| Consultant  |  |   | DNA Campaigns LLC            |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                              | <b>Amount of Contribution</b><br><br>\$250.00   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                              |   |            |
| Is this contribution associated with an event reported in Section L1?<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                              |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |                              |   |            |
| Method of contribution:   |  |   | Date Received                | Aggregate contributions                         |            |
| <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/31/2017                   | \$250.00  |            |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$1,750.00   |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |  |                           |            |
|---|--|---|--|---------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |  | TYPE OF REPORT            |            |
| Ganim for Bridgeport '19  |  |   |  | April 10 filing           |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |  | <b>Subtotal Section A</b> |            |
|   |  |   |  | \$0.00                    |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |  |                           |            |
| Last Name   |  | First   |  | M.I.                      |            |
| Rosenberg   |  | Max   |  |                           |            |
| Residential Street Address  |  | City  |  | State                     | Zip Code   |
| 145 Lordship Rd   |  | Stratford   |  | CT                        | 06615-7822 |
| Principal Occupation  |  | Name of Employer  |  |                           |            |
| Attorney  |  | Rosenberg, Miller, Hite, Morilla LLC  |  |                           |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | Amount of Contribution    |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | \$500.00                  |            |
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |  |                           |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |  |                           |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions   |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/15/2017  |  | \$500.00                  |            |
| Last Name   |  | First   |  | M.I.                      |            |
| Rosenberg   |  | Stuart  |  |                           |            |
| Residential Street Address  |  | City  |  | State                     | Zip Code   |
| 106 Unquowa Hill St   |  | Bridgeport  |  | CT                        | 06604-2119 |
| Principal Occupation  |  | Name of Employer  |  |                           |            |
| Retired   |  | Information Requested   |  |                           |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | Amount of Contribution    |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | \$500.00                  |            |
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |  |                           |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |  |                           |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions   |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/15/2017  |  | \$500.00                  |            |
| Last Name   |  | First   |  | M.I.                      |            |
| Rosnick   |  | Harold  |  |                           |            |
| Residential Street Address  |  | City  |  | State                     | Zip Code   |
| 25 Riverside Ln   |  | Easton  |  | CT                        | 06612-2056 |
| Principal Occupation  |  | Name of Employer  |  |                           |            |
| Attorney  |  | Miller, Rosnick, D'Amarco, August, & Butler   |  |                           |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | Amount of Contribution    |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | \$500.00                  |            |
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |  |                           |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |  |                           |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions   |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$500.00                  |            |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>   | \$1,500.00   |
| <b>TOTAL of Section B Pages</b>   | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |                         |
|---|--|---|-------------------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  | TYPE OF REPORT  |                         |
| Ganim for Bridgeport '19  |  | April 10 filing   |                         |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  | Subtotal Section A  |                         |
|   |  | \$0.00  |                         |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                         |
| Last Name   |  | First   |                         |
| Rubins  |  | Mark  |                         |
| Residential Street Address  |  | City  | State                   |
| 47 summer St  |  | Plantsville   | CT                      |
| Principal Occupation  |  | Name of Employer  |                         |
| PM  |  | Contruccion Resources Inc   |                         |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |
| Is this contribution associated with an event reported in Section I.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |                         |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, indicate which branch or branches of government the contract is with:   |                         |
|   |  | <input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |                         |
| Method of contribution:   |  | Date Received   | Aggregate contributions |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/22/2017  | \$1,000.00              |
| Last Name   |  | First   |                         |
| Sachs   |  | Howard  |                         |
| Residential Street Address  |  | City  | State                   |
| 8 Lomartra Ln   |  | Branford  | CT                      |
| Principal Occupation  |  | Name of Employer  |                         |
| Contractor  |  | Self  |                         |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |
| Is this contribution associated with an event reported in Section I.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |                         |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, indicate which branch or branches of government the contract is with:   |                         |
|   |  | <input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |                         |
| Method of contribution:   |  | Date Received   | Aggregate contributions |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  | \$1,000.00              |
| Last Name   |  | First   |                         |
| Sampieri  |  | Michael   |                         |
| Residential Street Address  |  | City  | State                   |
| 6 Saley Rd  |  | Milford   | CT                      |
| Principal Occupation  |  | Name of Employer  |                         |
| Sealer of Weights and Measures  |  | City of Bridgeport  |                         |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |
| Is this contribution associated with an event reported in Section I.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |                         |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, indicate which branch or branches of government the contract is with:   |                         |
|   |  | <input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |                         |
| Method of contribution:   |  | Date Received   | Aggregate contributions |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/22/2017  | \$500.00                |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>   | \$2,500.00   |
| <b>TOTAL of Section B Pages</b>   | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | \$182,255.00 |

I. MONETARY RECEIPTS (Sections A-K)

|   |  |   |                         |                        |            |
|---|--|---|-------------------------|------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |                         | TYPE OF REPORT         |            |
| Ganim for Bridgeport '19  |  |   |                         | April 10 filing        |            |
| A. Total Contributions from Small Contributors - Received this Period ONLY<br>(See instructions for definition of Small Contributor)  |  |   |                         | Subtotal Section A     |            |
|   |  |   |                         | \$0.00                 |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                         |                        |            |
| Last Name   |  | First   |                         | M.I.                   |            |
| Sampieri  |  | Nicholas  |                         |                        |            |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |
| 323 Fairfield Ave   |  | Bridgeport  |                         | CT                     | 06604-4293 |
| Principal Occupation  |  | Name of Employer  |                         |                        |            |
| Zoning Inspector  |  | City of Bridgeport  |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         | \$100.00               |            |
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                         |                        |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                        |            |
| <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/22/2017  | \$100.00                |                        |            |
| Last Name   |  | First   |                         | M.I.                   |            |
| Santacroce  |  | Marilyn   |                         |                        |            |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |
| 650 Jewett Ave  |  | Bridgeport  |                         | CT                     | 06606-2837 |
| Principal Occupation  |  | Name of Employer  |                         |                        |            |
| Administrative Assistant  |  | City of Bridgeport  |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         | \$100.00               |            |
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                         |                        |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                        |            |
| <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  | \$100.00                |                        |            |
| Last Name   |  | First   |                         | M.I.                   |            |
| Santos  |  | Deborah   |                         |                        |            |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |
| 67 Woodland Park  |  | Shelton   |                         | CT                     | 06484-5348 |
| Principal Occupation  |  | Name of Employer  |                         |                        |            |
| Social Svc Supervisor   |  | City of Bridgeport  |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         | \$100.00               |            |
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                         |                        |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                        |            |
| <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/30/2017  | \$100.00                |                        |            |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>   | \$300.00     |
| <b>TOTAL of Section B Pages</b>   | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | \$182,255.00 |

I. MONETARY RECEIPTS (Sections A-K)

|   |  |   |  |   |            |
|---|--|---|--|---|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |  | TYPE OF REPORT                                  |            |
| Ganim for Bridgeport '19  |  |   |  | April 10 filing                                 |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |  | Subtotal Section A                              |            |
|   |  |   |  | \$0.00  |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |  |   |            |
| Last Name   |  | First   |  | M.I.  |            |
| Schafler  |  | Noah  |  | J   |            |
| Residential Street Address  |  | City  |  | State   | Zip Code   |
| 52 Hubbell Ln, Apt 713  |  | Shelton   |  | CT  | 06484-2166 |
| Principal Occupation  |  | Name of Employer  |  |   |            |
| Lawyer  |  | Schafler & Camera Attorneys at Law  |  |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b><br><br>\$1,000.00 |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |   |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |  |   |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions                         |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/21/2017  |  | \$1,000.00                                      |            |
| Last Name   |  | First   |  | M.I.  |            |
| Schneider   |  | Robert  |  |   |            |
| Residential Street Address  |  | City  |  | State   | Zip Code   |
| 120 Royals Ct   |  | Trumbull  |  | CT  | 06611-2042 |
| Principal Occupation  |  | Name of Employer  |  |   |            |
| Information Requested   |  | Jimmy's Army and Navy   |  |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b><br><br>\$500.00   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |   |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |  |   |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions                         |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/13/2017  |  | \$500.00  |            |
| Last Name   |  | First   |  | M.I.  |            |
| Scinto  |  | Dennis  |  |   |            |
| Residential Street Address  |  | City  |  | State   | Zip Code   |
| 2641 Madison Ave  |  | Bridgeport  |  | CT  | 06606-2632 |
| Principal Occupation  |  | Name of Employer  |  |   |            |
| Housing Code  |  | City of Bridgeport  |  |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b><br><br>\$200.00   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |   |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |  |   |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions                         |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$200.00  |            |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$1,700.00   |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|  |  |   |                         |
|--|--|---|-------------------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)   |  | TYPE OF REPORT  |                         |
| Ganim for Bridgeport '19   |  | April 10 filing   |                         |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)  |  | Subtotal Section A  |                         |
|  |  | \$0.00  |                         |
| <b>B. Itemized Contributions from Individuals</b>  |  |   |                         |
| Last Name  |  | First   |                         |
| Scrivani   |  | Marylou   |                         |
| Residential Street Address   |  | City  | State Zip Code          |
| Penonette St   |  | Bridgeport  | CT 06606                |
| Principal Occupation<br>Information Requested  |  | Name of Employer<br>Information Requested   |                         |
| Information Requested  |  | Information Requested   |                         |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No     |                         |
| Is this contribution associated with an event reported in Section I.1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |                         |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received   | Aggregate contributions |
|  |  | 03/15/2017  | \$300.00                |
| Last Name  |  | First   |                         |
| Sepulveda-Velez  |  | Jorge   |                         |
| Residential Street Address   |  | City  | State Zip Code          |
| 427 Nichols St   |  | Bridgeport  | CT 06608-2806           |
| Principal Occupation<br>Information Requested  |  | Name of Employer  |                         |
| Information Requested  |  | Self  |                         |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No     |                         |
| Is this contribution associated with an event reported in Section I.1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |                         |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received   | Aggregate contributions |
|  |  | 03/22/2017  | \$1,000.00              |
| Last Name  |  | First   |                         |
| Shamas   |  | Daniel  |                         |
| Residential Street Address   |  | City  | State Zip Code          |
| 7 Buddington Park  |  | Shelton   | CT 06484-5358           |
| Principal Occupation<br>Mayor's Office   |  | Name of Employer<br>City of Bridgeport  |                         |
| Information Requested  |  | Information Requested   |                         |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No     |                         |
| Is this contribution associated with an event reported in Section I.1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |                         |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received   | Aggregate contributions |
|  |  | 03/23/2017  | \$1,000.00              |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>   | \$2,300.00   |
| <b>TOTAL of Section B Pages</b>   | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |  |   |            |
|---|--|---|--|---|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |  | TYPE OF REPORT                                |            |
| Ganim for Bridgeport '19  |  |   |  | April 10 filing                               |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |  | Subtotal Section A                            |            |
|   |  |   |  | \$0.00  |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |  |   |            |
| Last Name   |  | First   |  | MI  |            |
| Shepro  |  | Daniel  |  |   |            |
| Residential Street Address  |  | City  |  | State   | Zip Code   |
| 1076 Fairfield Beach Rd   |  | Fairfield   |  | CT  | 06824-6517 |
| Principal Occupation  |  | Name of Employer  |  |   |            |
| Attorney  |  | Shepro & Hawkins LLC  |  |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b><br><br>\$500.00 |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |   |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |  |   |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions                       |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/07/2017  |  | \$500.00                                      |            |
| Last Name   |  | First   |  | MI  |            |
| Sherman   |  | Donald  |  |   |            |
| Residential Street Address  |  | City  |  | State   | Zip Code   |
| 70 Laurel Brook Ln  |  | Fairfield   |  | CT  | 06824-2079 |
| Principal Occupation  |  | Name of Employer  |  |   |            |
| Information Requested   |  | Self  |  |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b><br><br>\$500.00 |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |   |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |  |   |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions                       |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/22/2017  |  | \$500.00                                      |            |
| Last Name   |  | First   |  | MI  |            |
| Siconolfi   |  | Anthony   |  | R   |            |
| Residential Street Address  |  | City  |  | State   | Zip Code   |
| 20 Milford Point Rd   |  | Milford   |  | CT  | 06460-5219 |
| Principal Occupation  |  | Name of Employer  |  |   |            |
| Supervisor - Parks  |  | City of Bridgeport  |  |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b><br><br>\$100.00 |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |   |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |  |   |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions                       |            |
| <input checked="" type="checkbox"/> Cash<br><input type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/22/2017  |  | \$100.00                                      |            |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$1,100.00   |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |                         |                                  |            |
|---|--|---|-------------------------|----------------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |                         | TYPE OF REPORT                   |            |
| Ganim for Bridgeport '19  |  |   |                         | April 10 filing                  |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |                         | <b>Subtotal Section A</b> \$0.00 |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                         |                                  |            |
| Last Name   |  | First   |                         | M.I.                             |            |
| Sierau  |  | Michelle  |                         | L                                |            |
| Residential Street Address  |  | City  |                         | State                            | Zip Code   |
| 151 Astoria Ave   |  | Bridgeport  |                         | CT                               | 06604-1707 |
| Principal Occupation  |  | Name of Employer  |                         |                                  |            |
| Coordinator   |  | Fairfield Public Schools  |                         |                                  |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution           |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                                  |            |
| Is this contribution associated with an event reported in Section L.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |                         | \$50.00                          |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |                         |                                  |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                                  |            |
| <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/17/2017  | \$50.00                 |                                  |            |
| Last Name   |  | First   |                         | M.I.                             |            |
| Silver  |  | William   |                         | R                                |            |
| Residential Street Address  |  | City  |                         | State                            | Zip Code   |
| 55 Governors Ave  |  | Milford   |                         | CT                               | 06460-3439 |
| Principal Occupation  |  | Name of Employer  |                         |                                  |            |
| Architect   |  | Silver, Petrucelli & Associates   |                         |                                  |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution           |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |                         |                                  |            |
| Is this contribution associated with an event reported in Section L.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |                         | \$1,000.00                       |            |
| <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No<br><i>If yes, list Event # 032317a</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |                         |                                  |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                                  |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/31/2017  | \$1,000.00              |                                  |            |
| Last Name   |  | First   |                         | M.I.                             |            |
| Simpson   |  | Cathleen  |                         |                                  |            |
| Residential Street Address  |  | City  |                         | State                            | Zip Code   |
| 115 Balmforth St  |  | Bridgeport  |                         | CT                               | 06605-3505 |
| Principal Occupation  |  | Name of Employer  |                         |                                  |            |
| Attorney  |  | Self  |                         |                                  |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution           |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |                         |                                  |            |
| Is this contribution associated with an event reported in Section L.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |                         | \$1,000.00                       |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |                         |                                  |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                                  |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/17/2017  | \$1,000.00              |                                  |            |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$2,050.00   |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

I. MONETARY RECEIPTS (Sections A-K)

|  |  |   |                         |                        |            |
|--|--|---|-------------------------|------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)   |  |   |                         | TYPE OF REPORT         |            |
| Ganim for Bridgeport '19   |  |   |                         | April 10 filing        |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)  |  |   |                         | Subtotal Section A     |            |
|  |  |   |                         | \$0.00                 |            |
| <b>B. Itemized Contributions from Individuals</b>  |  |   |                         |                        |            |
| Last Name  |  | First   |                         | M.I.                   |            |
| Sims   |  | Vaughn  |                         |                        |            |
| Residential Street Address   |  | City  |                         | State                  | Zip Code   |
| 302 Union Ave  |  | Bridgeport  |                         | CT                     | 06607-1822 |
| Principal Occupation   |  | Name of Employer  |                         |                        |            |
| Coordinator  |  | City of Bridgeport  |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                        |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with.</i>   |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |                         | \$50.00                |            |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received   | Aggregate contributions |                        |            |
|  |  | 03/20/2017  | \$50.00                 |                        |            |
| Last Name  |  | First   |                         | M.I.                   |            |
| Sisco  |  | Brenda  |                         |                        |            |
| Residential Street Address   |  | City  |                         | State                  | Zip Code   |
| 10 Brockway Rd   |  | Ellington   |                         | CT                     | 06029-2100 |
| Principal Occupation   |  | Name of Employer  |                         |                        |            |
| Lobbyist   |  | RSG   |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No  |                         |                        |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with.</i>   |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |                         | \$500.00               |            |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received   | Aggregate contributions |                        |            |
|  |  | 03/23/2017  | \$500.00                |                        |            |
| Last Name  |  | First   |                         | M.I.                   |            |
| Skudlarek  |  | Carl  |                         | A                      |            |
| Residential Street Address   |  | City  |                         | State                  | Zip Code   |
| 9 Riverside Dr   |  | Milford   |                         | CT                     | 06461-3917 |
| Principal Occupation   |  | Name of Employer  |                         |                        |            |
| Mgr  |  | BCEFCU  |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                        |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with.</i>   |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |                         | \$100.00               |            |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received   | Aggregate contributions |                        |            |
|  |  | 03/23/2017  | \$100.00                |                        |            |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$650.00     |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |                         |                               |            |
|---|--|---|-------------------------|-------------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |                         | TYPE OF REPORT                |            |
| Ganim for Bridgeport '19  |  |   |                         | April 10 filing               |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |                         | Subtotal Section A            |            |
|   |  |   |                         | \$0.00                        |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                         |                               |            |
| Last Name   |  | First   |                         | M.I.                          |            |
| Skyers  |  | Eroll   |                         |                               |            |
| Residential Street Address  |  | City  |                         | State                         | Zip Code   |
| 1 Crozier Ct  |  | Oxford  |                         | CT                            | 06478-2720 |
| Principal Occupation  |  | Name of Employer  |                         |                               |            |
| Attorney  |  | Skyers, Skyers and Harrell  |                         |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                               |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                         |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                         | \$500.00                      |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                               |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/23/2017  | \$500.00                |                               |            |
| Last Name   |  | First   |                         | M.I.                          |            |
| Smith   |  | Nessah  |                         |                               |            |
| Residential Street Address  |  | City  |                         | State                         | Zip Code   |
| 500 Evers St  |  | Bridgeport  |                         | CT                            | 06610-1305 |
| Principal Occupation  |  | Name of Employer  |                         |                               |            |
| Student   |  | Information Requested   |                         |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                               |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                         |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                         | \$250.00                      |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                               |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/20/2017  | \$250.00                |                               |            |
| Last Name   |  | First   |                         | M.I.                          |            |
| Soares  |  | Guy   |                         | P                             |            |
| Residential Street Address  |  | City  |                         | State                         | Zip Code   |
| 45 Twin Oaks Ter  |  | Stratford   |                         | CT                            | 06614-1099 |
| Principal Occupation  |  | Name of Employer  |                         |                               |            |
| Attorney  |  | Law Office of Guy Soares LLC  |                         |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         |                               |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                         |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |                         | \$500.00                      |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                               |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/23/2017  | \$500.00                |                               |            |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$1,250.00   |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |  |  |            |
|---|--|---|--|--|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |  | TYPE OF REPORT   |            |
| Ganim for Bridgeport '19  |  |   |  | April 10 filing  |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |  | <b>Subtotal Section A</b>                              |            |
|   |  |   |  | <b>\$0.00</b>  |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |  |  |            |
| Last Name   |  | First   |  | M.I.   |            |
| Spinelli  |  | Ludwig  |  | M  |            |
| Residential Street Address  |  | City  |  | State  | Zip Code   |
| 14 Willard Rd   |  | Shelton   |  | CT   | 06484-5843 |
| Principal Occupation  |  | Name of Employer  |  |  |            |
| Health Care Adm   |  | Optimus Health Care Inc.  |  |  |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b><br><br><b>\$100.00</b>   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No  |  |  |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |  |  |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions                                |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/20/2017  |  | \$100.00   |            |
| Last Name   |  | First   |  | M.I.   |            |
| Stafstrom   |  | John  |  | F  |            |
| Residential Street Address  |  | City  |  | State  | Zip Code   |
| 420 Brooklawn Ave   |  | Bridgeport  |  | CT   | 06604-1729 |
| Principal Occupation  |  | Name of Employer  |  |  |            |
| Attorney  |  | Pullman & Comley LLC  |  |  |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b><br><br><b>\$1,000.00</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No  |  |  |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |  |  |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions                                |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$1,000.00   |            |
| Last Name   |  | First   |  | M.I.   |            |
| Staley  |  | Kimberly  |  |  |            |
| Residential Street Address  |  | City  |  | State  | Zip Code   |
| 6047 Clear Springs Rd   |  | Virginia Beach  |  | VA   | 23464-4637 |
| Principal Occupation  |  | Name of Employer  |  |  |            |
| Information Requested   |  | City of Bridgeport  |  |  |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b><br><br><b>\$1,000.00</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |  |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |  |  |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions                                |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$1,000.00   |            |

|   |                     |
|---|---------------------|
| <b>SUBTOTAL Section B - This Page</b>                               | <b>\$2,100.00</b>   |
| <b>TOTAL of Section B Pages</b>                                     | <b>\$182,255.00</b> |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b> | <b>\$182,255.00</b> |
| <i>(Enter total on Line 13, Column A of Summary Page)</i>           |                     |

I. MONETARY RECEIPTS (Sections A-K)

|   |  |   |                         |                        |            |
|---|--|---|-------------------------|------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |                         | TYPE OF REPORT         |            |
| Ganim for Bridgeport '19  |  |   |                         | April 10 filing        |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |                         | Subtotal Section A     |            |
|   |  |   |                         | \$0.00                 |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                         |                        |            |
| Last Name   |  | First   |                         | M.I.                   |            |
| Sterling  |  | Marisol   |                         |                        |            |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |
| 70 Curtiss St   |  | Hartford  |                         | CT                     | 06106-3808 |
| Principal Occupation  |  | Name of Employer  |                         |                        |            |
| Payroll Clerk II  |  | City of Bridgeport  |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         | \$300.00               |            |
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |                         |                        |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                        |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/27/2017  | \$300.00                |                        |            |
| Last Name   |  | First   |                         | M.I.                   |            |
| Stevens   |  | Alden   |                         | H                      |            |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |
| 472 Old Post Rd   |  | Fairfield   |                         | CT                     | 06824-6645 |
| Principal Occupation  |  | Name of Employer  |                         |                        |            |
| Healthcare Executive  |  | AHS Consulting LLC  |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         | \$1,000.00             |            |
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |                         |                        |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                        |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/22/2017  | \$1,000.00              |                        |            |
| Last Name   |  | First   |                         | M.I.                   |            |
| Straubel  |  | Mark  |                         |                        |            |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |
| 23 Gorham Pl  |  | Trumbull  |                         | CT                     | 06611-4703 |
| Principal Occupation  |  | Name of Employer  |                         |                        |            |
| Police Captain  |  | City of Bridgeport  |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         | \$500.00               |            |
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |                         |                        |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                        |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/16/2017  | \$500.00                |                        |            |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>   | \$1,800.00   |
| <b>TOTAL of Section B Pages</b>   | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |                                  |  |            |
|---|--|---|----------------------------------|--|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   | TYPE OF REPORT                   |  |            |
| Ganim for Bridgeport '19  |  |   | April 10 filing                  |  |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   | Subtotal Section A <b>\$0.00</b> |  |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                                  |  |            |
| Last Name   |  | First   |                                  | M.I.   |            |
| Studer  |  | Stephen   |                                  |  |            |
| Residential Street Address  |  | City  |                                  | State  | Zip Code   |
| 80 Christine Ter  |  | Milford   |                                  | CT   | 06461-2213 |
| Principal Occupation  |  | Name of Employer  |                                  |  |            |
| Attorney  |  | Berchew, Moses & Delvin PC  |                                  |  |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                                  | <b>Amount of Contribution</b><br><br><b>\$1,000.00</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No  |                                  |  |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                                  |  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |                                  |  |            |
| Method of contribution:   |  | Date Received   |                                  | Aggregate contributions                                |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  |                                  | \$1,000.00   |            |
| Last Name   |  | First   |                                  | M.I.   |            |
| Talamelli-Cusick  |  | Karen   |                                  |  |            |
| Residential Street Address  |  | City  |                                  | State  | Zip Code   |
| 6 Diana Dr  |  | Woodbridge  |                                  | CT   | 06525-1217 |
| Principal Occupation  |  | Name of Employer  |                                  |  |            |
| Information Requested   |  | Information Requested   |                                  |  |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                                  | <b>Amount of Contribution</b><br><br><b>\$250.00</b>   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                                  |  |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                                  |  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |                                  |  |            |
| Method of contribution:   |  | Date Received   |                                  | Aggregate contributions                                |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  |                                  | \$250.00   |            |
| Last Name   |  | First   |                                  | M.I.   |            |
| Tarantino   |  | Gino  |                                  |  |            |
| Residential Street Address  |  | City  |                                  | State  | Zip Code   |
| 136 Meadowview Dr   |  | Trumbull  |                                  | CT   | 06611-1924 |
| Principal Occupation  |  | Name of Employer  |                                  |  |            |
| Information Requested   |  | Self  |                                  |  |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                                  | <b>Amount of Contribution</b><br><br><b>\$1,000.00</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No  |                                  |  |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                                  |  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |                                  |  |            |
| Method of contribution:   |  | Date Received   |                                  | Aggregate contributions                                |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/20/2017  |                                  | \$1,000.00   |            |

|  |                     |
|--|---------------------|
| <b>SUBTOTAL Section B - This Page</b>  | <b>\$2,250.00</b>   |
| <b>TOTAL of Section B Pages</b>  | <b>\$182,255.00</b> |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | <b>\$182,255.00</b> |

**I. MONETARY RECEIPTS (Sections A-K)**

|  |  |   |                                       |  |                        |
|--|--|---|---------------------------------------|--|------------------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)   |  |   |                                       | TYPE OF REPORT                           |                        |
| Ganim for Bridgeport '19   |  |   |                                       | April 10 filing                          |                        |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)  |  |   |                                       | Subtotal Section A                       |                        |
|  |  |   |                                       | \$0.00                                   |                        |
| <b>B. Itemized Contributions from Individuals</b>  |  |   |                                       |  |                        |
| Last Name<br>Testa   |  | First<br>Debra  |                                       | M.I.<br>                                 |                        |
| Residential Street Address<br>240 S Main St  |  | City<br>Wallingford   |                                       | State<br>CT                              | Zip Code<br>06492-4601 |
| Principal Occupation<br>Sales  |  | Name of Employer<br>Lockton   |                                       |  |                        |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |                                       | Amount of Contribution<br><br>\$250.00   |                        |
| Is this contribution associated with an event reported in Section I.1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No                             |                                       |  |                        |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received<br>03/29/2017   | Aggregate contributions<br>\$250.00   |  |                        |
| Last Name<br>Testa   |  | First<br>Mario  |                                       | M.I.<br>                                 |                        |
| Residential Street Address<br>1775 Madison Ave   |  | City<br>Bridgeport  |                                       | State<br>CT                              | Zip Code<br>06606-4056 |
| Principal Occupation<br>Information Requested  |  | Name of Employer<br>testo's pizzeria  |                                       |  |                        |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |                                       | Amount of Contribution<br><br>\$1,000.00 |                        |
| Is this contribution associated with an event reported in Section I.1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No                             |                                       |  |                        |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received<br>02/22/2017   | Aggregate contributions<br>\$1,000.00 |  |                        |
| Last Name<br>Thode   |  | First<br>Richard  |                                       | M.I.<br>E                                |                        |
| Residential Street Address<br>6 Walnut Hill Rd   |  | City<br>Bethel  |                                       | State<br>CT                              | Zip Code<br>06801-1320 |
| Principal Occupation<br>Fire Chief   |  | Name of Employer<br>City of Bridgeport  |                                       |  |                        |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |                                       | Amount of Contribution<br><br>\$500.00   |                        |
| Is this contribution associated with an event reported in Section I.1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No                             |                                       |  |                        |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received<br>03/23/2017   | Aggregate contributions<br>\$500.00   |  |                        |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>   | \$1,750.00   |
| <b>TOTAL of Section B Pages</b>   | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |                       |  |            |
|---|--|---|-----------------------|--|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |                       | TYPE OF REPORT   |            |
| Ganim for Bridgeport '19  |  |   |                       | April 10 filing  |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |                       | <b>Subtotal Section A</b>                              |            |
|   |  |   |                       | <b>\$0.00</b>  |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                       |  |            |
| Last Name   |  | First   |                       | M.I.   |            |
| Tiago   |  | Jose  |                       | C  |            |
| Residential Street Address  |  | City  |                       | State  | Zip Code   |
| 2445 Park Ave, Apt 50   |  | Bridgeport  |                       | CT   | 06604-1436 |
| Principal Occupation Information Requested  |  |   | Name of Employer      |  |            |
| Information Requested   |  |   | City of Bridgeport    |  |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                       | <b>Amount of Contribution</b><br><br><b>\$1,000.00</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                       |  |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                       |  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |                       |  |            |
| Method of contribution:   |  |   | Date Received         | Aggregate contributions                                |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/10/2017            | \$1,000.00   |            |
| Last Name   |  | First   |                       | M.I.   |            |
| Timpanelli  |  | Paul  |                       |  |            |
| Residential Street Address  |  | City  |                       | State  | Zip Code   |
| 5628 Main St  |  | Trumbull  |                       | CT   | 06611-3029 |
| Principal Occupation Information Requested  |  |   | Name of Employer      |  |            |
| Information Requested   |  |   | Information Requested |  |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                       | <b>Amount of Contribution</b><br><br><b>\$250.00</b>   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                       |  |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                       |  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |                       |  |            |
| Method of contribution:   |  |   | Date Received         | Aggregate contributions                                |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/24/2017            | \$250.00   |            |
| Last Name   |  | First   |                       | M.I.   |            |
| Titre   |  | Tamara  |                       |  |            |
| Residential Street Address  |  | City  |                       | State  | Zip Code   |
| 1115 Main St, Unit 303  |  | Bridgeport  |                       | CT   | 06604-4418 |
| Principal Occupation  |  |   | Name of Employer      |  |            |
| Ass't City Attorney   |  |   | City of Bridgeport    |  |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                       | <b>Amount of Contribution</b><br><br><b>\$100.00</b>   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                       |  |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                       |  |            |
| <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No    032317a   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |                       |  |            |
| Method of contribution:   |  |   | Date Received         | Aggregate contributions                                |            |
| <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/27/2017            | \$100.00   |            |

|   |                     |
|---|---------------------|
| <b>SUBTOTAL Section B - This Page</b>                               | <b>\$1,350.00</b>   |
| <b>TOTAL of Section B Pages</b>                                     | <b>\$182,255.00</b> |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b> | <b>\$182,255.00</b> |
| <i>(Enter total on Line 13, Column A of Summary Page)</i>           |                     |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |               |   |            |
|---|--|---|---------------|---|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |               | TYPE OF REPORT                                  |            |
| Ganim for Bridgeport '19  |  |   |               | April 10 filing                                 |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |               | Subtotal Section A                              |            |
|   |  |   |               | \$0.00  |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |               |   |            |
| Last Name   |  | First   |               | M.I.  |            |
| Torres  |  | Elizabeth   |               |   |            |
| Residential Street Address  |  | City  |               | State   | Zip Code   |
| 64E Brown Street  |  | West Haven  |               | CT  | 06516-4914 |
| Principal Occupation  |  | Name of Employer  |               |   |            |
| CEO   |  | Bridgeport Neighborhood Trust   |               |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |               | <b>Amount of Contribution</b><br><br>\$500.00   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No  |               |   |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |               |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |               |   |            |
| Method of contribution:   |  |   | Date Received | Aggregate contributions                         |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/17/2017    | \$500.00  |            |
| Last Name   |  | First   |               | M.I.  |            |
| Trefz   |  | Chris   |               | C   |            |
| Residential Street Address  |  | City  |               | State   | Zip Code   |
| 140 Driftwood Ln  |  | Trumbull  |               | CT  | 06611-1805 |
| Principal Occupation  |  | Name of Employer  |               |   |            |
| Information Requested   |  | Trefz Corp  |               |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |               | <b>Amount of Contribution</b><br><br>\$1,000.00 |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |               |   |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |               |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |               |   |            |
| Method of contribution:   |  |   | Date Received | Aggregate contributions                         |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/23/2017    | \$1,000.00                                      |            |
| Last Name   |  | First   |               | M.I.  |            |
| Trefz   |  | Chris   |               | J   |            |
| Residential Street Address  |  | City  |               | State   | Zip Code   |
| 10 Middle St  |  | Bridgeport  |               | CT  | 06604-4223 |
| Principal Occupation  |  | Name of Employer  |               |   |            |
| Information Requested   |  | Trefz Corp  |               |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |               | <b>Amount of Contribution</b><br><br>\$500.00   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |               |   |            |
| Is this contribution associated with an event reported in Section I.1?<br><i>If yes, list Event #</i>   |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |               |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |               |   |            |
| Method of contribution:   |  |   | Date Received | Aggregate contributions                         |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/23/2017    | \$500.00  |            |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$2,000.00   |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |                 |                               |                    |
|---|--|---|-----------------|-------------------------------|--------------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   | TYPE OF REPORT  |                               |                    |
| Ganim for Bridgeport '19  |  |   | April 10 filing |                               |                    |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |                 |                               | Subtotal Section A |
|   |  |   |                 |                               | \$0.00             |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                 |                               |                    |
| Last Name   |  | First   |                 | M.I.                          |                    |
| Trojanowski   |  | Mark  |                 |                               |                    |
| Residential Street Address  |  | City  |                 | State                         | Zip Code           |
| 1149 North Ave  |  | Bridgeport  |                 | CT                            | 06604-2712         |
| Principal Occupation  |  | Name of Employer  |                 |                               |                    |
| Real Estate Agent   |  | Self  |                 |                               |                    |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                 | <b>Amount of Contribution</b> |                    |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                 |                               |                    |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |                 | <b>\$50.00</b>                |                    |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |                 |                               |                    |
| Method of contribution:   |  | Date Received   |                 | Aggregate contributions       |                    |
| <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  |                 | \$50.00                       |                    |
| Last Name   |  | First   |                 | M.I.                          |                    |
| Tubens  |  | Mike  |                 |                               |                    |
| Residential Street Address  |  | City  |                 | State                         | Zip Code           |
| 164 Beechmont Ave   |  | Bridgeport  |                 | CT                            | 06606-4311         |
| Principal Occupation  |  | Name of Employer  |                 |                               |                    |
| AACO  |  | City of Bridgeport  |                 |                               |                    |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                 | <b>Amount of Contribution</b> |                    |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                 |                               |                    |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |                 | <b>\$500.00</b>               |                    |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |                 |                               |                    |
| Method of contribution:   |  | Date Received   |                 | Aggregate contributions       |                    |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  |                 | \$500.00                      |                    |
| Last Name   |  | First   |                 | M.I.                          |                    |
| Tyler   |  | James   |                 | G                             |                    |
| Residential Street Address  |  | City  |                 | State                         | Zip Code           |
| 144 Bennett St  |  | Fairfield   |                 | CT                            | 06825-1305         |
| Principal Occupation  |  | Name of Employer  |                 |                               |                    |
| Information Requested   |  | Information Requested   |                 |                               |                    |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                 | <b>Amount of Contribution</b> |                    |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                 |                               |                    |
| Is this contribution associated with an event reported in Section L1?   |  | Is contributor a principal of a state contractor or prospective state contractor?   |                 | <b>\$200.00</b>               |                    |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |                 |                               |                    |
| Method of contribution:   |  | Date Received   |                 | Aggregate contributions       |                    |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/22/2017  |                 | \$200.00                      |                    |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>                               | \$750.00     |
| <b>TOTAL of Section B Pages</b>                                     | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b> | \$182,255.00 |
| <i>(Enter total on Line 13, Column A of Summary Page)</i>           |              |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |                         |                        |            |
|---|--|---|-------------------------|------------------------|------------|
| NAME OF COMMITTEE: <i>(Provide Complete Name as Registered with Filing Repository)</i>  |  |   |                         | TYPE OF REPORT         |            |
| Ganim for Bridgeport '19  |  |   |                         | April 10 filing        |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br><i>(See instructions for definition of Small Contributor)</i>  |  |   |                         | Subtotal Section A     |            |
|   |  |   |                         | \$0.00                 |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                         |                        |            |
| Last Name   |  | First   |                         | M.I.                   |            |
| Uguna   |  | Fausto  |                         |                        |            |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |
| 169 Bradley St  |  | Bridgeport  |                         | CT                     | 06610-2006 |
| Principal Occupation  |  | Name of Employer  |                         |                        |            |
| Information Requested   |  | Information Requested   |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         | \$250.00               |            |
| Is this contribution associated with an event reported in Section 1.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |                         |                        |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                        |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  | \$250.00                |                        |            |
| Last Name   |  | First   |                         | M.I.                   |            |
| Valdegas  |  | Domingos  |                         |                        |            |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |
| 730 Birmingham St   |  | Bridgeport  |                         | CT                     | 06606-3307 |
| Principal Occupation  |  | Name of Employer  |                         |                        |            |
| Municipal Employee  |  | City of Bridgeport  |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         | \$500.00               |            |
| Is this contribution associated with an event reported in Section 1.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |                         |                        |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                        |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/22/2017  | \$500.00                |                        |            |
| Last Name   |  | First   |                         | M.I.                   |            |
| Valeri  |  | Robert  |                         |                        |            |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |
| 194 Greenfield Dr   |  | Bridgeport  |                         | CT                     | 06606-4432 |
| Principal Occupation  |  | Name of Employer  |                         |                        |            |
| Parks Foreman   |  | City of Bridgeport  |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         | \$225.00               |            |
| Is this contribution associated with an event reported in Section 1.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |                         |                        |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                        |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/20/2017  | \$225.00                |                        |            |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$975.00     |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |  |                         |            |
|---|--|---|--|-------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |  | TYPE OF REPORT          |            |
| Ganim for Bridgeport '19  |  |   |  | April 10 filing         |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |  | Subtotal Section A      |            |
|   |  |   |  | \$0.00                  |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |  |                         |            |
| Last Name   |  | First   |  | M.I.                    |            |
| Valle   |  | Maria   |  | I                       |            |
| Residential Street Address  |  | City  |  | State                   | Zip Code   |
| 561 Brooks St   |  | Bridgeport  |  | CT                      | 06608-1302 |
| Principal Occupation  |  | Name of Employer  |  |                         |            |
| Retired   |  | Retired   |  |                         |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | Amount of Contribution  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | \$100.00                |            |
| Is this contribution associated with an event reported in Section L1?<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |  |                         |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |  |                         |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$100.00                |            |
| Last Name   |  | First   |  | M.I.                    |            |
| Vancisin  |  | Eleanor   |  | L                       |            |
| Residential Street Address  |  | City  |  | State                   | Zip Code   |
| 175 Country Dr  |  | Rocky Hill  |  | CT                      | 06067      |
| Principal Occupation  |  | Name of Employer  |  |                         |            |
| Dir of Operations   |  | Construction Resources INC  |  |                         |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | Amount of Contribution  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | \$1,000.00              |            |
| Is this contribution associated with an event reported in Section L1?<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |  |                         |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |  |                         |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$1,000.00              |            |
| Last Name   |  | First   |  | M.I.                    |            |
| Varrone   |  | John  |  |                         |            |
| Residential Street Address  |  | City  |  | State                   | Zip Code   |
| 70 Merrimac Dr  |  | Trumbull  |  | CT                      | 06611-1726 |
| Principal Occupation  |  | Name of Employer  |  |                         |            |
| Attorney  |  | Varrone & Varrone   |  |                         |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | Amount of Contribution  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | \$500.00                |            |
| Is this contribution associated with an event reported in Section L1?<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |  |                         |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative  |  |                         |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$500.00                |            |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>   | \$1,600.00   |
| <b>TOTAL of Section B Pages</b>   | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | \$182,255.00 |

I. MONETARY RECEIPTS (Sections A-K)

|   |  |   |                    |                         |            |
|---|--|---|--------------------|-------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |                    | TYPE OF REPORT          |            |
| Ganim for Bridgeport '19  |  |   |                    | April 10 filing         |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |                    | Subtotal Section A      |            |
|   |  |   |                    | \$0.00                  |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                    |                         |            |
| Last Name   |  | First   |                    | M.I.                    |            |
| Vaz   |  | Tony  |                    |                         |            |
| Residential Street Address  |  | City  |                    | State                   | Zip Code   |
| 47 Coe Rd   |  | Wolcott   |                    | CT                      | 06716-2511 |
| Principal Occupation  |  |   | Name of Employer   |                         |            |
| Information Requested   |  |   | Self               |                         |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                    | Amount of Contribution  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                    | \$100.00                |            |
| Is this contribution associated with an event reported in Section L1?<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                    |                         |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |                    |                         |            |
| Method of contribution:   |  |   | Date Received      | Aggregate contributions |            |
| <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/23/2017         | \$100.00                |            |
| Last Name   |  | First   |                    | M.I.                    |            |
| Vazzano   |  | Alex  |                    |                         |            |
| Residential Street Address  |  | City  |                    | State                   | Zip Code   |
| 1395 Huntington Tpke  |  | Trumbull  |                    | CT                      | 06611-5318 |
| Principal Occupation  |  |   | Name of Employer   |                         |            |
| Manager   |  |   | Catamount Food Svc |                         |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                    | Amount of Contribution  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                    | \$250.00                |            |
| Is this contribution associated with an event reported in Section L1?<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                    |                         |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |                    |                         |            |
| Method of contribution:   |  |   | Date Received      | Aggregate contributions |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/22/2017         | \$250.00                |            |
| Last Name   |  | First   |                    | M.I.                    |            |
| Vazzano   |  | Heidi   |                    | J                       |            |
| Residential Street Address  |  | City  |                    | State                   | Zip Code   |
| 1395 Huntington Tpke  |  | Trumbull  |                    | CT                      | 06611-5318 |
| Principal Occupation  |  |   | Name of Employer   |                         |            |
| St Vincents Medical Center  |  |   | HR                 |                         |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |                    | Amount of Contribution  |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                    | \$500.00                |            |
| Is this contribution associated with an event reported in Section L1?<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                    |                         |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |                    |                         |            |
| Method of contribution:   |  |   | Date Received      | Aggregate contributions |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  |   | 03/22/2017         | \$500.00                |            |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$850.00     |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |  |                               |            |
|---|--|---|--|-------------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |  | TYPE OF REPORT                |            |
| Ganim for Bridgeport '19  |  |   |  | April 10 filing               |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |  | <b>Subtotal Section A</b>     |            |
|   |  |   |  | <b>\$0.00</b>                 |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |  |                               |            |
| Last Name   |  | First   |  | MI                            |            |
| Vazzano   |  | John  |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 1395 Huntington Tpke  |  | Trumbull  |  | CT                            | 06611-5318 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Self Employed   |  | Restauranteer   |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section I.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |  | <b>\$1,000.00</b>             |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |  |                               |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/22/2017  |  | \$1,000.00                    |            |
| Last Name   |  | First   |  | MI                            |            |
| Verman  |  | Bhupendra   |  | K                             |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 111 Fairway Dr  |  | Stamford  |  | CT                            | 06903-1424 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Information Requested   |  | retired   |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section I.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |  | <b>\$500.00</b>               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |  |                               |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$500.00                      |            |
| Last Name   |  | First   |  | MI                            |            |
| Vetro   |  | Matthew   |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 20 Scattergood Cir  |  | Trumbull  |  | CT                            | 06611-2133 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Real Estate Investor  |  | Self Employed   |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section I.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |  | <b>\$500.00</b>               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, indicate which branch or branches of government the contract is with:</i><br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative |  |                               |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/22/2017  |  | \$500.00                      |            |

|  |                     |
|--|---------------------|
| <b>SUBTOTAL Section B - This Page</b>  | <b>\$2,000.00</b>   |
| <b>TOTAL of Section B Pages</b>  | <b>\$182,255.00</b> |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | <b>\$182,255.00</b> |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |                         |                        |            |
|---|--|---|-------------------------|------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |                         | TYPE OF REPORT         |            |
| Ganim for Bridgeport '19  |  |   |                         | April 10 filing        |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |                         | Subtotal Section A     |            |
|   |  |   |                         | \$0.00                 |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |                         |                        |            |
| Last Name   |  | First   |                         | M.I.                   |            |
| Vickers   |  | Constance   |                         | E                      |            |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |
| 110 Ellsworth St  |  | Bridgeport  |                         | CT                     | 06605-3179 |
| Principal Occupation  |  | Name of Employer  |                         |                        |            |
| Development Professional  |  | Stamford Boy and Girls Clud   |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         | \$100.00               |            |
| Is this contribution associated with an event reported in Section L1?<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |                         |                        |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                        |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  | \$100.00                |                        |            |
| Last Name   |  | First   |                         | M.I.                   |            |
| Visconti  |  | Mark  |                         | J                      |            |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |
| 41 Crossroads Plz, # 311  |  | West Hartford   |                         | CT                     | 06117-2402 |
| Principal Occupation  |  | Name of Employer  |                         |                        |            |
| Life Guard  |  | HealthTrax Avon   |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         | \$300.00               |            |
| Is this contribution associated with an event reported in Section L1?<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |                         |                        |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                        |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  | \$300.00                |                        |            |
| Last Name   |  | First   |                         | M.I.                   |            |
| Wallack   |  | Allan   |                         |                        |            |
| Residential Street Address  |  | City  |                         | State                  | Zip Code   |
| 45 Wendover Rd  |  | Trumbull  |                         | CT                     | 06611-1529 |
| Principal Occupation  |  | Name of Employer  |                         |                        |            |
| Information Requested   |  | Information Requested   |                         |                        |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he she is associated with have a contract with said municipality valued at more than \$5,000? |                         | Amount of Contribution |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                         | \$300.00               |            |
| Is this contribution associated with an event reported in Section L1?<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |                         |                        |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative   |                         |                        |            |
| Method of contribution:   |  | Date Received   | Aggregate contributions |                        |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  | \$300.00                |                        |            |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$700.00     |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |  |   |            |
|---|--|---|--|---|------------|
| NAME OF COMMITTEE <i>(Provide Complete Name as Registered with Filing Repository)</i>   |  |   |  | TYPE OF REPORT                                  |            |
| Ganim for Bridgeport '19  |  |   |  | April 10 filing                                 |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br><i>(See instructions for definition of Small Contributor)</i>  |  |   |  | Subtotal Section A                              |            |
|   |  |   |  | \$0.00  |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |  |   |            |
| Last Name   |  | First   |  | M.I.  |            |
| Walsh   |  | Thomas  |  | E   |            |
| Residential Street Address  |  | City  |  | State   | Zip Code   |
| 55 Magnolia Rd  |  | Trumbull  |  | CT  | 06611-2240 |
| Principal Occupation  |  | Name of Employer  |  |   |            |
| CPA   |  | Blum Shapiro  |  |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b><br><br>\$500.00   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No  |  |   |            |
| Is this contribution associated with an event reported in Section L1?<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |  |   |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions                         |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$500.00  |            |
| Last Name   |  | First   |  | M.I.  |            |
| Washington  |  | Derek   |  |   |            |
| Residential Street Address  |  | City  |  | State   | Zip Code   |
| 9 Tashua Pkwy   |  | Trumbull  |  | CT  | 06611-1026 |
| Principal Occupation  |  | Name of Employer  |  |   |            |
| Property Mgmt   |  | Black Diamond Grp LLC   |  |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b><br><br>\$1,000.00 |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |   |            |
| Is this contribution associated with an event reported in Section L1?<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |  |   |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions                         |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$1,000.00                                      |            |
| Last Name   |  | First   |  | M.I.  |            |
| Washington  |  | Desmond   |  |   |            |
| Residential Street Address  |  | City  |  | State   | Zip Code   |
| 4 Tashua Pkwy   |  | Trumbull  |  | CT  | 06611-1026 |
| Principal Occupation  |  | Name of Employer  |  |   |            |
| Property Development  |  | DLW Properties  |  |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b><br><br>\$500.00   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |   |            |
| Is this contribution associated with an event reported in Section L1?<br><i>If yes, list Event #</i>  |  | Is contributor a principal of a state contractor or prospective state contractor?<br><i>If yes, indicate which branch or branches of government the contract is with:</i>   |  |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |  |   |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions                         |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/22/2017  |  | \$500.00  |            |

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|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$2,000.00   |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|  |  |   |                                     |   |                        |
|--|--|---|-------------------------------------|---|------------------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)   |  |   |                                     | TYPE OF REPORT                                |                        |
| Ganim for Bridgeport '19   |  |   |                                     | April 10 filing                               |                        |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)  |  |   |                                     | <b>Subtotal Section A</b> \$0.00              |                        |
| <b>B. Itemized Contributions from Individuals</b>  |  |   |                                     |   |                        |
| Last Name<br>White   |  | First<br>Rowena   |                                     | M.I.  |                        |
| Residential Street Address<br>2675 Park Ave, Unit 7  |  | City<br>Bridgeport  |                                     | State<br>CT                                   | Zip Code<br>06604-1357 |
| Principal Occupation<br>Communication Director   |  | Name of Employer<br>City of Bridgeport  |                                     |   |                        |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |                                     | <b>Amount of Contribution</b><br><br>\$250.00 |                        |
| Is this contribution associated with an event reported in Section I.1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No                             |                                     |   |                        |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received<br>03/23/2017   | Aggregate contributions<br>\$250.00 |   |                        |
| Last Name<br>Williams  |  | First<br>Kaye   |                                     | M.I.<br>A                                     |                        |
| Residential Street Address<br>104 Seabright Ave  |  | City<br>Bridgeport  |                                     | State<br>CT                                   | Zip Code<br>06605-3425 |
| Principal Occupation<br>Owner  |  | Name of Employer<br>Captain's Cove Seaport  |                                     |   |                        |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |                                     | <b>Amount of Contribution</b><br><br>\$500.00 |                        |
| Is this contribution associated with an event reported in Section I.1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No                             |                                     |   |                        |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received<br>03/16/2017   | Aggregate contributions<br>\$500.00 |   |                        |
| Last Name<br>Williams  |  | First<br>Loretta  |                                     | M.I.  |                        |
| Residential Street Address<br>302 Wilmot Ave   |  | City<br>Bridgeport  |                                     | State<br>CT                                   | Zip Code<br>06607-1814 |
| Principal Occupation<br>Information Requested  |  | Name of Employer<br>City of Bridgeport  |                                     |   |                        |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |                                     | <b>Amount of Contribution</b><br><br>\$100.00 |                        |
| Is this contribution associated with an event reported in Section I.1?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No                             |                                     |   |                        |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received<br>03/23/2017   | Aggregate contributions<br>\$100.00 |   |                        |

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|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>   | \$850.00     |
| <b>TOTAL of Section B Pages</b>   | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |  |                               |            |
|---|--|---|--|-------------------------------|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |  | TYPE OF REPORT                |            |
| Ganim for Bridgeport '19  |  |   |  | April 10 filing               |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |  | <b>Subtotal Section A</b>     |            |
|   |  |   |  | \$0.00                        |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |  |                               |            |
| Last Name   |  | First   |  | M.I.                          |            |
| Willinger   |  | Charles   |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 10 Parrott Dr   |  | Shelton   |  | CT                            | 06484-4733 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Attorney  |  | Willinger, Willinger, Bucci   |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |  |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |  | \$1,000.00                    |            |
| Method of contribution:   |  | Date Received   |  |                               |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/29/2017  |  | \$1,000.00                    |            |
| Last Name   |  | First   |  | M.I.                          |            |
| Wong  |  | Rosemary  |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 150 Boston Ave  |  | Stratford   |  | CT                            | 06614-5208 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Information Requested   |  | City of Bridgeport  |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |  |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |  | \$100.00                      |            |
| Method of contribution:   |  | Date Received   |  |                               |            |
| <input checked="" type="checkbox"/> Cash<br><input type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$100.00                      |            |
| Last Name   |  | First   |  | M.I.                          |            |
| Woods   |  | Edward  |  |                               |            |
| Residential Street Address  |  | City  |  | State                         | Zip Code   |
| 200 Robert St   |  | Bridgeport  |  | CT                            | 06606-3969 |
| Principal Occupation  |  | Name of Employer  |  |                               |            |
| Small Minority Officer  |  | City of Bridgeport  |  |                               |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b> |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |                               |            |
| Is this contribution associated with an event reported in Section I.1?<br>If yes, list Event #  |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:  |  |                               |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No  |  | \$200.00                      |            |
| Method of contribution:   |  | Date Received   |  |                               |            |
| <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order |  | 03/23/2017  |  | \$200.00                      |            |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$1,300.00   |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|  |  |  |  |
|--|--|--|--|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)   |  | TYPE OF REPORT   |  |
| Ganim for Bridgeport '19   |  | April 10 filing  |  |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)  |  | <b>Subtotal Section A</b>  |  |
|  |  | <b>\$0.00</b>  |  |
| <b>B. Itemized Contributions from Individuals</b>  |  |  |  |
| Last Name<br><b>Wygal</b>  |  | First<br><b>John</b> MI  |  |
| Residential Street Address<br><b>39 Sunset Rd</b>  |  | City<br><b>Darien</b>  | State<br><b>CT</b> Zip Code<br><b>06820-3527</b> |
| Principal Occupation<br><b>Business Owner/Financial Svcs</b>   |  | Name of Employer<br><b>John H Wygal &amp; Co</b>   |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  |
| Is this contribution associated with an event reported in Section L1?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No                             |  |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received<br><b>03/23/2017</b>   | Aggregate contributions<br><b>\$150.00</b>       |
| Last Name<br><b>Yonard</b>   |  | First<br><b>Michael</b> MI   |  |
| Residential Street Address<br><b>46 Barnswillow Rd</b>   |  | City<br><b>Trumbull</b>  | State<br><b>CT</b> Zip Code<br><b>06611</b>      |
| Principal Occupation<br><b>Information Requested</b>   |  | Name of Employer<br><b>Information Requested</b>   |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  |
| Is this contribution associated with an event reported in Section L1?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No                             |  |
| Method of contribution:<br><input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received<br><b>03/23/2017</b>   | Aggregate contributions<br><b>\$100.00</b>       |
| Last Name<br><b>Young</b>  |  | First<br><b>Clement</b> MI   |  |
| Residential Street Address<br><b>30 Freeman St</b>   |  | City<br><b>Bridgeport</b>  | State<br><b>CT</b> Zip Code<br><b>06607-1555</b> |
| Principal Occupation<br><b>Information Requested</b>   |  | Name of Employer<br><b>retire</b>  |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  |
| Is this contribution associated with an event reported in Section L1?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If yes, list Event #   |  | Is contributor a principal of a state contractor or prospective state contractor?<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No                             |  |
| Method of contribution:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | Date Received<br><b>03/22/2017</b>   | Aggregate contributions<br><b>\$200.00</b>       |

|   |                     |
|---|---------------------|
| <b>SUBTOTAL Section B - This Page</b>                               | <b>\$450.00</b>     |
| <b>TOTAL of Section B Pages</b>                                     | <b>\$182,255.00</b> |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b> | <b>\$182,255.00</b> |
| <i>(Enter total on Line 13, Column A of Summary Page)</i>           |                     |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |   |   |  |
|---|---|---|--|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |   | TYPE OF REPORT  |  |
| Ganim for Bridgeport '19  |   | April 10 filing   |  |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor) |   | Subtotal Section A  |  |
|   |   | \$0.00  |  |
| <b>B. Itemized Contributions from Individuals</b>   |   |   |  |
| Last Name   |   | First   | M.I.   |
| Zalinger  |   | Robert  | I  |
| Residential Street Address  |   | City  | State Zip Code   |
| 183 Meadows End Rd  |   | Monroe  | CT 06468-1705  |
| Principal Occupation  |   | Name of Employer  |  |
| Sales   |   | SeatCoating Inc   |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |
| Is this contribution associated with an event reported in Section I.1?  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  | If yes, indicate which branch or branches of government the contract is with:   | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No |
| Method of contribution:   | <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order | Date Received   | Aggregate contributions  |
|   |   | 03/10/2017  | \$500.00   |
| Last Name   |   | First   | M.I.   |
| Zarrelli  |   | Allison   | M  |
| Residential Street Address  |   | City  | State Zip Code   |
| 40 Oriole Ln  |   | Trumbull  | CT 06611-4918  |
| Principal Occupation  |   | Name of Employer  |  |
| Manager   |   | Ryan John Salon   |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |
| Is this contribution associated with an event reported in Section I.1?  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  | If yes, indicate which branch or branches of government the contract is with:   | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No |
| Method of contribution:   | <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order | Date Received   | Aggregate contributions  |
|   |   | 03/22/2017  | \$1,000.00   |
| Last Name   |   | First   | M.I.   |
| Zeff  |   | Avram   | R  |
| Residential Street Address  |   | City  | State Zip Code   |
| 17068 Brookwood Dr  |   | Boca Raton  | FL 33496-5928  |
| Principal Occupation  |   | Name of Employer  |  |
| Lawyer  |   | Information Requested   |  |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   |
| Is this contribution associated with an event reported in Section I.1?  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  | If yes, indicate which branch or branches of government the contract is with:   | <input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No |
| Method of contribution:   | <input type="checkbox"/> Cash<br><input checked="" type="checkbox"/> Personal Check<br><input type="checkbox"/> Credit Debit Card<br><input type="checkbox"/> Payroll Deduction<br><input type="checkbox"/> Money Order | Date Received   | Aggregate contributions  |
|   |   | 03/20/2017  | \$500.00   |

|   |              |
|---|--------------|
| <b>SUBTOTAL Section B - This Page</b>   | \$2,000.00   |
| <b>TOTAL of Section B Pages</b>   | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br>(Enter total on Line 13, Column A of Summary Page) | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

|   |  |   |  |   |            |
|---|--|---|--|---|------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |  |   |  | TYPE OF REPORT                                |            |
| Ganim for Bridgeport '19  |  |   |  | April 10 filing                               |            |
| <b>A. Total Contributions from Small Contributors - Received this Period ONLY</b><br>(See instructions for definition of Small Contributor)   |  |   |  | Subtotal Section A                            |            |
|   |  |   |  | \$0.00  |            |
| <b>B. Itemized Contributions from Individuals</b>   |  |   |  |   |            |
| Last Name   |  | First   |  | M.I.  |            |
| Zeff  |  | Susan   |  | J   |            |
| Residential Street Address  |  | City  |  | State   | Zip Code   |
| 17068 Brookwood Dr  |  | Boca Raton  |  | FL  | 33496-5928 |
| Principal Occupation Information Requested  |  |   | Name of Employer Information Requested |   |            |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  |  | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? |  | <b>Amount of Contribution</b><br><br>\$500.00 |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |  |   |            |
| Is this contribution associated with an event reported in Section L.1?  |  | Is contributor a principal of a state contractor or prospective state contractor?   |  |   |            |
| <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br><i>If yes, list Event #</i>   |  | If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No   |  |   |            |
| Method of contribution:   |  | Date Received   |  | Aggregate contributions                       |            |
| <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order |  | 03/20/2017  |  | \$500.00                                      |            |

|  |              |
|--|--------------|
| <b>SUBTOTAL Section B - This Page</b>  | \$500.00     |
| <b>TOTAL of Section B Pages</b>  | \$182,255.00 |
| <b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</b><br><i>(Enter total on Line 13, Column A of Summary Page)</i> | \$182,255.00 |

**I. MONETARY RECEIPTS (Sections A-K)**

| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) |             |                        |  |                                       |  | TYPE OF REPORT         |  |
|--|-------------|------------------------|--|---------------------------------------|--|------------------------|--|
| Ganim for Bridgeport '19   |             |                        |  |                                       |  | April 10 filing        |  |
| <b>C1. Contributions from Other Committees</b>                                 |             |                        |  |                                       |  |                        |  |
| Name of Committee<br>AT&T Connecticut Employee                                 |             |                        |  | Name of Treasurer<br>Lisa Granger     |  |                        |  |
| Address<br>2 Science Park, 2nd f   |             |                        | Is this contribution associated with an event reported in Section L1?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If yes, list Event # _____ |                                       |  | Amount of Contribution |  |
| City<br>New Haven  | State<br>CT | Zip Code<br>06511-1963 | Date Received<br>03/21/2017  | Aggregate Contributions<br>\$1,000.00 |  | \$1,000.00             |  |
| Name of Committee<br>Bridgeport Democratic Tow                                 |             |                        |  | Name of Treasurer<br>Maria Heller     |  |                        |  |
| Address<br>30 Emerald Ridge CT, Apt 713  |             |                        | Is this contribution associated with an event reported in Section L1?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If yes, list Event # _____ |                                       |  | Amount of Contribution |  |
| City<br>Shelton  | State<br>CT | Zip Code<br>06484-2178 | Date Received<br>03/30/2017  | Aggregate Contributions<br>\$1,500.00 |  | \$1,500.00             |  |
| Name of Committee<br>Carpenters Local 210 O P                                  |             |                        |  | Name of Treasurer<br>Michael Robinson |  |                        |  |
| Address<br>618 Main St   |             |                        | Is this contribution associated with an event reported in Section L1?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If yes, list Event # _____ |                                       |  | Amount of Contribution |  |
| City<br>Monroe   | State<br>CT | Zip Code<br>06468-2808 | Date Received<br>03/23/2017  | Aggregate Contributions<br>\$1,000.00 |  | \$1,000.00             |  |
| Name of Committee<br>Committee To Elect Democr                                 |             |                        |  | Name of Treasurer<br>Rosanne Gallant  |  |                        |  |
| Address<br>527 Tunxis Hill Rd  |             |                        | Is this contribution associated with an event reported in Section L1?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If yes, list Event # _____ |                                       |  | Amount of Contribution |  |
| City<br>Fairfield  | State<br>CT | Zip Code<br>06825-4473 | Date Received<br>03/31/2017  | Aggregate Contributions<br>\$1,000.00 |  | \$1,000.00             |  |
| Name of Committee<br>Connecticut Laborers' Pol                                 |             |                        |  | Name of Treasurer<br>Keith Brothers   |  |                        |  |
| Address<br>475 Ledyard St  |             |                        | Is this contribution associated with an event reported in Section L1?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If yes, list Event # _____ |                                       |  | Amount of Contribution |  |
| City<br>Hartford   | State<br>CT | Zip Code<br>06114-3211 | Date Received<br>03/21/2017  | Aggregate Contributions<br>\$1,000.00 |  | \$1,000.00             |  |
| Name of Committee<br>Iron Pac - 424  |             |                        |  | Name of Treasurer<br>Gry Esposito     |  |                        |  |
| Address<br>15 Bernhard Rd  |             |                        | Is this contribution associated with an event reported in Section L1?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If yes, list Event # _____ |                                       |  | Amount of Contribution |  |
| City<br>North Haven  | State<br>CT | Zip Code<br>06473-3906 | Date Received<br>03/16/2017  | Aggregate Contributions<br>\$750.00   |  | \$750.00               |  |
| Name of Committee<br>IUOE Local 478 Policial A                                 |             |                        |  | Name of Treasurer<br>Craig Metz       |  |                        |  |
| Address<br>1965 Dixwell Ave  |             |                        | Is this contribution associated with an event reported in Section L1?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If yes, list Event # _____ |                                       |  | Amount of Contribution |  |
| City<br>Hamden   | State<br>CT | Zip Code<br>06514-2407 | Date Received<br>03/17/2017  | Aggregate Contributions<br>\$1,000.00 |  | \$1,000.00             |  |
| Name of Committee<br>NE Regional Council/Carpe                                 |             |                        |  | Name of Treasurer<br>John Cunningham  |  |                        |  |
| Address<br>618 Main St   |             |                        | Is this contribution associated with an event reported in Section L1?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If yes, list Event # _____ |                                       |  | Amount of Contribution |  |
| City<br>Monroe   | State<br>CT | Zip Code<br>06468-2808 | Date Received<br>03/20/2017  | Aggregate Contributions<br>\$1,000.00 |  | \$1,000.00             |  |

**SUBTOTAL Section C1 - This Page** \$8,250.00

**TOTAL of Section C1 Pages** \$9,050.00

**TOTAL OF ALL COMMITTEE CONTRIBUTIONS AND RECEIPTS (Sections C1 + C2) (Enter total on Line 14, Column A of Summary Page)** \$9,050.00

**I. MONETARY RECEIPTS (Sections A-K)**

|  |  |             |   |                                      |                        |  |
|--|--|-------------|---|--------------------------------------|------------------------|--|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) |  |             |   |                                      | TYPE OF REPORT         |  |
| Ganim for Bridgeport '19   |  |             |   |                                      | April 10 filing        |  |
| <b>C1. Contributions from Other Committees</b>                                 |  |             |   |                                      |                        |  |
| Name of Committee<br>Roofers Political Educati                                 |  |             |   | Name of Treasurer<br>Harold Davidson |                        |  |
| Address<br>15 Bernhard Rd  |  |             | Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |                                      | Amount of Contribution |  |
| City<br>North Haven  |  | State<br>CT | Zip Code<br>06473-3906  | Date Received<br>03/23/2017          |                        |  |
| Name of Committee<br>Uniformed Professional Fi                                 |  |             |   | Name of Treasurer<br>Robert Anthony  |                        |  |
| Address<br>30 Sherman St   |  |             | Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |                                      | Amount of Contribution |  |
| City<br>West Hartford  |  | State<br>CT | Zip Code<br>06110-1915  | Date Received<br>03/22/2017          |                        |  |

**SUBTOTAL Section C1 - This Page** \$800.00

**TOTAL of Section C1 Pages** \$9,050.00

**TOTAL OF ALL COMMITTEE CONTRIBUTIONS AND RECEIPTS**  
(Sections C1 + C2) (Enter total on Line 14, Column A of Summary Page) \$9,050.00

**I. MONETARY RECEIPTS (Sections A-K)**

|  |   |                    |
|--|---|--------------------|
| NAME OF COMMITTEE <i>(Provide Complete Name as Registered with Filing Repository)</i>      |   | TYPE OF REPORT     |
| Ganim for Bridgeport '19   |   | April 10 filing    |
| <b>H. Personal Funds of the Candidate Received this Period (Candidate Committees ONLY)</b> |   |                    |
| Date of Receipt<br>02/17/2017  | Method of Payment:<br><input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit Debit Card | Amount<br>\$100.00 |

**TOTAL SECTION H** \$100.00

**I. MONETARY RECEIPTS (Sections A-K)**

|   |   |                 |
|---|---|-----------------|
| NAME OF COMMITTEE <i>(Provide Complete Name as Registered with Filing Repository)</i>           |   | TYPE OF REPORT  |
| Ganim for Bridgeport '19  |   | April 10 filing |
| <b>Summary of Other Monetary Receipts (Sections D-K)</b>  |   |                 |
| Total Loans Received this Period (Section D)  |   | \$0.00          |
| Total Receipts from Entities other than Individuals or Other Committees (Section E)             | + | \$0.00          |
| Total Amount Transferred from Affiliated Business Treasury (Section F)                          | + | \$0.00          |
| Total Amount Transferred from Affiliated Labor Union or Other Organization Treasury (Section G) | + | \$0.00          |
| Total Amount of Personal Funds of the Candidate Received this Period (Section H)                | + | \$100.00        |
| Total Amount of Interest from Deposits in Authorized Accounts (Section J)                       | + | \$0.00          |
| Total Miscellaneous Monetary Receipts not Considered Contributions (Section K)                  | + | \$0.00          |

**Total of Other Monetary Receipts** (Add Sections D through K) *(Enter total on Line 15, Column A of Summary Page Totals)*

|          |
|----------|
| \$100.00 |
|----------|

II. EVENT ACTIVITY (Sections L1-L5)

|   |             |  |  |                   |
|---|-------------|--|--|-------------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |             |  | TYPE OF REPORT   |                   |
| Ganim for Bridgeport '19  |             |  | April 10 filing  |                   |
| <b>L1. Event Information</b>  |             |  |  |                   |
| Event #<br>Date of Event<br>03/23/2017  | Letter<br>a | Description<br>Party Event   | Was this a fundraising event?<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |                   |
| Location: Street Address<br>1776 Madison Avenue   |             | City<br>Bridgeport   | State<br>CT  | Zip Code<br>06606 |
| <b>Subpart 1: (All Committees)</b>  |             |  |  |                   |
| Was this event hosted at a personal residence?  |             | <input type="checkbox"/> Yes (If yes, go to Section L5 In-Kind Donations not Considered Contributions Associated with a House Party and complete required information for any purchases made by host(s) for food, beverage and invitations.)<br><input checked="" type="checkbox"/> No |  |                   |
| Did this fundraiser include goods or services donated by a business entity of up to \$200 or items donated by an individual of up to \$100? |             | <input checked="" type="checkbox"/> Yes (If yes, go to Section L4 In-Kind Donations not Considered Contributions and complete required information.)<br><input type="checkbox"/> No  |  |                   |
| Was this fundraiser a tag sale, auction, or other sale of donated items with purchases by an individual of up to \$100?                     |             | <input type="checkbox"/> Yes (If yes, enter Total Receipts here.)<br><input checked="" type="checkbox"/> No  |  |                   |
| <b>Subpart 2: (Party Committees, Municipal Candidates and Political Committees other than Exploratory Committees)</b>                       |             |  |  |                   |
| Were there purchases of advertising space in a program book or on a sign associated with this fundraiser?                                   |             | <input type="checkbox"/> Yes (If yes, go to Section L3 Purchases of Advertising Space in a Program Book or on a Sign and complete required information.)<br><input checked="" type="checkbox"/> No   |  |                   |
| <b>Subpart 3: (Town Committees ONLY)</b>  |             |  |  |                   |
| Did your committee sell food or beverage at a fair or similar mass gathering held within the state?   |             | <input type="checkbox"/> Yes (If yes, enter Total Receipts here.)<br><input checked="" type="checkbox"/> No  |  |                   |

|  |               |
|--|---------------|
| SUBTOTAL Section L1-Subpart 1 (All Committees) Total Receipts from Sale of Donated Items - This Page         | \$0.00        |
| SUBTOTAL Section L1-Subpart 3 (Town Committees ONLY) Total Receipts from Food Purchases - This Page          | \$0.00        |
| TOTAL of Section L1 Pages  | \$0.00        |
| <b>TOTAL OF ALL RECEIPTS FROM SMALL PURCHASES (Enter total on Line 16a, Column A of Summary Page Totals)</b> | <b>\$0.00</b> |

III. NONMONETARY RECEIPTS (Sections M-O)

|  |  |                                     |  |  |                        |
|--|--|-------------------------------------|--|--|------------------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)   |  |                                     |  | TYPE OF REPORT   |                        |
| Ganim for Bridgeport '19   |  |                                     |  | April 10 filing  |                        |
| <b>M. In-Kind Contributions</b>  |  |                                     |  |  |                        |
| Name<br>Virginia Malheiro  |  |                                     |  |  |                        |
| Street Address<br>11 Botsford Pl   |  |                                     | City<br>Trumbull   | State<br>CT  | Zip Code<br>06611-4702 |
| Type of Contributor:<br><input checked="" type="checkbox"/> Individual / Sole Proprietorship<br><input type="checkbox"/> Committee<br><input type="checkbox"/> Other             | Date Received<br>03/23/2017  | Aggregate Contributions<br>\$850.00 | Description of In-Kind Contribution<br>DJ for Fundraiser |  |                        |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No                                   | If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No  |                                     |  | Fair Market Value of this Contribution<br><br>\$350.00 |                        |
| Is this contribution associated with an event reported in Section L.1?<br><input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No<br>If yes, list Event # 032317a | Is contributor a principal of a state contractor or prospective state contractor?<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No<br>If yes, indicate which branch or branches of government the contract is with:<br><input type="checkbox"/> Executive<br><input type="checkbox"/> Legislative<br><input checked="" type="checkbox"/> No |                                     |  |  |                        |

|   |          |
|---|----------|
| <b>SUBTOTAL Section M - This Page</b>   | \$350.00 |
| <b>TOTAL of Section M Pages</b>   | \$350.00 |
| <b>TOTAL OF ALL IN-KIND CONTRIBUTIONS (Enter total on Line 23, Column A of Summary Page Totals)</b> | \$350.00 |

IV. EXPENDITURES (Sections P-T)

|  |   |                               |  |                          |  |
|--|---|-------------------------------|--|--------------------------|--|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) |   |                               | TYPE OF REPORT   |                          |  |
| Ganim for Bridgeport '19   |   |                               | April 10 filing  |                          |  |
| <b>P. Expenses Paid by Committee</b>   |   |                               |  |                          |  |
| Name of Payee<br>EditGroup LLC   |   | Date of Payment<br>03/31/2017 | Method of Payment<br><input checked="" type="checkbox"/> Check # 103<br><input type="checkbox"/> Debit Card <input type="checkbox"/> EFT |                          |  |
| Street Address<br>83 Bonnie View Dr  |   | City<br>Trumbull              | State<br>CT  | Zip Code<br>06611-4701   |  |
| Purpose of Expenditure (by code) REF   | Description<br>Refund LLC check deposited. Should have been a personal ck   | Event #                       |  | Amount<br><br>\$100.00   |  |
| Expenditure # (if applicable)  | Type of Expenditure (Itemization in Addendum P Required unless "None of the below" is checked)<br><input checked="" type="checkbox"/> None of the below (does not involve another candidate or committee)<br><input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Independent<br><input type="checkbox"/> Coordinated without reimbursement sought (in kind contribution) <input type="checkbox"/> Organization: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D |                               |  |                          |  |
| Name of Payee<br>Virginia Malheiro   |   | Date of Payment<br>03/30/2017 | Method of Payment<br><input checked="" type="checkbox"/> Check # 94<br><input type="checkbox"/> Debit Card <input type="checkbox"/> EFT  |                          |  |
| Street Address<br>11 Botsford Pl   |   | City<br>Trumbull              | State<br>CT  | Zip Code<br>06611-4702   |  |
| Purpose of Expenditure (by code) RMB   | Description<br>Reimbursement  | Event #                       |  | Amount<br><br>\$4,387.85 |  |
| Expenditure # (if applicable)  | Type of Expenditure (Itemization in Addendum P Required unless "None of the below" is checked)<br><input checked="" type="checkbox"/> None of the below (does not involve another candidate or committee)<br><input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Independent<br><input type="checkbox"/> Coordinated without reimbursement sought (in kind contribution) <input type="checkbox"/> Organization: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D |                               |  |                          |  |
| Name of Payee<br>Peoples United Bank   |   | Date of Payment<br>03/31/2017 | Method of Payment<br><input type="checkbox"/> Check #<br><input type="checkbox"/> Debit Card <input checked="" type="checkbox"/> EFT     |                          |  |
| Street Address<br>1728 Park Ave  |   | City<br>Bridgeport            | State<br>CT  | Zip Code<br>06604-2520   |  |
| Purpose of Expenditure (by code) BNK   | Description<br>Bank Fee   | Event #                       |  | Amount<br><br>\$15.00    |  |
| Expenditure # (if applicable)  | Type of Expenditure (Itemization in Addendum P Required unless "None of the below" is checked)<br><input checked="" type="checkbox"/> None of the below (does not involve another candidate or committee)<br><input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Independent<br><input type="checkbox"/> Coordinated without reimbursement sought (in kind contribution) <input type="checkbox"/> Organization: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D |                               |  |                          |  |

|  |            |
|--|------------|
| <b>SUBTOTAL Section P - This Page</b>  | \$4,502.85 |
| <b>TOTAL of Section P Pages</b>  | \$4,502.85 |
| <b>TOTAL OF ALL EXPENSES PAID BY COMMITTEE (Enter total on Line 19, Column A of Summary Page Totals)</b> | \$4,502.85 |

**IV. EXPENDITURES (Sections P-T)**

|  |   |          |           |   |   |
|--|---|----------|-----------|---|---|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) |   |          |           | TYPE OF REPORT  |   |
| Ganim for Bridgeport '19   |   |          |           | April 10 filing   |   |
| <b>T. Itemization of Reimbursements to Committee Workers and Consultants</b>   |   |          |           |   |   |
| Last Name of Worker/Consultant   |   | First    |           | MI  | Date of Payment to Vendor, Person or Entity |
| Virginia   |   | Malheiro |           |   | 02/22/2017                                  |
| Name of Vendor, Person or Entity Paid by Committee Worker/Consultant           |   |          |           | Payment to Reimburse Committee Worker/Consultant as reported in Section P:                                      |   |
| Staples  |   |          |           | <input checked="" type="checkbox"/> Check # 94 <input type="checkbox"/> Debit Card <input type="checkbox"/> EFT |   |
| Street Address   |   |          | City      |   | State    Zip Code                           |
| 1201 Kings Hwy   |   |          | Fairfield |   | CT    06824-5319                            |
| Purpose of Expenditure (by code)   | Description   | Event #  |           | Amount  |   |
| OFFICE   | Various envelopes etc for mailing fundraiser info   |          |           |   |   |
| Expenditure # (if applicable)  | Type of Expenditure (Itemization in Addendum T Required unless "None of the below" is checked)  |          |           |   |   |
|  | <input checked="" type="checkbox"/> None of the below (does not involve another candidate or committee) <input type="checkbox"/> Independent<br><input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Organization: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D<br><input type="checkbox"/> Coordinated without reimbursement sought (in-kind contribution) |          |           | \$171.17  |   |
| Last Name of Worker/Consultant   |   | First    |           | MI  | Date of Payment to Vendor, Person or Entity |
| Virginia   |   | Malheiro |           |   | 02/23/2017                                  |
| Name of Vendor, Person or Entity Paid by Committee Worker/Consultant           |   |          |           | Payment to Reimburse Committee Worker/Consultant as reported in Section P:                                      |   |
| Staples  |   |          |           | <input checked="" type="checkbox"/> Check # 94 <input type="checkbox"/> Debit Card <input type="checkbox"/> EFT |   |
| Street Address   |   |          | City      |   | State    Zip Code                           |
| 1201 Kings Hwy   |   |          | Fairfield |   | CT    06824-5319                            |
| Purpose of Expenditure (by code)   | Description   | Event #  |           | Amount  |   |
| PRNT   | 1000 Custom Copy and Print for flyers   |          |           |   |   |
| Expenditure # (if applicable)  | Type of Expenditure (Itemization in Addendum T Required unless "None of the below" is checked)  |          |           |   |   |
|  | <input checked="" type="checkbox"/> None of the below (does not involve another candidate or committee) <input type="checkbox"/> Independent<br><input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Organization: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D<br><input type="checkbox"/> Coordinated without reimbursement sought (in-kind contribution) |          |           | \$360.53  |   |
| Last Name of Worker/Consultant   |   | First    |           | MI  | Date of Payment to Vendor, Person or Entity |
| Virginia   |   | Malheiro |           |   | 02/23/2017                                  |
| Name of Vendor, Person or Entity Paid by Committee Worker/Consultant           |   |          |           | Payment to Reimburse Committee Worker/Consultant as reported in Section P:                                      |   |
| Staples  |   |          |           | <input checked="" type="checkbox"/> Check # 94 <input type="checkbox"/> Debit Card <input type="checkbox"/> EFT |   |
| Street Address   |   |          | City      |   | State    Zip Code                           |
| 1201 Kings Hwy   |   |          | Fairfield |   | CT    06824-5319                            |
| Purpose of Expenditure (by code)   | Description   | Event #  |           | Amount  |   |
| MISC   | 140 Colored SS Letters for mailing  |          |           |   |   |
| Expenditure # (if applicable)  | Type of Expenditure (Itemization in Addendum T Required unless "None of the below" is checked)  |          |           |   |   |
|  | <input checked="" type="checkbox"/> None of the below (does not involve another candidate or committee) <input type="checkbox"/> Independent<br><input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Organization: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D<br><input type="checkbox"/> Coordinated without reimbursement sought (in-kind contribution) |          |           | \$81.89   |   |

**SUBTOTAL Section T - This Page** \$613.59

**TOTAL of Section T Pages** \$4,387.85

**TOTAL OF ALL REIMBURSEMENT TO COMMITTEE WORKERS AND CONSULTANTS** \$4,387.85

**IV. EXPENDITURES (Sections P-T)**

|  |                 |
|--|-----------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | TYPE OF REPORT  |
| Ganim for Bridgeport '19   | April 10 filing |

**T. Itemization of Reimbursements to Committee Workers and Consultants**

|  |   |                          |  |  |                               |
|--|---|--------------------------|--|--|-------------------------------|
| Last Name of Worker/Consultant<br><b>Virginia</b>                                      |   | First<br><b>Malheiro</b> | MI   | Date of Payment to Vendor, Person or Entity<br><b>02/23/2017</b> |                               |
| Name of Vendor, Person or Entity Paid by Committee Worker/Consultant<br><b>Staples</b> |   |                          | Payment to Reimburse Committee Worker/Consultant as reported in Section P:<br><input checked="" type="checkbox"/> Check # <b>94</b> <input type="checkbox"/> Debit Card <input type="checkbox"/> EFT |  |                               |
| Street Address<br><b>1201 Kings Hwy</b>  |   | City<br><b>Fairfield</b> |  | State<br><b>CT</b>   | Zip Code<br><b>06824-5319</b> |
| Purpose of Expenditure (by code) <b>MISC</b>   | Description<br><b>Letters need for mailing of fundraiser</b>  | Event #                  |  | <b>Amount</b><br><br><b>\$17.55</b>                              |                               |
| Expenditure # (if applicable)  | Type of Expenditure (Itemization in Addendum T Required unless "None of the below" is checked)<br><input checked="" type="checkbox"/> None of the below (does not involve another candidate or committee) <input type="checkbox"/> Independent<br><input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Organization: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D<br><input type="checkbox"/> Coordinated without reimbursement sought (in-kind contribution) |                          |  |  |                               |
| Last Name of Worker/Consultant<br><b>Virginia</b>                                      |   | First<br><b>Malheiro</b> | MI   | Date of Payment to Vendor, Person or Entity<br><b>02/23/2017</b> |                               |
| Name of Vendor, Person or Entity Paid by Committee Worker/Consultant<br><b>Staples</b> |   |                          | Payment to Reimburse Committee Worker/Consultant as reported in Section P:<br><input checked="" type="checkbox"/> Check # <b>94</b> <input type="checkbox"/> Debit Card <input type="checkbox"/> EFT |  |                               |
| Street Address<br><b>1201 Kings Hwy</b>  |   | City<br><b>Fairfield</b> |  | State<br><b>CT</b>   | Zip Code<br><b>06824-5319</b> |
| Purpose of Expenditure (by code) <b>PRNT</b>   | Description<br><b>Custom Copy and Printing for flyers</b>   | Event #                  |  | <b>Amount</b><br><br><b>\$338.90</b>                             |                               |
| Expenditure # (if applicable)  | Type of Expenditure (Itemization in Addendum T Required unless "None of the below" is checked)<br><input checked="" type="checkbox"/> None of the below (does not involve another candidate or committee) <input type="checkbox"/> Independent<br><input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Organization: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D<br><input type="checkbox"/> Coordinated without reimbursement sought (in-kind contribution) |                          |  |  |                               |
| Last Name of Worker/Consultant<br><b>Virginia</b>                                      |   | First<br><b>Malheiro</b> | MI   | Date of Payment to Vendor, Person or Entity<br><b>02/26/2017</b> |                               |
| Name of Vendor, Person or Entity Paid by Committee Worker/Consultant<br><b>Staples</b> |   |                          | Payment to Reimburse Committee Worker/Consultant as reported in Section P:<br><input checked="" type="checkbox"/> Check # <b>94</b> <input type="checkbox"/> Debit Card <input type="checkbox"/> EFT |  |                               |
| Street Address<br><b>1201 Kings Hwy</b>  |   | City<br><b>Fairfield</b> |  | State<br><b>CT</b>   | Zip Code<br><b>06824-5319</b> |
| Purpose of Expenditure (by code) <b>FNDR</b>   | Description<br><b>Cover Letter for fundraiser mailing</b>   | Event #                  |  | <b>Amount</b><br><br><b>\$93.59</b>                              |                               |
| Expenditure # (if applicable)  | Type of Expenditure (Itemization in Addendum T Required unless "None of the below" is checked)<br><input checked="" type="checkbox"/> None of the below (does not involve another candidate or committee) <input type="checkbox"/> Independent<br><input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Organization: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D<br><input type="checkbox"/> Coordinated without reimbursement sought (in-kind contribution) |                          |  |  |                               |

|  |                   |
|--|-------------------|
| <b>SUBTOTAL Section T - This Page</b>                                  | <b>\$450.04</b>   |
| <b>TOTAL of Section T Pages</b>  | <b>\$4,387.85</b> |
| <b>TOTAL OF ALL REIMBURSEMENT TO COMMITTEE WORKERS AND CONSULTANTS</b> | <b>\$4,387.85</b> |

**IV. EXPENDITURES (Sections P-T)**

|   |   |                   |                   |   |   |
|---|---|-------------------|-------------------|---|---|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |   |                   | TYPE OF REPORT    |   |   |
| Ganim for Bridgeport '19  |   |                   | April 10 filing   |   |   |
| <b>T. Itemization of Reimbursements to Committee Workers and Consultants</b>    |   |                   |                   |   |   |
| Last Name of Worker/Consultant<br>Virginia                                      |   | First<br>Malheiro |                   | MI  | Date of Payment to Vendor, Person or Entity<br>02/27/2017 |
| Name of Vendor, Person or Entity Paid by Committee Worker/Consultant<br>Staples |   |                   |                   | Payment to Reimburse Committee Worker/Consultant as reported in Section P:<br><input checked="" type="checkbox"/> Check # 94 <input type="checkbox"/> Debit Card <input type="checkbox"/> EFT |   |
| Street Address<br>1201 Kings Hwy  |   |                   | City<br>Fairfield |   | State<br>CT    Zip Code<br>06824-5319                     |
| Purpose of Expenditure (by code) MISC   | Description<br>Items needed to mail flyers for fundraiser: stamps, envelopes, labels  |                   | Event #           |   | Amount<br><br>\$589.92                                    |
| Expenditure # (if applicable)   | Type of Expenditure (Itemization in Addendum T Required unless "None of the below" is checked)<br><input checked="" type="checkbox"/> None of the below (does not involve another candidate or committee)<br><input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Independent<br><input type="checkbox"/> Coordinated without reimbursement sought (in-kind contribution) <input type="checkbox"/> Organization: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D |                   |                   |   |   |
| Last Name of Worker/Consultant<br>Virginia                                      |   | First<br>Malheiro |                   | MI  | Date of Payment to Vendor, Person or Entity<br>02/27/2017 |
| Name of Vendor, Person or Entity Paid by Committee Worker/Consultant<br>Staples |   |                   |                   | Payment to Reimburse Committee Worker/Consultant as reported in Section P:<br><input checked="" type="checkbox"/> Check # 94 <input type="checkbox"/> Debit Card <input type="checkbox"/> EFT |   |
| Street Address<br>1201 Kings Hwy  |   |                   | City<br>Fairfield |   | State<br>CT    Zip Code<br>06824-5319                     |
| Purpose of Expenditure (by code) FNDR   | Description<br>Cover Letter for fundraiser  |                   | Event #           |   | Amount<br><br>\$93.59                                     |
| Expenditure # (if applicable)   | Type of Expenditure (Itemization in Addendum T Required unless "None of the below" is checked)<br><input checked="" type="checkbox"/> None of the below (does not involve another candidate or committee)<br><input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Independent<br><input type="checkbox"/> Coordinated without reimbursement sought (in-kind contribution) <input type="checkbox"/> Organization: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D |                   |                   |   |   |
| Last Name of Worker/Consultant<br>Virginia                                      |   | First<br>Malheiro |                   | MI  | Date of Payment to Vendor, Person or Entity<br>02/27/2017 |
| Name of Vendor, Person or Entity Paid by Committee Worker/Consultant<br>Staples |   |                   |                   | Payment to Reimburse Committee Worker/Consultant as reported in Section P:<br><input checked="" type="checkbox"/> Check # 94 <input type="checkbox"/> Debit Card <input type="checkbox"/> EFT |   |
| Street Address<br>1201 Kings Hwy  |   |                   | City<br>Fairfield |   | State<br>CT    Zip Code<br>06824-5319                     |
| Purpose of Expenditure (by code) FNDR   | Description<br>Cover Letter for fundraiser  |                   | Event #           |   | Amount<br><br>\$93.59                                     |
| Expenditure # (if applicable)   | Type of Expenditure (Itemization in Addendum T Required unless "None of the below" is checked)<br><input checked="" type="checkbox"/> None of the below (does not involve another candidate or committee)<br><input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Independent<br><input type="checkbox"/> Coordinated without reimbursement sought (in-kind contribution) <input type="checkbox"/> Organization: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D |                   |                   |   |   |

**SUBTOTAL Section T - This Page** \$777.10

**TOTAL of Section T Pages** \$4,387.85

**TOTAL OF ALL REIMBURSEMENT TO COMMITTEE WORKERS AND CONSULTANTS** \$4,387.85

**IV. EXPENDITURES (Sections P-T)**

|   |   |                   |   |   |                        |
|---|---|-------------------|---|---|------------------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |   |                   | TYPE OF REPORT  |   |                        |
| Ganim for Bridgeport '19  |   |                   | April 10 filing   |   |                        |
| <b>T. Itemization of Reimbursements to Committee Workers and Consultants</b>    |   |                   |   |   |                        |
| Last Name of Worker/Consultant<br>Virginia                                      |   | First<br>Malheiro | MI  | Date of Payment to Vendor, Person or Entity<br>02/27/2017 |                        |
| Name of Vendor, Person or Entity Paid by Committee Worker/Consultant<br>Staples |   |                   | Payment to Reimburse Committee Worker/Consultant as reported in Section P:<br><input checked="" type="checkbox"/> Check # 94 <input type="checkbox"/> Debit Card <input type="checkbox"/> EFT |   |                        |
| Street Address<br>1201 Kings Hwy  |   | City<br>Fairfield |   | State<br>CT   | Zip Code<br>06824-5319 |
| Purpose of Expenditure (by code) FNRD   | Description<br>Letters for fundraiser mailing   | Event #           |   | Amount  |                        |
| Expenditure # (if applicable)   | Type of Expenditure (Itemization in Addendum T Required unless "None of the below" is checked)<br><input checked="" type="checkbox"/> None of the below (does not involve another candidate or committee) <input type="checkbox"/> Independent<br><input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Organization: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D<br><input type="checkbox"/> Coordinated without reimbursement sought (in kind contribution) |                   |   | \$93.59   |                        |
| Last Name of Worker/Consultant<br>Virginia                                      |   | First<br>Malheiro | MI  | Date of Payment to Vendor, Person or Entity<br>03/02/2017 |                        |
| Name of Vendor, Person or Entity Paid by Committee Worker/Consultant<br>Staples |   |                   | Payment to Reimburse Committee Worker/Consultant as reported in Section P:<br><input checked="" type="checkbox"/> Check # 94 <input type="checkbox"/> Debit Card <input type="checkbox"/> EFT |   |                        |
| Street Address<br>1201 Kings Hwy  |   | City<br>Fairfield |   | State<br>CT   | Zip Code<br>06824-5319 |
| Purpose of Expenditure (by code) OFFICE   | Description<br>Envelopes for fundraiser   | Event #           |   | Amount  |                        |
| Expenditure # (if applicable)   | Type of Expenditure (Itemization in Addendum T Required unless "None of the below" is checked)<br><input checked="" type="checkbox"/> None of the below (does not involve another candidate or committee) <input type="checkbox"/> Independent<br><input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Organization: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D<br><input type="checkbox"/> Coordinated without reimbursement sought (in kind contribution) |                   |   | \$71.23   |                        |
| Last Name of Worker/Consultant<br>Virginia                                      |   | First<br>Malheiro | MI  | Date of Payment to Vendor, Person or Entity<br>03/05/2017 |                        |
| Name of Vendor, Person or Entity Paid by Committee Worker/Consultant<br>Staples |   |                   | Payment to Reimburse Committee Worker/Consultant as reported in Section P:<br><input checked="" type="checkbox"/> Check # 94 <input type="checkbox"/> Debit Card <input type="checkbox"/> EFT |   |                        |
| Street Address<br>1201 Kings Hwy  |   | City<br>Fairfield |   | State<br>CT   | Zip Code<br>06824-5319 |
| Purpose of Expenditure (by code) POST   | Description<br>Postage  | Event #           |   | Amount  |                        |
| Expenditure # (if applicable)   | Type of Expenditure (Itemization in Addendum T Required unless "None of the below" is checked)<br><input checked="" type="checkbox"/> None of the below (does not involve another candidate or committee) <input type="checkbox"/> Independent<br><input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Organization: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D<br><input type="checkbox"/> Coordinated without reimbursement sought (in kind contribution) |                   |   | \$257.75  |                        |

**SUBTOTAL Section T - This Page** \$422.57

**TOTAL of Section T Pages** \$4,387.85

**TOTAL OF ALL REIMBURSEMENT TO COMMITTEE WORKERS AND CONSULTANTS** \$4,387.85

IV. EXPENDITURES (Sections P-T)

|   |   |                   |                 |   |   |
|---|---|-------------------|-----------------|---|---|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)  |   |                   | TYPE OF REPORT  |   |   |
| Ganim for Bridgeport '19  |   |                   | April 10 filing |   |   |
| <b>T. Itemization of Reimbursements to Committee Workers and Consultants</b>    |   |                   |                 |   |   |
| Last Name of Worker/Consultant<br>Virginia                                      |   | First<br>Malheiro |                 | MI  | Date of Payment to Vendor, Person or Entity<br>03/05/2017 |
| Name of Vendor, Person or Entity Paid by Committee Worker/Consultant<br>Staples |   |                   |                 | Payment to Reimburse Committee Worker/Consultant as reported in Section P:<br><input checked="" type="checkbox"/> Check # 94 <input type="checkbox"/> Debit Card <input type="checkbox"/> EFT |   |
| Street Address<br>1201 Kings Hwy  |   | City<br>Fairfield |                 | State<br>CT   | Zip Code<br>06824-5319                                    |
| Purpose of Expenditure (by code) FNDR   | Description<br>Contribution form for mailing for fundraiser   | Event #           |                 | Amount<br><br>\$10.53   |   |
| Expenditure # (if applicable)   | Type of Expenditure (Itemization in Addendum T Required unless "None of the below" is checked)<br><input checked="" type="checkbox"/> None of the below (does not involve another candidate or committee) <input type="checkbox"/> Independent<br><input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Organization: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D<br><input type="checkbox"/> Coordinated without reimbursement sought (in kind contribution) |                   |                 |   |   |
| Last Name of Worker/Consultant<br>Virginia                                      |   | First<br>Malheiro |                 | MI  | Date of Payment to Vendor, Person or Entity<br>03/05/2017 |
| Name of Vendor, Person or Entity Paid by Committee Worker/Consultant<br>Staples |   |                   |                 | Payment to Reimburse Committee Worker/Consultant as reported in Section P:<br><input checked="" type="checkbox"/> Check # 94 <input type="checkbox"/> Debit Card <input type="checkbox"/> EFT |   |
| Street Address<br>1201 Kings Hwy  |   | City<br>Fairfield |                 | State<br>CT   | Zip Code<br>06824-5319                                    |
| Purpose of Expenditure (by code) FNDR   | Description<br>Contribution form for fundraiser mailing   | Event #           |                 | Amount<br><br>\$18.72   |   |
| Expenditure # (if applicable)   | Type of Expenditure (Itemization in Addendum T Required unless "None of the below" is checked)<br><input checked="" type="checkbox"/> None of the below (does not involve another candidate or committee) <input type="checkbox"/> Independent<br><input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Organization: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D<br><input type="checkbox"/> Coordinated without reimbursement sought (in kind contribution) |                   |                 |   |   |
| Last Name of Worker/Consultant<br>Virginia                                      |   | First<br>Malheiro |                 | MI  | Date of Payment to Vendor, Person or Entity<br>03/05/2017 |
| Name of Vendor, Person or Entity Paid by Committee Worker/Consultant<br>Staples |   |                   |                 | Payment to Reimburse Committee Worker/Consultant as reported in Section P:<br><input checked="" type="checkbox"/> Check # 94 <input type="checkbox"/> Debit Card <input type="checkbox"/> EFT |   |
| Street Address<br>1201 Kings Hwy  |   | City<br>Fairfield |                 | State<br>CT   | Zip Code<br>06824-5319                                    |
| Purpose of Expenditure (by code) FNDR   | Description<br>Cover Letter for fundraiser mailing  | Event #           |                 | Amount<br><br>\$52.64   |   |
| Expenditure # (if applicable)   | Type of Expenditure (Itemization in Addendum T Required unless "None of the below" is checked)<br><input checked="" type="checkbox"/> None of the below (does not involve another candidate or committee) <input type="checkbox"/> Independent<br><input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Organization: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D<br><input type="checkbox"/> Coordinated without reimbursement sought (in kind contribution) |                   |                 |   |   |

SUBTOTAL Section T - This Page \$81.89

TOTAL of Section T Pages \$4,387.85

TOTAL OF ALL REIMBURSEMENT TO COMMITTEE WORKERS AND CONSULTANTS \$4,387.85

IV. EXPENDITURES (Sections P-T)

|  |                 |
|--|-----------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | TYPE OF REPORT  |
| Ganim for Bridgeport '19   | April 10 filing |

**T. Itemization of Reimbursements to Committee Workers and Consultants**

|  |   |                          |  |  |                               |
|--|---|--------------------------|--|--|-------------------------------|
| Last Name of Worker/Consultant<br><b>Virginia</b>                                      |   | First<br><b>Malheiro</b> | MI   | Date of Payment to Vendor, Person or Entity<br><b>03/05/2017</b> |                               |
| Name of Vendor, Person or Entity Paid by Committee Worker/Consultant<br><b>Staples</b> |   |                          | Payment to Reimburse Committee Worker/Consultant as reported in Section P:<br><input checked="" type="checkbox"/> Check # <b>94</b> <input type="checkbox"/> Debit Card <input type="checkbox"/> EFT |  |                               |
| Street Address<br><b>1201 Kings Hwy</b>  |   | City<br><b>Fairfield</b> |  | State<br><b>CT</b>   | Zip Code<br><b>06824-5319</b> |
| Purpose of Expenditure (by code) <b>FNDR</b>   | Description<br><b>Cover Letter for fundraiser mailing</b>   | Event #                  |  | Amount   |                               |
| Expenditure # (if applicable)  | Type of Expenditure (Itemization in Addendum T Required unless "None of the below" is checked)<br><input checked="" type="checkbox"/> None of the below (does not involve another candidate or committee) <input type="checkbox"/> Independent<br><input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Organization: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D<br><input type="checkbox"/> Coordinated without reimbursement sought (in kind contribution) |                          |  | Amount<br><b>\$52.64</b>   |                               |
| Last Name of Worker/Consultant<br><b>Virginia</b>                                      |   | First<br><b>Malheiro</b> | MI   | Date of Payment to Vendor, Person or Entity<br><b>03/05/2017</b> |                               |
| Name of Vendor, Person or Entity Paid by Committee Worker/Consultant<br><b>Staples</b> |   |                          | Payment to Reimburse Committee Worker/Consultant as reported in Section P:<br><input checked="" type="checkbox"/> Check # <b>94</b> <input type="checkbox"/> Debit Card <input type="checkbox"/> EFT |  |                               |
| Street Address<br><b>1201 Kings Hwy</b>  |   | City<br><b>Fairfield</b> |  | State<br><b>CT</b>   | Zip Code<br><b>06824-5319</b> |
| Purpose of Expenditure (by code) <b>FNDR</b>   | Description<br><b>Cover Letter for fundraiser mailing</b>   | Event #                  |  | Amount   |                               |
| Expenditure # (if applicable)  | Type of Expenditure (Itemization in Addendum T Required unless "None of the below" is checked)<br><input checked="" type="checkbox"/> None of the below (does not involve another candidate or committee) <input type="checkbox"/> Independent<br><input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Organization: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D<br><input type="checkbox"/> Coordinated without reimbursement sought (in kind contribution) |                          |  | Amount<br><b>\$93.59</b>   |                               |
| Last Name of Worker/Consultant<br><b>Virginia</b>                                      |   | First<br><b>Malheiro</b> | MI   | Date of Payment to Vendor, Person or Entity<br><b>03/05/2017</b> |                               |
| Name of Vendor, Person or Entity Paid by Committee Worker/Consultant<br><b>Staples</b> |   |                          | Payment to Reimburse Committee Worker/Consultant as reported in Section P:<br><input checked="" type="checkbox"/> Check # <b>94</b> <input type="checkbox"/> Debit Card <input type="checkbox"/> EFT |  |                               |
| Street Address<br><b>1201 Kings Hwy</b>  |   | City<br><b>Fairfield</b> |  | State<br><b>CT</b>   | Zip Code<br><b>06824-5319</b> |
| Purpose of Expenditure (by code) <b>FNDR</b>   | Description<br><b>Cover Letter for fundraiser mailing</b>   | Event #                  |  | Amount   |                               |
| Expenditure # (if applicable)  | Type of Expenditure (Itemization in Addendum T Required unless "None of the below" is checked)<br><input checked="" type="checkbox"/> None of the below (does not involve another candidate or committee) <input type="checkbox"/> Independent<br><input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Organization: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D<br><input type="checkbox"/> Coordinated without reimbursement sought (in kind contribution) |                          |  | Amount<br><b>\$93.59</b>   |                               |

**SUBTOTAL Section T - This Page** **\$239.82**

**TOTAL of Section T Pages** **\$4,387.85**

**TOTAL OF ALL REIMBURSEMENT TO COMMITTEE WORKERS AND CONSULTANTS** **\$4,387.85**

IV. EXPENDITURES (Sections P-T)

|  |                 |
|--|-----------------|
| NAME OF COMMITTEE: <i>(Provide Complete Name as Registered with Filing Repository)</i> | TYPE OF REPORT  |
| Ganin for Bridgeport '19   | April 10 filing |

**T. Itemization of Reimbursements to Committee Workers and Consultants**

|   |  |   |   |
|---|--|---|---|
| Last Name of Worker/Consultant<br>Virginia                                      | First<br>Malheiro  | MI  | Date of Payment to Vendor, Person or Entity<br>03/07/2017 |
| Name of Vendor, Person or Entity Paid by Committee Worker/Consultant<br>Staples |  | Payment to Reimburse Committee Worker/Consultant as reported in Section P:<br><input checked="" type="checkbox"/> Check # 94 <input type="checkbox"/> Debit Card <input type="checkbox"/> EFT |   |
| Street Address<br>1201 Kings Hwy  |  | City<br>Fairfield   |   |
| State<br>CT   |  | Zip Code<br>06824-5319  |   |
| Purpose of Expenditure (by code) MISC   | Description<br>Misc Items for mailing fundraiser info: stamps and envelopes  | Event #   | <b>Amount</b><br><br>\$377.98                             |
| Expenditure # (if applicable)   | Type of Expenditure <i>(Itemization in Addendum T Required unless "None of the below" is checked)</i><br><input checked="" type="checkbox"/> None of the below (does not involve another candidate or committee) <input type="checkbox"/> Independent<br><input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Organization: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D<br><input type="checkbox"/> Coordinated without reimbursement sought (in kind contribution) |   |   |
| Last Name of Worker/Consultant<br>Virginia                                      |  | Date of Payment to Vendor, Person or Entity<br>03/07/2017   |   |
| Name of Vendor, Person or Entity Paid by Committee Worker/Consultant<br>Staples |  | Payment to Reimburse Committee Worker/Consultant as reported in Section P:<br><input checked="" type="checkbox"/> Check # 94 <input type="checkbox"/> Debit Card <input type="checkbox"/> EFT |   |
| Street Address<br>1201 Kings Hwy  |  | City<br>Fairfield   |   |
| State<br>CT   |  | Zip Code<br>06824-5319  |   |
| Purpose of Expenditure (by code) FNDR   | Description<br>Contribution forms for fundraiser mailing   | Event #   | <b>Amount</b><br><br>\$16.38                              |
| Expenditure # (if applicable)   | Type of Expenditure <i>(Itemization in Addendum T Required unless "None of the below" is checked)</i><br><input checked="" type="checkbox"/> None of the below (does not involve another candidate or committee) <input type="checkbox"/> Independent<br><input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Organization: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D<br><input type="checkbox"/> Coordinated without reimbursement sought (in kind contribution) |   |   |
| Last Name of Worker/Consultant<br>Virginia                                      |  | Date of Payment to Vendor, Person or Entity<br>03/07/2017   |   |
| Name of Vendor, Person or Entity Paid by Committee Worker/Consultant<br>Staples |  | Payment to Reimburse Committee Worker/Consultant as reported in Section P:<br><input checked="" type="checkbox"/> Check # 94 <input type="checkbox"/> Debit Card <input type="checkbox"/> EFT |   |
| Street Address<br>1201 Kings Hwy  |  | City<br>Fairfield   |   |
| State<br>CT   |  | Zip Code<br>06824-5319  |   |
| Purpose of Expenditure (by code) FNDR   | Description<br>Contribution Letters for fundraiser mailing   | Event #   | <b>Amount</b><br><br>\$18.72                              |
| Expenditure # (if applicable)   | Type of Expenditure <i>(Itemization in Addendum T Required unless "None of the below" is checked)</i><br><input checked="" type="checkbox"/> None of the below (does not involve another candidate or committee) <input type="checkbox"/> Independent<br><input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Organization: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D<br><input type="checkbox"/> Coordinated without reimbursement sought (in kind contribution) |   |   |

**SUBTOTAL Section T - This Page**      \$413.08

**TOTAL of Section T Pages**      \$4,387.85

**TOTAL OF ALL REIMBURSEMENT TO COMMITTEE WORKERS AND CONSULTANTS**      \$4,387.85

**IV. EXPENDITURES (Sections P-T)**

**NAME OF COMMITTEE** *(Provide Complete Name as Registered with Filing Repository)* **TYPE OF REPORT**

Ganin for Bridgeport '19 April 10 filing

**T. Itemization of Reimbursements to Committee Workers and Consultants**

|   |                          |    |  |
|---|--------------------------|----|--|
| Last Name of Worker/Consultant<br><b>Virginia</b> | First<br><b>Malheiro</b> | MI | Date of Payment to Vendor, Person or Entity<br><b>03/07/2017</b> |
|---|--------------------------|----|--|

|  |  |
|--|--|
| Name of Vendor, Person or Entity Paid by Committee Worker/Consultant<br><b>Staples</b> | Payment to Reimburse Committee Worker/Consultant as reported in Section P:<br><input checked="" type="checkbox"/> Check # <b>94</b> <input type="checkbox"/> Debit Card <input type="checkbox"/> EFT |
|--|--|

|   |                          |                    |                               |
|---|--------------------------|--------------------|-------------------------------|
| Street Address<br><b>1201 Kings Hwy</b> | City<br><b>Fairfield</b> | State<br><b>CT</b> | Zip Code<br><b>06824-5319</b> |
|---|--------------------------|--------------------|-------------------------------|

|  |  |         |                              |
|--|--|---------|------------------------------|
| Purpose of Expenditure (by code) <b>FNDR</b> | Description<br><b>Contribution form for fundraiser mailig</b>  | Event # | Amount<br><br><b>\$81.89</b> |
| Expenditure # (if applicable)                | Type of Expenditure <i>(Itemization in Addendum T Required unless "None of the below" is checked)</i><br><input checked="" type="checkbox"/> None of the below (does not involve another candidate or committee) <input type="checkbox"/> Independent<br><input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Organization: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D<br><input type="checkbox"/> Coordinated without reimbursement sought (in-kind contribution) |         |                              |

|   |                          |    |  |
|---|--------------------------|----|--|
| Last Name of Worker/Consultant<br><b>Virginia</b> | First<br><b>Malheiro</b> | MI | Date of Payment to Vendor, Person or Entity<br><b>03/07/2017</b> |
|---|--------------------------|----|--|

|  |  |
|--|--|
| Name of Vendor, Person or Entity Paid by Committee Worker/Consultant<br><b>Staples</b> | Payment to Reimburse Committee Worker/Consultant as reported in Section P:<br><input checked="" type="checkbox"/> Check # <b>94</b> <input type="checkbox"/> Debit Card <input type="checkbox"/> EFT |
|--|--|

|   |                          |                    |                               |
|---|--------------------------|--------------------|-------------------------------|
| Street Address<br><b>1201 Kings Hwy</b> | City<br><b>Fairfield</b> | State<br><b>CT</b> | Zip Code<br><b>06824-5319</b> |
|---|--------------------------|--------------------|-------------------------------|

|  |  |         |                              |
|--|--|---------|------------------------------|
| Purpose of Expenditure (by code) <b>FNDR</b> | Description<br><b>Cover Letter for fundraiser mailing</b>  | Event # | Amount<br><br><b>\$81.89</b> |
| Expenditure # (if applicable)                | Type of Expenditure <i>(Itemization in Addendum T Required unless "None of the below" is checked)</i><br><input checked="" type="checkbox"/> None of the below (does not involve another candidate or committee) <input type="checkbox"/> Independent<br><input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Organization: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D<br><input type="checkbox"/> Coordinated without reimbursement sought (in-kind contribution) |         |                              |

|   |                          |    |  |
|---|--------------------------|----|--|
| Last Name of Worker/Consultant<br><b>Virginia</b> | First<br><b>Malheiro</b> | MI | Date of Payment to Vendor, Person or Entity<br><b>03/07/2017</b> |
|---|--------------------------|----|--|

|  |  |
|--|--|
| Name of Vendor, Person or Entity Paid by Committee Worker/Consultant<br><b>Staples</b> | Payment to Reimburse Committee Worker/Consultant as reported in Section P:<br><input checked="" type="checkbox"/> Check # <b>94</b> <input type="checkbox"/> Debit Card <input type="checkbox"/> EFT |
|--|--|

|   |                          |                    |                               |
|---|--------------------------|--------------------|-------------------------------|
| Street Address<br><b>1201 Kings Hwy</b> | City<br><b>Fairfield</b> | State<br><b>CT</b> | Zip Code<br><b>06824-5319</b> |
|---|--------------------------|--------------------|-------------------------------|

|  |  |         |                              |
|--|--|---------|------------------------------|
| Purpose of Expenditure (by code) <b>FNDR</b> | Description<br><b>Cover Letter for fundraiser mailing</b>  | Event # | Amount<br><br><b>\$93.59</b> |
| Expenditure # (if applicable)                | Type of Expenditure <i>(Itemization in Addendum T Required unless "None of the below" is checked)</i><br><input checked="" type="checkbox"/> None of the below (does not involve another candidate or committee) <input type="checkbox"/> Independent<br><input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Organization: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D<br><input type="checkbox"/> Coordinated without reimbursement sought (in-kind contribution) |         |                              |

**SUBTOTAL Section T - This Page** **\$257.37**

**TOTAL of Section T Pages** **\$4,387.85**

**TOTAL OF ALL REIMBURSEMENT TO COMMITTEE WORKERS AND CONSULTANTS** **\$4,387.85**

|  |   |                    |  |   |   |  |
|--|---|--------------------|--|---|---|--|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)                       |   |                    |  | TYPE OF REPORT  |   |  |
| Ganim for Bridgeport '19   |   |                    |  | April 10 filing   |   |  |
| <b>T. Itemization of Reimbursements to Committee Workers and Consultants</b>                         |   |                    |  |   |   |  |
| Last Name of Worker/Consultant<br>Virginia   |   | First<br>Malheiro  |  | MI  | Date of Payment to Vendor, Person or Entity<br>03/07/2017 |  |
| Name of Vendor, Person or Entity Paid by Committee Worker/Consultant<br>Staples                      |   |                    |  | Payment to Reimburse Committee Worker/Consultant as reported in Section P:<br><input checked="" type="checkbox"/> Check # 94 <input type="checkbox"/> Debit Card <input type="checkbox"/> EFT |   |  |
| Street Address<br>1201 Kings Hwy   |   | City<br>Fairfield  |  | State<br>CT   | Zip Code<br>06824-5319                                    |  |
| Purpose of Expenditure (by code) FNDR  | Description<br>Cover Letter for fundraiser mailing  | Event #            |  | Amount  |   |  |
| Expenditure # (if applicable)  | Type of Expenditure (Itemization in Addendum T Required unless "None of the below" is checked)<br><input checked="" type="checkbox"/> None of the below (does not involve another candidate or committee) <input type="checkbox"/> Independent<br><input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Organization: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D<br><input type="checkbox"/> Coordinated without reimbursement sought (in-kind contribution) |                    |  |   | \$93.59   |  |
| Last Name of Worker/Consultant<br>Virginia   |   | First<br>Malheiro  |  | MI  | Date of Payment to Vendor, Person or Entity<br>03/07/2017 |  |
| Name of Vendor, Person or Entity Paid by Committee Worker/Consultant<br>Stop & Shop                  |   |                    |  | Payment to Reimburse Committee Worker/Consultant as reported in Section P:<br><input checked="" type="checkbox"/> Check # 94 <input type="checkbox"/> Debit Card <input type="checkbox"/> EFT |   |  |
| Street Address<br>4531 Main St   |   | City<br>Bridgeport |  | State<br>CT   | Zip Code<br>06606-1846                                    |  |
| Purpose of Expenditure (by code) POST  | Description<br>Postage  | Event #            |  | Amount  |   |  |
| Expenditure # (if applicable)  | Type of Expenditure (Itemization in Addendum T Required unless "None of the below" is checked)<br><input checked="" type="checkbox"/> None of the below (does not involve another candidate or committee) <input type="checkbox"/> Independent<br><input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Organization: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D<br><input type="checkbox"/> Coordinated without reimbursement sought (in-kind contribution) |                    |  |   | \$58.80   |  |
| Last Name of Worker/Consultant<br>Virginia   |   | First<br>Malheiro  |  | MI  | Date of Payment to Vendor, Person or Entity<br>02/22/2017 |  |
| Name of Vendor, Person or Entity Paid by Committee Worker/Consultant<br>United States Postal Service |   |                    |  | Payment to Reimburse Committee Worker/Consultant as reported in Section P:<br><input checked="" type="checkbox"/> Check # 94 <input type="checkbox"/> Debit Card <input type="checkbox"/> EFT |   |  |
| Street Address<br>120 Middle St  |   | City<br>Bridgeport |  | State<br>CT   | Zip Code<br>06602-9998                                    |  |
| Purpose of Expenditure (by code) POST  | Description<br>Stamps for Mailer  | Event #            |  | Amount  |   |  |
| Expenditure # (if applicable)  | Type of Expenditure (Itemization in Addendum T Required unless "None of the below" is checked)<br><input checked="" type="checkbox"/> None of the below (does not involve another candidate or committee) <input type="checkbox"/> Independent<br><input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Organization: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D<br><input type="checkbox"/> Coordinated without reimbursement sought (in-kind contribution) |                    |  |   | \$245.00  |  |

SUBTOTAL Section T - This Page \$397.39

TOTAL of Section T Pages \$4,387.85

TOTAL OF ALL REIMBURSEMENT TO COMMITTEE WORKERS AND CONSULTANTS \$4,387.85

IV. EXPENDITURES (Sections P-T)

|  |   |                    |  |   |
|--|---|--------------------|--|---|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)                       |   |                    | TYPE OF REPORT   |   |
| Ganim for Bridgeport '19   |   |                    | April 10 filing  |   |
| <b>T. Itemization of Reimbursements to Committee Workers and Consultants</b>                         |   |                    |  |   |
| Last Name of Worker/Consultant<br>Virginia   |   | First<br>Malheiro  | MI   | Date of Payment to Vendor, Person or Entity<br>02/22/2017 |
| Name of Vendor, Person or Entity Paid by Committee Worker/Consultant<br>United States Postal Service |   |                    | Payment to Reimburse Committee Worker/Consultant as reported in Section P:<br><input checked="" type="checkbox"/> Check # 94 <input type="checkbox"/> Debit Card <input type="checkbox"/> LIFT |   |
| Street Address<br>120 Middle St  |   | City<br>Bridgeport |  | State<br>CT    Zip Code<br>06602-9998                     |
| Purpose of Expenditure (by code) POST  | Description<br>Postage  | Event #            |  | Amount<br><br>\$245.00                                    |
| Expenditure # (if applicable)  | Type of Expenditure (Itemization in Addendum T Required unless "None of the below" is checked)<br><input checked="" type="checkbox"/> None of the below (does not involve another candidate or committee) <input type="checkbox"/> Independent<br><input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Organization: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D<br><input type="checkbox"/> Coordinated without reimbursement sought (in kind contribution) |                    |  |   |
| Last Name of Worker/Consultant<br>Virginia   |   | First<br>Malheiro  | MI   | Date of Payment to Vendor, Person or Entity<br>03/01/2017 |
| Name of Vendor, Person or Entity Paid by Committee Worker/Consultant<br>United States Postal Service |   |                    | Payment to Reimburse Committee Worker/Consultant as reported in Section P:<br><input checked="" type="checkbox"/> Check # 94 <input type="checkbox"/> Debit Card <input type="checkbox"/> LIFT |   |
| Street Address<br>120 Middle St  |   | City<br>Bridgeport |  | State<br>CT    Zip Code<br>06602-9998                     |
| Purpose of Expenditure (by code) POST  | Description<br>Postage  | Event #            |  | Amount<br><br>\$490.00                                    |
| Expenditure # (if applicable)  | Type of Expenditure (Itemization in Addendum T Required unless "None of the below" is checked)<br><input checked="" type="checkbox"/> None of the below (does not involve another candidate or committee) <input type="checkbox"/> Independent<br><input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Organization: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D<br><input type="checkbox"/> Coordinated without reimbursement sought (in kind contribution) |                    |  |   |

SUBTOTAL Section T - This Page \$735.00

TOTAL of Section T Pages \$4,387.85

**TOTAL OF ALL REIMBURSEMENT TO COMMITTEE WORKERS AND CONSULTANTS** **\$4,387.85**