



File #: 2019-104
 10/10/2019 10:43 AM
 12 Pages

SSION



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ELECTION FILINGS

Susan M. Pawluk, Town Clerk

SUMMARY PAGE

RECEIVED
 SUSAN M. PAWLUK
 2019 OCT 10 AM 10:43
 STRATFORD TOWN CLERK

1. NAME OF COMMITTEE

Bill O'Brien for 9th District Council

2. TREASURER NAME

Title	First	MI	Last	Suffix
Mr	James	P	O'Brien	

3. TREASURER ADDRESS

Street Address	City	State	Zip Code
151 Shea Terrace	Stratford	CT	06614

4. ELECTION/REFERENDUM DATE

(mm/dd/yyyy)
11/05/2019

5. OFFICE SOUGHT (Complete only if Candidate Committee)

Council

6. DISTRICT NUMBER

(if applicable)
9

7. CANDIDATE NAME (Complete only if Candidate or Exploratory Committee)

Title	First	MI	Last	Suffix
Hon	William		O'Brien	Jr

8. TYPE OF REPORT (Check One Box)

- January 10 filing
- April 10 filing
- July 10 filing
- October 10 filing
- Independent Expenditure
 - Primary
 - Election
- 7th day preceding primary
- 30 days following primary
- 7th day preceding election
- 12th day preceding election
(State Central Committees Only)
- 45 days following election
not held in November
- 7th day preceding referendum
- 45 days following referendum
- Deficit
- Termination
- Initial Contribution or Disbursement
(PACs ONLY)
- Amendment to
Type of Report:

9. PERIOD COVERED

Beginning Date	Ending Date
07/01/2019	09/30/2019

10. CERTIFICATION

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.

TREASURER OR DEPUTY TREASURER (SIGNATURE)

James O'Brien
 PRINT NAME OF SIGNER

10/04/2019
 DATE (mm/dd/yyyy)

PENALTY FOR FALSE STATEMENT IS PUNISHABLE BY FINE NOT TO EXCEED \$1,000, OR IMPRISONMENT FOR NOT MORE THAN ONE YEAR, OR BOTH.

SEEC FORM 20

Itemized Campaign Finance Disclosure Statement
CONNECTICUT STATE ELECTIONS ENFORCEMENT COMMISSION
 Rev. 1/08

SUMMARY PAGE
TOTALS

NAME OF COMMITTEE	FILING DUE DATE	
	10/10/2019	
Bill O'Brien for 9th District Council	COLUMN A This Period	COLUMN B 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 (Sections A and B)	\$2,180.00	\$2,180.00
14. Receipts from Other Committees (Sections C1 and C2)	\$0.00	\$0.00
15. Other Monetary Receipts (Sections D-K)	\$0.00	\$0.00
16a. Total Small Food and Beverage Receipts at Fair (Section L1) <i>Town Committees ONLY</i>	\$0.00	\$0.00
16b. Total Proceeds from Small Purchases at Tag Sales, Auctions or Other Sales (Section L2)	\$0.00	\$0.00
16c. Total Purchases of Advertising in a Program Book (Section L3) <i>Municipal and Town Committees ONLY</i>	\$0.00	\$0.00
17. Total Monetary Receipts (add totals for lines 13-16c)	\$2,180.00	\$2,180.00
18. Subtotals (add totals in line 12 + line 17 in Column A; and in line 11 + 17 in Column B)	\$2,180.00	\$2,180.00
19. Expenses Paid by Committee (Section P)	\$0.00	\$0.00
20. Balance on hand at close of Reporting Period (Subtract line 19 from line 18 in both Columns)	\$2,180.00	\$2,180.00
21. In-Kind Donations not Considered Contributions Received (Section L4)	\$350.00	\$350.00
22. In-Kind Contributions Received (Section M)	\$0.00	\$0.00
23. Refundable Deposit to Telephone Company (Section N)	\$0.00	\$0.00
24. Receipts of Organization Expenditures (Section O)	\$0.00	\$0.00
25. Beginning Loan Balance	\$0.00	\$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	\$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						FILING DUE DATE		
Bill O'Brien for 9th District Council						10/10/2019		
A. Total Contributions from Small Contributors-Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>						Subtotal Section A \$ 0.00		
B. Itemized Contributions from Individuals								
Last Name Miranda		First John		MI	Principal Occupation Real Estate		Amount of Contribution	
Residential Street Address 124 Knapp Street		City Easton	State CT	Zip Code 06612	Name of Employer William Raveis			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No						
Is this contribution associated with a fundraising event listed in Section L1? <i>If yes, list Event #</i> <u>A20190912</u> <input checked="" type="radio"/> Yes <input type="radio"/> No		Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="radio"/> Executive <input type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No						
Method of contribution: <input checked="" type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order				Date Received 09/12/2019		Aggregate contributions \$50.00		\$50.00
Last Name O'Brien-Law		First Joan		MI	Principal Occupation Organizer / Stager		Amount of Contribution	
Residential Street Address 151 Flagler Avenue		City Stratford	State CT	Zip Code 06614	Name of Employer Self			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No						
Is this contribution associated with a fundraising event listed in Section L1? <i>If yes, list Event #</i> <u>A20190912</u> <input checked="" type="radio"/> Yes <input type="radio"/> No		Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="radio"/> Executive <input type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No						
Method of contribution: <input checked="" type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order				Date Received 09/12/2019		Aggregate contributions \$100.00		\$100.00
Last Name Cepetelli		First Brian		MI M	Principal Occupation		Amount of Contribution	
Residential Street Address 83 Ashwood Terrave		City Stratford	State CT	Zip Code 06614	Name of Employer Sikorsky Aircraft			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No						
Is this contribution associated with a fundraising event listed in Section L1? <i>If yes, list Event #</i> <u>A20190912</u> <input checked="" type="radio"/> Yes <input type="radio"/> No		Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="radio"/> Executive <input type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No						
Method of contribution: <input checked="" type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order				Date Received 09/12/2019		Aggregate contributions \$80.00		\$80.00
Last Name Petruccelli		First Len		MI	Principal Occupation Retired		Amount of Contribution	
Residential Street Address 105 Euclid Avenue		City Stratford	State CT	Zip Code 06614	Name of Employer Retired			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No						
Is this contribution associated with a fundraising event listed in Section L1? <i>If yes, list Event #</i> <u>A20190912</u> <input checked="" type="radio"/> Yes <input type="radio"/> No		Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="radio"/> Executive <input type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No						
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order				Date Received 09/12/2019		Aggregate contributions \$40.00		\$40.00
SUBTOTAL Section B-This Page							\$270.00	
TOTAL of additional Section B Pages							\$1,910.00	
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 13 of Summary Page)							\$2,180.00	

I. MONETARY RECEIPTS
Section B. Additional Page

NAME OF COMMITTEE Bill O'Brien for 9th District Council	FILING DUE DATE 10/10/2019
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B. Itemized Contributions from Individuals

Last Name Marcone	First Richard	MI T	Principal Occupation Registrar of Voters	Amount of Contribution
Residential Street Address 275 Luanne Road	City Stratford	State CT	Zip Code 06614	Name of Employer Town of Stratford
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No		
Is this contribution associated with a fundraising event listed in Section L1? <i>If yes, list Event # <u>A20190912</u></i> <input checked="" type="radio"/> Yes <input type="radio"/> No		Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="radio"/> Executive <input type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No		
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 09/12/2019	Aggregate contributions \$40.00	\$40.00
Last Name Kennedy	First Sean	MI M	Principal Occupation Counselor	Amount of Contribution
Residential Street Address 46 Wainwright Place	City Stratford	State CT	Zip Code 06614	Name of Employer State of Connecticut
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No		
Is this contribution associated with a fundraising event listed in Section L1? <i>If yes, list Event # <u>A20190912</u></i> <input checked="" type="radio"/> Yes <input type="radio"/> No		Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="radio"/> Executive <input type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No		
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 09/12/2019	Aggregate contributions \$80.00	\$80.00
Last Name Fredette	First Richard	MI F	Principal Occupation Blight Officer	Amount of Contribution
Residential Street Address 73 Ferry Court	City Stratford	State CT	Zip Code 06614	Name of Employer Town of Stratford
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No		
Is this contribution associated with a fundraising event listed in Section L1? <i>If yes, list Event # <u>A20190912</u></i> <input checked="" type="radio"/> Yes <input type="radio"/> No		Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="radio"/> Executive <input type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No		
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 09/12/2019	Aggregate contributions \$40.00	\$40.00
Last Name O'Brien	First James	MI P	Principal Occupation Retired	Amount of Contribution
Residential Street Address 151 Shea Terrace	City Stratford	State CT	Zip Code 06614	Name of Employer Retired
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No		
Is this contribution associated with a fundraising event listed in Section L1? <i>If yes, list Event # <u>A20190912</u></i> <input checked="" type="radio"/> Yes <input type="radio"/> No		Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="radio"/> Executive <input type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No		
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 09/12/2019	Aggregate contributions \$100.00	\$100.00
Last Name Isidor	First Peg	MI	Principal Occupation Retired	Amount of Contribution
Residential Street Address 55 Woodland Park	City Shelton	State CT	Zip Code 06484	Name of Employer Retired
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No		
Is this contribution associated with a fundraising event listed in Section L1? <i>If yes, list Event # <u>A20190912</u></i> <input checked="" type="radio"/> Yes <input type="radio"/> No		Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="radio"/> Executive <input type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No		
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 09/12/2019	Aggregate contributions \$40.00	\$40.00
SUBTOTAL Section B-This Page				\$300.00

I. MONETARY RECEIPTS
Section B. Additional Page

NAME OF COMMITTEE Bill O'Brien for 9th District Council	FILING DUE DATE 10/10/2019
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B. Itemized Contributions from Individuals

Last Name Harkins	First John	MI A	Principal Occupation Lobbyist	Amount of Contribution
Residential Street Address 1000 Avalon Way	City Stratford	State CT	Zip Code 06614	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input checked="" type="radio"/> Yes <input type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No		
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>A20190912</u>		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="radio"/> Executive <input type="radio"/> Legislative		
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 09/12/2019	Aggregate contributions \$100.00	\$100.00
Last Name Higgs	First Garry	MI L	Principal Occupation Retired	Amount of Contribution
Residential Street Address 280 James Farm Road	City Stratford	State CT	Zip Code 06614	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No		
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>A20190912</u>		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="radio"/> Executive <input type="radio"/> Legislative		
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 09/12/2019	Aggregate contributions \$50.00	\$50.00
Last Name Feehan	First James	MI	Principal Occupation Business Owner	Amount of Contribution
Residential Street Address 60 Founders Way	City Stratford	State CT	Zip Code 06614	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No		
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>A20190912</u>		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="radio"/> Executive <input type="radio"/> Legislative		
Method of contribution: <input checked="" type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 09/12/2019	Aggregate contributions \$40.00	\$40.00
Last Name Zbell	First John	MI G	Principal Occupation Hydrogeologist	Amount of Contribution
Residential Street Address 75 Deepwood Road	City Stratford	State CT	Zip Code 06614	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No		
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>A20190912</u>		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="radio"/> Executive <input type="radio"/> Legislative		
Method of contribution: <input checked="" type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 09/12/2019	Aggregate contributions \$40.00	\$40.00
Last Name Aldrich	First Barbara	MI J	Principal Occupation Retired	Amount of Contribution
Residential Street Address 100 Parrott Drive Unit 304	City Shelton	State CT	Zip Code 06484	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No		
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>A20190912</u>		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="radio"/> Executive <input type="radio"/> Legislative		
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 09/12/2019	Aggregate contributions \$50.00	\$50.00
SUBTOTAL Section B-This Page				\$280.00

I. MONETARY RECEIPTS
Section B. Additional Page

NAME OF COMMITTEE					FILING DUE DATE		
Bill O'Brien for 9th District Council					10/10/2019		
B. Itemized Contributions from Individuals							
Last Name Chaloux		First Robert		MI D	Principal Occupation Finance		Amount of Contribution
Residential Street Address 70 Fox Hill		City Stratford	State CT	Zip Code 06614	Name of Employer Retired		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>A20190912</u>		<input checked="" type="radio"/> Yes <input type="radio"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="radio"/> Executive <input type="radio"/> Legislative			<input type="radio"/> Yes <input checked="" type="radio"/> No
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order				Date Received 09/12/2019		Aggregate contributions \$50.00	\$50.00
Last Name Morrissey		First Patricia		MI A	Principal Occupation School Counselor		Amount of Contribution
Residential Street Address 570 Whipponwill Lane		City Stratford	State CT	Zip Code 06614	Name of Employer Stratford BOE		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>A20190912</u>		<input checked="" type="radio"/> Yes <input type="radio"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="radio"/> Executive <input type="radio"/> Legislative			<input type="radio"/> Yes <input checked="" type="radio"/> No
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order				Date Received 09/12/2019		Aggregate contributions \$250.00	\$150.00
Last Name Scheck		First Linnea		MI A	Principal Occupation Construction		Amount of Contribution
Residential Street Address 72 Howard Street		City Stratford	State CT	Zip Code 06615	Name of Employer Butterwork and Scheck		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>A20190912</u>		<input checked="" type="radio"/> Yes <input type="radio"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="radio"/> Executive <input type="radio"/> Legislative			<input type="radio"/> Yes <input checked="" type="radio"/> No
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order				Date Received 09/12/2019		Aggregate contributions \$50.00	\$50.00
Last Name Ahlberg		First Kurt		MI M	Principal Occupation Attorney		Amount of Contribution
Residential Street Address 85 Coach House Road		City Stratford	State CT	Zip Code 06614	Name of Employer Law Offices of Kurt M. Ahlberg		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>A20190912</u>		<input checked="" type="radio"/> Yes <input type="radio"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="radio"/> Executive <input type="radio"/> Legislative			<input type="radio"/> Yes <input checked="" type="radio"/> No
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order				Date Received 09/12/2019		Aggregate contributions \$50.00	\$50.00
Last Name Hoydick		First Laura		MI R	Principal Occupation Mayor		Amount of Contribution
Residential Street Address 55 Castle Drive		City Stratford	State CT	Zip Code 06614	Name of Employer Town of Stratford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No					
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>A20190912</u>		<input checked="" type="radio"/> Yes <input type="radio"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="radio"/> Executive <input type="radio"/> Legislative			<input type="radio"/> Yes <input checked="" type="radio"/> No
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order				Date Received 09/12/2019		Aggregate contributions \$100.00	\$100.00
SUBTOTAL Section B-This Page							\$400.00

I. MONETARY RECEIPTS
Section B. Additional Page

NAME OF COMMITTEE Bill O'Brien for 9th District Council	FILING DUE DATE 10/10/2019
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B. Itemized Contributions from Individuals

Last Name Silhavy	First Christopher	MI E	Principal Occupation Technology Consultant	Amount of Contribution
Residential Street Address 111 Hickory Woods Lane	City Stratford	State CT	Zip Code 06614	Name of Employer Accenture
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No		
Is this contribution associated with a fundraising event listed in Section L1? <i>If yes, list Event # <u>A20190912</u></i> <input checked="" type="radio"/> Yes <input type="radio"/> No		Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="radio"/> Executive <input type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No		
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 09/12/2019	Aggregate contributions \$40.00	\$40.00
<hr/>				
Last Name Glad	First Carl	MI A	Principal Occupation Attorney	Amount of Contribution
Residential Street Address 80 Candlewood Road	City Stratford	State CT	Zip Code 06614	Name of Employer Law Offices of Kurt M. Ahlberg
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No		
Is this contribution associated with a fundraising event listed in Section L1? <i>If yes, list Event # <u>A20190912</u></i> <input checked="" type="radio"/> Yes <input type="radio"/> No		Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="radio"/> Executive <input type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No		
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 09/12/2019	Aggregate contributions \$150.00	\$150.00
<hr/>				
Last Name Kubic	First Joseph	MI	Principal Occupation Lawyer	Amount of Contribution
Residential Street Address 1350 James Farm Road	City Stratford	State CT	Zip Code 06614	Name of Employer Harlow Adams and Friedman
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No		
Is this contribution associated with a fundraising event listed in Section L1? <i>If yes, list Event # <u>A20190912</u></i> <input checked="" type="radio"/> Yes <input type="radio"/> No		Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="radio"/> Executive <input type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No		
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 09/12/2019	Aggregate contributions \$50.00	\$50.00
<hr/>				
Last Name Law	First Steven	MI L	Principal Occupation Architect	Amount of Contribution
Residential Street Address 151 Flagler Avenue	City Stratford	State CT	Zip Code 06614	Name of Employer Rogers McCagg Architects
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No		
Is this contribution associated with a fundraising event listed in Section L1? <i>If yes, list Event # <u>A20190912</u></i> <input checked="" type="radio"/> Yes <input type="radio"/> No		Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="radio"/> Executive <input type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No		
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 09/12/2019	Aggregate contributions \$10.00	\$10.00
<hr/>				
Last Name Law	First Clark	MI	Principal Occupation Insurance	Amount of Contribution
Residential Street Address 1110 New Haven Avenue	City Milford	State CT	Zip Code 06460	Name of Employer Allstate
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No		
Is this contribution associated with a fundraising event listed in Section L1? <i>If yes, list Event # <u>A20190912</u></i> <input checked="" type="radio"/> Yes <input type="radio"/> No		Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="radio"/> Executive <input type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No		
Method of contribution: <input checked="" type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 09/12/2019	Aggregate contributions \$20.00	\$20.00
SUBTOTAL Section B-This Page				\$270.00

I. MONETARY RECEIPTS
Section B. Additional Page

NAME OF COMMITTEE Bill O'Brien for 9th District Council	FILING DUE DATE 10/10/2019
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B. Itemized Contributions from Individuals

Last Name O'Brien	First Brett	MI	Principal Occupation Machinist	Amount of Contribution
Residential Street Address 57 Hayes Drive	City Milford	State CT	Zip Code 06460	Name of Employer McMellon Bros Inc
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No		
Is this contribution associated with a fundraising event listed in Section L1? <i>If yes, list Event #</i> <u>A20190912</u> <input checked="" type="radio"/> Yes <input type="radio"/> No		Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="radio"/> Executive <input type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No		
Method of contribution: <input checked="" type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 09/12/2019	Aggregate contributions \$40.00	\$40.00
Last Name Cleri	First Judith	MI L	Principal Occupation Nurse	Amount of Contribution
Residential Street Address 196 1st Avenue	City Stratford	State CT	Zip Code 06615	Name of Employer Stratford BOE
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No		
Is this contribution associated with a fundraising event listed in Section L1? <i>If yes, list Event #</i> <u>A20190912</u> <input checked="" type="radio"/> Yes <input type="radio"/> No		Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="radio"/> Executive <input type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No		
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 09/12/2019	Aggregate contributions \$40.00	\$40.00
Last Name Paquette	First Margaret	MI S	Principal Occupation Council Clerk	Amount of Contribution
Residential Street Address 40 California Street, Unit B16	City Stratford	State CT	Zip Code 06615	Name of Employer Town of Stratford
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No		
Is this contribution associated with a fundraising event listed in Section L1? <i>If yes, list Event #</i> <u>A20190912</u> <input checked="" type="radio"/> Yes <input type="radio"/> No		Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="radio"/> Executive <input type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No		
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 09/12/2019	Aggregate contributions \$40.00	\$40.00
Last Name Higgs	First Alisande	MI	Principal Occupation Retired	Amount of Contribution
Residential Street Address 280 James Farm Road	City Stratford	State CT	Zip Code 06614	Name of Employer Retired
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No		
Is this contribution associated with a fundraising event listed in Section L1? <i>If yes, list Event #</i> <u>A20190912</u> <input checked="" type="radio"/> Yes <input type="radio"/> No		Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="radio"/> Executive <input type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No		
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 09/12/2019	Aggregate contributions \$50.00	\$50.00
Last Name Lamberti	First Debra	MI A	Principal Occupation Retired	Amount of Contribution
Residential Street Address 305A Piute Lane	City Stratford	State CT	Zip Code 06614	Name of Employer Retired
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No		
Is this contribution associated with a fundraising event listed in Section L1? <i>If yes, list Event #</i> <u>A20190912</u> <input checked="" type="radio"/> Yes <input type="radio"/> No		Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="radio"/> Executive <input type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No		
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 09/12/2019	Aggregate contributions \$40.00	\$40.00
SUBTOTAL Section B-This Page				\$210.00

I. MONETARY RECEIPTS
Section B. Additional Page

NAME OF COMMITTEE Bill O'Brien for 9th District Council	FILING DUE DATE 10/10/2019
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B. Itemized Contributions from Individuals

Last Name Chase	First J. Vincent	MI	Principal Occupation Retired	Amount of Contribution
Residential Street Address 640 Whippoorwill Lane	City Stratford	State CT	Zip Code 06614	Name of Employer Retired
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No		
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>A20190912</u>		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="radio"/> Executive <input type="radio"/> Legislative		
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 09/12/2019	Aggregate contributions \$50.00	\$50.00
<hr/>				
Last Name Cabral	First Carol	MI G	Principal Occupation Retired	Amount of Contribution
Residential Street Address 1034 East Main Street	City Stratford	State CT	Zip Code 06614	Name of Employer Retired
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No		
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>A20190912</u>		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="radio"/> Executive <input type="radio"/> Legislative		
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 09/12/2019	Aggregate contributions \$80.00	\$80.00
<hr/>				
Last Name Dean	First Mary	MI	Principal Occupation Economic Development Director	Amount of Contribution
Residential Street Address 995 Beaver Dam Road	City Stratford	State CT	Zip Code 06614	Name of Employer Town of Stratford
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No		
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>A20190912</u>		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="radio"/> Executive <input type="radio"/> Legislative		
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 09/12/2019	Aggregate contributions \$40.00	\$40.00
<hr/>				
Last Name Grom	First George	MI F	Principal Occupation Retired	Amount of Contribution
Residential Street Address 995 Beaver Dam Road	City Stratford	State CT	Zip Code 06614	Name of Employer Retired
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No		
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>A20190912</u>		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="radio"/> Executive <input type="radio"/> Legislative		
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 09/12/2019	Aggregate contributions \$40.00	\$40.00
<hr/>				
Last Name Florek	First John	MI	Principal Occupation Attorney	Amount of Contribution
Residential Street Address 264 Victoria Lawn	City Stratford	State CT	Zip Code 06615	Name of Employer Florek and O'Neill
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No		
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # <u>A20190912</u>		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="radio"/> Executive <input type="radio"/> Legislative		
Method of contribution: <input checked="" type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 09/12/2019	Aggregate contributions \$40.00	\$40.00
SUBTOTAL Section B-This Page				\$250.00

I. MONETARY RECEIPTS
Section B. Additional Page

NAME OF COMMITTEE Bill O'Brien for 9th District Council	FILING DUE DATE 10/10/2019
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B. Itemized Contributions from Individuals

Last Name Downes	First Michael	MI	Principal Occupation Chief of Staff	Amount of Contribution
Residential Street Address 32 Farmington Drive	City Northford	State CT	Zip Code 06472	Name of Employer Town of Stratford
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No		
Is this contribution associated with a fundraising event listed in Section L1? <i>If yes, list Event # _____</i> <input type="radio"/> Yes <input checked="" type="radio"/> No		Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="radio"/> Executive <input type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No		
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 09/21/2019	Aggregate contributions \$100.00	\$100.00
Last Name DeCilio	First Louis	MI A	Principal Occupation Registrar of Voters	Amount of Contribution
Residential Street Address 160 Timber Ridge Road	City Stratford	State CT	Zip Code 06614	Name of Employer Town of Stratford
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No		
Is this contribution associated with a fundraising event listed in Section L1? <i>If yes, list Event # _____</i> <input type="radio"/> Yes <input checked="" type="radio"/> No		Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="radio"/> Executive <input type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No		
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 09/30/2019	Aggregate contributions \$100.00	\$100.00
Last Name	First	MI	Principal Occupation	Amount of Contribution
Residential Street Address	City	State CT	Zip Code	Name of Employer
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No		
Is this contribution associated with a fundraising event listed in Section L1? <i>If yes, list Event # _____</i> <input checked="" type="radio"/> Yes <input type="radio"/> No		Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="radio"/> Executive <input type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No		
Method of contribution: <input type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 09/12/2019	Aggregate contributions \$0.00	\$0.00
Last Name	First	MI	Principal Occupation	Amount of Contribution
Residential Street Address	City	State CT	Zip Code	Name of Employer
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No		
Is this contribution associated with a fundraising event listed in Section L1? <i>If yes, list Event # _____</i> <input checked="" type="radio"/> Yes <input type="radio"/> No		Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="radio"/> Executive <input type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No		
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 09/12/2019	Aggregate contributions \$0.00	\$0.00
Last Name	First	MI	Principal Occupation	Amount of Contribution
Residential Street Address	City	State CT	Zip Code	Name of Employer
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No		
Is this contribution associated with a fundraising event listed in Section L1? <i>If yes, list Event # _____</i> <input checked="" type="radio"/> Yes <input type="radio"/> No		Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="radio"/> Executive <input type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No		
Method of contribution: <input type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 09/12/2019	Aggregate contributions \$0.00	\$0.00
SUBTOTAL Section B-This Page				\$200.00

II. FUNDRAISING EVENT ACTIVITY

NAME OF COMMITTEE	FILING DUE DATE
Bill O'Brien for 9th District Council	10/10/2019

L1. Fundraiser Event Information

Fundraising Event # Date of Fundraiser	Letter	Description	Location: Street Address	City	State	Zip Code
09/12/2019	A	Picnic Fundraiser	570 Whippoorwill Lane	Stratford	CT	06614

Subpart 1: (All Committees)
 Was this fundraising event hosted at a personal residence? Yes (If yes, go to Section L4 In-kind Donations not Considered Contributions and complete required information for purchases made by host(s) for food, beverage and invitations.) No

Did this fundraiser include items donated by a business entity of up to \$100 or items donated by an individual of up to \$50? Yes (If yes, go to Section L4 In-kind Donations not Considered Contributions and complete required information.) No

Was this fundraiser a tag sale, auction, or other sale of donated items with purchases from an individual of up to \$50? Yes (If yes, go to Section L2 Proceeds from Tag Sale, Auction, or Other Sale of Donated Items.) No

Subpart 2: (Town Committees and Municipal Candidate Committees ONLY)
 Were there purchases of advertising space in a program book associated with this fundraiser? Yes (If yes, go to Section L3 Purchases of Advertising Space in a Program Book and complete required information.) No

Subpart 3: (Town Committees ONLY)
 Did your committee sell food or beverage at a fair or similar mass gathering held within the state? Yes (If yes, enter Total Receipts from small purchases here.) No \$ 0.00

Fundraising Event # Date of Fundraiser	Letter	Description	Location: Street Address	City	State	Zip Code
					CT	

Subpart 1: (All Committees)
 Was this fundraising event hosted at a personal residence? Yes (If yes, go to Section L4 In-kind Donations not Considered Contributions and complete required information for purchases made by host(s) for food, beverage and invitations.) No

Did this fundraiser include items donated by a business entity of up to \$100 or items donated by an individual of up to \$50? Yes (If yes, go to Section L4 In-kind Donations not Considered Contributions and complete required information.) No

Was this fundraiser a tag sale, auction, or other sale of donated items with purchases from an individual of up to \$50? Yes (If yes, go to Section L2 Proceeds from Tag Sale, Auction, or Other Sale of Donated Items.) No

Subpart 2: (Town Committees and Municipal Candidate Committees ONLY)
 Were there purchases of advertising space in a program book associated with this fundraiser? Yes (If yes, go to Section L3 Purchases of Advertising Space in a Program Book and complete required information.) No

Subpart 3: (Town Committees ONLY)
 Did your committee sell food or beverage at a fair or similar mass gathering held within the state? Yes (If yes, enter Total Receipts from small purchases here.) No \$ 0.00

SUBTOTAL Section L1 (Town Committees ONLY) Total Receipts-This Page	\$0.00
TOTAL of additional Section L1 Pages	+ \$0.00
TOTAL OF ALL RECEIPTS FROM SECTION L1 (Enter total on Line 16a of Summary Page)	\$0.00

II. FUNDRAISING EVENT ACTIVITY

NAME OF COMMITTEE					FILING DUE DATE		
Bill O'Brien for 9th District Council					10/10/2019		
L4. In-Kind Donations Not Considered Contributions							
Name of Donor Patricia Morrissey					Donation given by:	<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Business Entity	Fair Market Value of Donation \$100.00
Street Address 570 Whipporwill Lane		City Stratford	State CT	Zip Code 06614	Aggregate value for this event \$250.00		
Description of donation Beverages				Date Received 09/12/2019	Event # A20190912		
Name of Donor William O'Brien					Donation given by:	<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Business Entity	Fair Market Value of Donation \$250.00
Street Address 450 Chickadee Lane		City Stratford	State CT	Zip Code 06614	Aggregate value for this event \$250.00		
Description of donation Hot Dogs / Chips / Utensils				Date Received 09/12/2019	Event # A20190912		
Name of Donor					Donation given by:	<input type="checkbox"/> Individual <input type="checkbox"/> Business Entity	Fair Market Value of Donation \$0.00
Street Address		City	State CT	Zip Code	Aggregate value for this event \$0.00		
Description of donation				Date Received	Event #		
Name of Donor					Donation given by:	<input type="checkbox"/> Individual <input type="checkbox"/> Business Entity	Fair Market Value of Donation \$0.00
Street Address		City	State CT	Zip Code	Aggregate value for this event \$0.00		
Description of donation				Date Received	Event #		
Name of Donor					Donation given by:	<input type="checkbox"/> Individual <input type="checkbox"/> Business Entity	Fair Market Value of Donation \$0.00
Street Address		City	State CT	Zip Code	Aggregate value for this event \$0.00		
Description of donation				Date Received	Event #		
Name of Donor					Donation given by:	<input type="checkbox"/> Individual <input type="checkbox"/> Business Entity	Fair Market Value of Donation \$0.00
Street Address		City	State CT	Zip Code	Aggregate value for this event \$0.00		
Description of donation				Date Received	Event #		
Name of Donor					Donation given by:	<input type="checkbox"/> Individual <input type="checkbox"/> Business Entity	Fair Market Value of Donation \$0.00
Street Address		City	State CT	Zip Code	Aggregate value for this event \$0.00		
Description of donation				Date Received	Event #		
Name of Donor					Donation given by:	<input type="checkbox"/> Individual <input type="checkbox"/> Business Entity	Fair Market Value of Donation \$0.00
Street Address		City	State CT	Zip Code	Aggregate value for this event \$0.00		
Description of donation				Date Received	Event #		
SUBTOTAL Section L4-This Page						\$350.00	
TOTAL of additional Section L4 Pages						\$0.00	
TOTAL OF ALL IN-KIND DONATIONS NOT CONSIDERED						\$350.00	

RECEIVED FOR RECORD AT STRATFORD, CT
 SUSAN M. PAWELCZAK
 2019 OCT 10 AM 10:43
 STRATFORD TOWN CLERK

RECEIVED FOR RECORD AT STRATFORD, CT
10/10/2019 10:43 AM

Susan M. Pawelczak

Stratford Town Clerk