

SEEC FORM 20



File #: 2019-102
 10/09/2019 08:04 AM
 19 Pages
 ELECTION FILINGS

SSION



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SUMMARY PAGE

Susan M. Pawluk, Town Clerk

STRAITFORD TOWN CLERK

Perillo for Council

2. TREASURER NAME

Title	First	MI	Last	Suffix
	Ronald	J	Mudre	

3. TREASURER ADDRESS

Street Address	City	State	Zip Code
	Stratford	CT	06614

4. ELECTION/REFERENDUM DATE

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

5. OFFICE SOUGHT (Complete only if Candidate Committee)

Councilman

6. DISTRICT NUMBER (if applicable)

7

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

Title	First	MI	Last	Suffix
	William		Perillo	

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

thru

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)

Ronald J. Mudre
 PRINT NAME OF SIGNER

10/02/2019
 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	
Perillo for 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)	\$3,475.00	\$3,475.00
14. Receipts from Other Committees (Sections C1 and C2)	\$250.00	\$250.00
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)	\$0.00	\$0.00
18. Subtotals (add totals in line 12 + line 17 in Column A; and in line 11 + 17 in Column B)	\$0.00	\$0.00
19. Expenses Paid by Committee (Section P)	\$961.52	\$961.52
20. Balance on hand at close of Reporting Period (Subtract line 19 from line 18 in both Columns)	\$2,763.48	\$2,763.48
21. In-Kind Donations not Considered Contributions Received (Section L4)	\$0.00	\$0.00
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		
Perillo for 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 McNeil		First David		MI	Principal Occupation			Amount of Contribution
Residential Street Address 50 Trap Falls Road		City Shelton	State CT	Zip Code 06484	Name of Employer State of Connecticut			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						
Is this contribution associated with a fundraising event listed in Section L1? <i>If yes, list Event #</i> <u>A20190802</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No						
Method of contribution: <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 08/02/2019		Aggregate contributions \$40.00		\$40.00
Last Name Fredette		First Richard		MI	Principal Occupation			Amount of Contribution
Residential Street Address 73 Ferry Court		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="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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						
Is this contribution associated with a fundraising event listed in Section L1? <i>If yes, list Event #</i> <u>A20190802</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No						
Method of contribution: <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 08/02/2019		Aggregate contributions \$40.00		\$40.00
Last Name Perillie		First Michael		MI A	Principal Occupation			Amount of Contribution
Residential Street Address 175 Sheppard Street		City Stratford	State CT	Zip Code 06614	Name of Employer ENCON			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						
Is this contribution associated with a fundraising event listed in Section L1? <i>If yes, list Event #</i> <u>A20190802</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No						
Method of contribution: <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 08/02/2019		Aggregate contributions \$40.00		\$40.00
Last Name DeLorenzo		First Bob		MI J	Principal Occupation			Amount of Contribution
Residential Street Address 185 Sheppard Street		City Stratford	State CT	Zip Code 06614	Name of Employer Whitehawk Sales			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						
Is this contribution associated with a fundraising event listed in Section L1? <i>If yes, list Event #</i> <u>A20190802</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No						
Method of contribution: <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 08/02/2019		Aggregate contributions \$50.00		\$50.00
SUBTOTAL Section B-This Page							\$170.00	
TOTAL of additional Section B Pages							\$3,305.00	
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 13 of Summary Page)							\$3,475.00	

I. MONETARY RECEIPTS (Sections A-K)

NAME OF COMMITTEE	FILING DUE DATE
Perillo for Council	10/10/2019

C1. Contributions from Other Committees

Name of Committee Stratford Police Union Local 407				Name of Treasurer Brian Oliver	
Address 900 Longbrook Avenue			Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <i>If yes, list Event #</i> <input checked="" type="checkbox"/> No		Amount of Contribution \$250.00
City Stratford	State CT	Zip Code 06614	Date Received 09/30/2019	Aggregate Contributions \$250.00	
Name of Committee				Name of Treasurer	
Address			Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <i>If yes, list Event #</i> <input checked="" type="checkbox"/> No		Amount of Contribution \$0.00
City	State CT	Zip Code	Date Received	Aggregate Contributions \$0.00	
Name of Committee				Name of Treasurer	
Address			Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <i>If yes, list Event #</i> <input checked="" type="checkbox"/> No		Amount of Contribution \$0.00
City	State CT	Zip Code	Date Received	Aggregate Contributions \$0.00	
Name of Committee				Name of Treasurer	
Address			Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <i>If yes, list Event #</i> <input checked="" type="checkbox"/> No		Amount of Contribution \$0.00
City	State CT	Zip Code	Date Received	Aggregate Contributions \$0.00	
Name of Committee				Name of Treasurer	
Address			Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <i>If yes, list Event #</i> <input checked="" type="checkbox"/> No		Amount of Contribution \$0.00
City	State CT	Zip Code	Date Received	Aggregate Contributions \$0.00	
Name of Committee				Name of Treasurer	
Address			Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <i>If yes, list Event #</i> <input checked="" type="checkbox"/> No		Amount of Contribution \$0.00
City	State CT	Zip Code	Date Received	Aggregate Contributions \$0.00	

C2. Reimbursements, Payments, or Surplus Distributions from other Committees

Name of Committee				Name of Treasurer	
Address			Date Received		Amount of Receipt \$0.00
City	State CT	Zip Code	<input checked="" type="checkbox"/> Reimbursement for shared expense <input type="checkbox"/> Surplus Distribution <input checked="" type="checkbox"/> Payment for goods and services		
Name of Committee				Name of Treasurer	
Address			Date Received		Amount of Receipt \$0.00
City	State CT	Zip Code	<input checked="" type="checkbox"/> Reimbursement for shared expense <input type="checkbox"/> Surplus Distribution <input checked="" type="checkbox"/> Payment for goods and services		

SUBTOTAL Section C-This Page					\$250.00
TOTAL of additional Section C Pages					\$0.00
TOTAL OF ALL COMMITTEE CONTRIBUTIONS AND RECEIPTS (Enter total on Line 14 of Summary Page)					\$250.00

II. FUNDRAISING EVENT ACTIVITY

NAME OF COMMITTEE	FILING DUE DATE
Perillo for Council	10/10/2019

L1. Fundraiser Event Information

Fundraising Event # Date of Fundraiser	Letter	Description	Location: Street Address	City	State	Zip Code
08/02/2019	A	Reception	1722 Barnum Avenue	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

IV. EXPENDITURES

NAME OF COMMITTEE				FILING DUE DATE				
Perillo for Council				10/10/2019				
P. Expenses Paid by Committee								
Name of Payee Stratford Ale House				Date of Payment		Method of Payment		Amount
Street Address 1722 Barnum Avenue		City Stratford	State CT	Zip Code 06614			<input checked="" type="checkbox"/> Check # <u>7196</u> <input type="checkbox"/> Debit Card	
Purpose of Expenditure (by code) FNDR		Description Fundraiser				Event # A20190802		
Type of Expenditure (if applicable): <input type="checkbox"/> Coordinated with reimbursement sought <input checked="" type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)		Office Sought		<input type="checkbox"/> Supported <input type="checkbox"/> Opposed		\$ 961.52
Name of Payee				Date of Payment		Method of Payment		Amount
Street Address		City	State CT	Zip Code			<input type="checkbox"/> Check # _____ <input type="checkbox"/> Debit Card	
Purpose of Expenditure (by code)		Description				Event #		
Type of Expenditure (if applicable): <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)		Office Sought		<input type="checkbox"/> Supported <input type="checkbox"/> Opposed		\$ 0.00
Name of Payee				Date of Payment		Method of Payment		Amount
Street Address		City	State CT	Zip Code			<input type="checkbox"/> Check # _____ <input type="checkbox"/> Debit Card	
Purpose of Expenditure (by code)		Description				Event #		
Type of Expenditure (if applicable): <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)		Office Sought		<input type="checkbox"/> Supported <input type="checkbox"/> Opposed		\$ 0.00
Name of Payee				Date of Payment		Method of Payment		Amount
Street Address		City	State CT	Zip Code			<input type="checkbox"/> Check # _____ <input type="checkbox"/> Debit Card	
Purpose of Expenditure (by code)		Description				Event #		
Type of Expenditure (if applicable): <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)		Office Sought		<input type="checkbox"/> Supported <input type="checkbox"/> Opposed		\$ 0.00
Name of Payee				Date of Payment		Method of Payment		Amount
Street Address		City	State CT	Zip Code			<input type="checkbox"/> Check # _____ <input type="checkbox"/> Debit Card	
Purpose of Expenditure (by code)		Description				Event #		
Type of Expenditure (if applicable): <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E		Candidate(s) Name (if applicable)		Office Sought		<input type="checkbox"/> Supported <input type="checkbox"/> Opposed		\$ 0.00
SUBTOTAL Section P-This Page							\$961.52	
TOTAL of additional Section P Pages							\$0.00	
TOTAL OF ALL EXPENSES PAID BY COMMITTEE (Enter total on Line 19 of Summary Page)							\$961.52	

I. MONETARY RECEIPTS

Section B. Additional Page

NAME OF COMMITTEE:						FILING DUE DATE:		
Perillo for Council						10/10/2019		
B. Itemized Contributions from Individuals								
Last Name Mitchell		First Robert		MI B	Principal Occupation Attorney		Amount of Contribution	
Residential Street Address 274 Second Avenue		City Stratford	State CT	Zip Code 06615	Name of Employer Mitchell and Sheehan PC			
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>A20190802</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 08/02/2019		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? <i>If yes, list Event #</i> <u>A20190802</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 08/02/2019		Aggregate contributions \$50.00	\$50.00	
Last Name Hoydick		First Paul		MI	Principal Occupation Maintenance and Facilities Mgr		Amount of Contribution	
Residential Street Address 55 Castle Drive		City Stratford	State CT	Zip Code 06614	Name of Employer Stratford Housing Authority			
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>A20190802</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 08/02/2019		Aggregate contributions \$50.00	\$50.00	
Last Name Martin		First Raymond		MI	Principal Occupation Broker		Amount of Contribution	
Residential Street Address 39 Deerfield Drive		City Easton	State CT	Zip Code 06612	Name of Employer Ray Martin Real Estate			
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>A20190802</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 08/02/2019		Aggregate contributions \$200.00	\$200.00	
Last Name Knopf		First Lisa		MI	Principal Occupation Attorney		Amount of Contribution	
Residential Street Address 86 Old Field Lane		City Milford	State CT	Zip Code 06460	Name of Employer Self Employed			
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>A20190802</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 08/02/2019		Aggregate contributions \$100.00	\$100.00	
SUBTOTAL Section B-This Page							\$450.00	

I. MONETARY RECEIPTS
Section B. Additional Page

NAME OF COMMITTEE Perillo for Council	FILING DUE DATE 10/10/2019
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B. Itemized Contributions from Individuals

Last Name Cleri	First Judy	MI A	Principal Occupation Nurse Substitute	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 # <u>A20190802</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 08/02/2019	Aggregate contributions \$40.00
\$40.00				
Last Name Donaher	First Timothy	MI A	Principal Occupation Retired	Amount of Contribution
Residential Street Address 144 Stiles 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? <i>If yes, list Event # <u>A20190802</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 08/02/2019	Aggregate contributions \$40.00
\$40.00				
Last Name Florek	First John	MI A	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'Neall
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>A20190802</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 08/02/2019	Aggregate contributions \$100.00
\$100.00				
Last Name Peterson.	First George	MI H	Principal Occupation SVC Tech	Amount of Contribution
Residential Street Address 185 Sheppard Street	City Stratford	State CT	Zip Code 06614	Name of Employer Cooper Surgical
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>A20190802</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 08/02/2019	Aggregate contributions \$40.00
\$40.00				
Last Name Campbell	First Dennis	MI J	Principal Occupation Retired	Amount of Contribution
Residential Street Address 25 Lighthouse Avenue	City Stratford	State CT	Zip Code 06615	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>A20190802</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 08/02/2019	Aggregate contributions \$40.00
\$40.00				
SUBTOTAL Section B-This Page				\$260.00

I. MONETARY RECEIPTS

Section B. Additional Page

NAME OF COMMITTEE	FILING DUE DATE
Perillo for Council	10/10/2019

B. Itemized Contributions from Individuals

Last Name	First	MI	Principal Occupation	Amount of Contribution	
Cabral	Carol	G	Retired		
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?		If contribution is in excess of \$400 to a candidate committee for a chief executive officer 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		<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>A20190802</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 08/02/2019	Aggregate contributions \$80.00		
Silhavy	Christopher	E	Technology Consultant		
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?		If contribution is in excess of \$400 to a candidate committee for a chief executive officer 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		<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>A20190802</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 08/02/2019	Aggregate contributions \$40.00		
Lamberti	Debra	A	Retired		
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?		If contribution is in excess of \$400 to a candidate committee for a chief executive officer 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		<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>A20190802</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 08/02/2019	Aggregate contributions \$40.00		
DeLieto	Mark	J	Retired		
Residential Street Address 41 English Lane	City Shelton	State CT	Zip Code 06484		Name of Employer 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="radio"/> Yes <input checked="" type="radio"/> No		<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>A20190802</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 08/02/2019	Aggregate contributions \$80.00		
Brown	Richard	P	Realtor		
Residential Street Address 6375 Main Street	City Stratford	State CT	Zip Code 06614		Name of Employer REMAX Right Choice
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		If contribution is in excess of \$400 to a candidate committee for a chief executive officer 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		<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>A20190802</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 08/02/2019	Aggregate contributions \$40.00		

SUBTOTAL Section B-This Page \$280.00

I. MONETARY RECEIPTS
Section B. Additional Page

NAME OF COMMITTEE Perillo for Council	FILING DUE DATE 10/10/2019
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B. Itemized Contributions from Individuals

Last Name Leary	First Edward	MI J	Principal Occupation PD		Amount of Contribution
Residential Street Address 400 Washington Parkway	City Stratford	State CT	Zip Code 06615	Name of Employer Town of Westport	
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>A20190802</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 08/02/2019	Aggregate contributions \$100.00	\$100.00
Last Name Barrett	First Michael	MI F	Principal Occupation Retired		Amount of Contribution
Residential Street Address 86 Woodcrest 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 # <u>A20190802</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 checked="" type="radio"/> Payroll Deduction <input type="radio"/> Money Order			Date Received 08/02/2019	Aggregate contributions \$100.00	\$100.00
Last Name Wiltsie	First James	MI F	Principal Occupation PD		Amount of Contribution
Residential Street Address 77 Allyndale Drive	City Stratford	State CT	Zip Code 06614	Name of Employer Town of Fairfield	
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>A20190802</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 checked="" type="radio"/> Payroll Deduction <input type="radio"/> Money Order			Date Received 08/02/2019	Aggregate contributions \$40.00	\$40.00
Last Name Harkins	First John	MI A	Principal Occupation Lobbyist		Amount of Contribution
Residential Street Address 1000 Avalon Way, 2202	City Stratford	State CT	Zip Code 06614	Name of Employer Molter Government Affairs	
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? <i>If yes, list Event # <u>A20190802</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 checked="" type="radio"/> Payroll Deduction <input type="radio"/> Money Order			Date Received 08/02/2019	Aggregate contributions \$100.00	\$100.00
Last Name Fardy	First Charles	MI	Principal Occupation Retired		Amount of Contribution
Residential Street Address 35 Cheshire 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? <i>If yes, list Event # <u>A20190802</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 checked="" type="radio"/> Payroll Deduction <input type="radio"/> Money Order			Date Received 08/02/2019	Aggregate contributions \$20.00	\$20.00

SUBTOTAL Section B-This Page **\$360.00**

I. MONETARY RECEIPTS
Section B. Additional Page

NAME OF COMMITTEE Perillo for Council	FILING DUE DATE 10/10/2019
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B. Itemized Contributions from Individuals

Last Name See	First James	MI A	Principal Occupation Real Estate	Amount of Contribution
Residential Street Address 806 Cutspring Road	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 # <u>A20190802</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 08/02/2019	Aggregate contributions \$80.00	\$80.00
Last Name Batoh	First Timothy	MI 	Principal Occupation Manager	Amount of Contribution
Residential Street Address 557 Harvard Avenue	City Stratford	State CT	Zip Code 06614	Name of Employer BPA Worldwide
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>A20190802</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 08/02/2019	Aggregate contributions \$40.00	\$40.00
Last Name Mudre	First Ronald	MI 	Principal Occupation Butcher	Amount of Contribution
Residential Street Address 50 Brandon Avenue	City Stratford	State CT	Zip Code 06614	Name of Employer Hilltop Food Market
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>A20190802</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 08/02/2019	Aggregate contributions \$40.00	\$40.00
Last Name Westmore	First David	MI J	Principal Occupation Pgm Director	Amount of Contribution
Residential Street Address 95 4th Avenue	City Stratford	State CT	Zip Code 066158	Name of Employer US DoD
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>A20190802</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 08/02/2019	Aggregate contributions \$40.00	\$40.00
Last Name Nunno	First Kristine	MI L	Principal Occupation Waitress	Amount of Contribution
Residential Street Address 554 Woodlawn Avenue	City Stratford	State CT	Zip Code 06614	Name of Employer Alan Pierce
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>A20190802</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 08/02/2019	Aggregate contributions \$40.00	\$40.00

SUBTOTAL Section B-This Page

\$240.00

I. MONETARY RECEIPTS
Section B. Additional Page

NAME OF COMMITTEE Perillo for Council	FILING DUE DATE 10/10/2019
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B. Itemized Contributions from Individuals

Last Name Gomes	First Frank	MI	Principal Occupation Supervisor	Amount of Contribution
Residential Street Address 272 Johnson Avenue	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>A20190802</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 08/02/2019	Aggregate contributions \$100.00	\$100.00
<hr/>				
Last Name Palko	First Nicholas	MI P	Principal Occupation	Amount of Contribution
Residential Street Address 666 Milford Point Road	City Milford	State CT	Zip Code 06460	
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>A20190802</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 08/02/2019	Aggregate contributions \$40.00	\$40.00
<hr/>				
Last Name Knapp	First Kyle	MI B	Principal Occupation CFO	Amount of Contribution
Residential Street Address 400 Washington Parkway	City Stratford	State CT	Zip Code 06615	
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>A20190802</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 08/02/2019	Aggregate contributions \$40.00	\$40.00
<hr/>				
Last Name Feehan	First James	MI	Principal Occupation Business Owner	Amount of Contribution
Residential Street Address 160 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>A20190802</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 08/02/2019	Aggregate contributions \$40.00	\$40.00
<hr/>				
Last Name O'Brien	First William	MI R	Principal Occupation Flooring	Amount of Contribution
Residential Street Address 468 Prospect Drive	City Stratford	State CT	Zip Code 06615	
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>A20190802</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 08/02/2019	Aggregate contributions \$40.00	\$40.00
SUBTOTAL Section B-This Page				\$260.00

I. MONETARY RECEIPTS
Section B. Additional Page

NAME OF COMMITTEE Perillo for Council	FILING DUE DATE 10/10/2019
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B. Itemized Contributions from Individuals

Last Name Cosgrove	First Fred	MI T	Principal Occupation Sales Clerk	Amount of Contribution
Residential Street Address 2144 Barnum Avenue	City Stratford	State CT	Zip Code 06615	Name of Employer Whole Foods Market
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>A20190802</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 08/02/2019	Aggregate contributions \$40.00
\$40.00				
Last Name Wilcoxson	First Fred	MI	Principal Occupation Retired	Amount of Contribution
Residential Street Address 516 Bridgeview Place	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>A20190802</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 08/02/2019	Aggregate contributions \$40.00
\$40.00				
Last Name Pia	First Chris	MI	Principal Occupation Agent	Amount of Contribution
Residential Street Address 152 Ryegate Terrace	City Stratford	State CT	Zip Code 06615	Name of Employer NY Life
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>A20190802</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 08/02/2019	Aggregate contributions \$40.00
\$40.00				
Last Name Pierce	First Alan	MI D	Principal Occupation	Amount of Contribution
Residential Street Address 20 Russell Road	City Stratford	State CT	Zip Code 06614	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 # <u>A20190802</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 08/02/2019	Aggregate contributions \$50.00
\$50.00				
Last Name Nasta	First Roe	MI	Principal Occupation Retired	Amount of Contribution
Residential Street Address 141 Fern Circle	City Trumbull	State CT	Zip Code 06611	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>A20190802</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 08/02/2019	Aggregate contributions \$40.00
\$40.00				

SUBTOTAL Section B-This Page

\$210.00

I. MONETARY RECEIPTS
Section B. Additional Page

NAME OF COMMITTEE: Perillo for Council	FILING DATE: 10/10/2019
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B. Itemized Contributions from Individuals

Last Name DeCilio	First Gail	MI	Principal Occupation Retired	Amount of Contribution	
Residential Street Address 115 Elizabeth 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>A20190802</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 08/02/2019	Aggregate contributions \$40.00		\$40.00
<hr/>					
Last Name Miller	First Jeff	MI	Principal Occupation Contract Framer	Amount of Contribution	
Residential Street Address 41 Bridgeview Place	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 # <u>A20190802</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 08/02/2019	Aggregate contributions \$40.00		\$40.00
<hr/>					
Last Name Dobos	First John	MI A	Principal Occupation Retired	Amount of Contribution	
Residential Street Address 1165 Stratford Road	City Stratford	State CT	Zip Code 06615		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>A20190802</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 08/02/2019	Aggregate contributions \$40.00		\$40.00
<hr/>					
Last Name Ogrodowicz	First Dawn	MI	Principal Occupation Director	Amount of Contribution	
Residential Street Address 520 Laughlin Road West	City Stratford	State CT	Zip Code 06614		Name of Employer Wissin and Dana
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>A20190802</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 08/02/2019	Aggregate contributions \$60.00		\$60.00
<hr/>					
Last Name Llewelyn	First Alan	MI D	Principal Occupation Project Manager	Amount of Contribution	
Residential Street Address 949 Huntington Road	City Stratford	State CT	Zip Code 06614		Name of Employer Centek
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>A20190802</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 08/02/2019	Aggregate contributions \$40.00		\$40.00
SUBTOTAL Section B-This Page				\$220.00	

I. MONETARY RECEIPTS
Section B. Additional Page

NAME OF COMMITTEE Perillo for Council	FILING DUE DATE 10/10/2019
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B. Itemized Contributions from Individuals

Last Name Kelly	First Kevin	MI C	Principal Occupation Attorney	Amount of Contribution
Residential Street Address 240 York Street	City Stratford	State CT	Zip Code 06615	Name of Employer Kevin Kelly and Associates PC
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>A20190802</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 08/02/2019	Aggregate contributions \$50.00	
\$50.00				
Last Name Brown	First Ronald	MI 	Principal Occupation Retired	Amount of Contribution
Residential Street Address 38 Drake 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? <i>If yes, list Event # <u>A20190802</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 08/02/2019	Aggregate contributions \$40.00	
\$40.00				
Last Name Sloditskie	First Michael	MI 	Principal Occupation Firefighter	Amount of Contribution
Residential Street Address 219 Newtown Avenue	City Norwalk	State CT	Zip Code 06851	Name of Employer City of Stamford
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>A20190802</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 08/02/2019	Aggregate contributions \$40.00	
\$40.00				
Last Name Gannon	First Louis	MI L	Principal Occupation Police Sergeant	Amount of Contribution
Residential Street Address 1000 Avalon Way, 2104	City Stratford	State CT	Zip Code 06614	Name of Employer New Canaan
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? <i>If yes, list Event # <u>A20190802</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 08/02/2019	Aggregate contributions \$40.00	
\$40.00				
Last Name Forrester	First Gavin	MI 	Principal Occupation Controller	Amount of Contribution
Residential Street Address 103 Orchard Street	City Stratford	State CT	Zip Code 06615	Name of Employer xtor Specialty
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>A20190802</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 08/02/2019	Aggregate contributions \$40.00	
\$40.00				
SUBTOTAL Section B-This Page				\$210.00

I. MONETARY RECEIPTS
Section B. Additional Page

NAME OF COMMITTEE: Perillo for Council	FILING DUE DATE: 10/10/2019
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B. Itemized Contributions from Individuals

Last Name Kennedy	First Sharon	MI P	Principal Occupation Retired	Amount of Contribution
Residential Street Address 1165 Stratford Road	City Stratford	State CT	Zip Code 06615	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>A20190802</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 08/02/2019	Aggregate contributions \$20.00	\$20.00
Last Name Massey	First Patrick	MI 	Principal Occupation Finance	Amount of Contribution
Residential Street Address 100 Bayview Blvd	City Stratford	State CT	Zip Code 06615	Name of Employer Merrill Lynch
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>A20190802</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 08/02/2019	Aggregate contributions \$40.00	\$40.00
Last Name Dinan	First Roy	MI 	Principal Occupation Pool Sales	Amount of Contribution
Residential Street Address 2415 Main Street	City Stratford	State CT	Zip Code 06615	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 # <u>A20190802</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 08/02/2019	Aggregate contributions \$40.00	\$40.00
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>A20190802</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 08/02/2019	Aggregate contributions \$40.00	\$40.00
Last Name Murphy	First Pat	MI 	Principal Occupation Painter	Amount of Contribution
Residential Street Address 66 Dover Street	City Stratford	State CT	Zip Code 06615	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 # <u>A20190802</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 08/02/2019	Aggregate contributions \$20.00	\$20.00
SUBTOTAL Section B-This Page				\$160.00

I. MONETARY RECEIPTS
Section B. Additional Page

NAME OF COMMITTEE Perillo for Council	FILING DUE DATE 10/10/2019
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B. Itemized Contributions from Individuals

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 # <u>A20190802</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 checked="" type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 08/02/2019	Aggregate contributions \$100.00	\$100.00
Last Name Brown Jr	First Richard	MI P	Principal Occupation Sales	Amount of Contribution
Residential Street Address 1245 Cutspring Road	City Stratford	State CT	Zip Code 06614	Name of Employer Trinity Solar
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>A20190802</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 checked="" type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 08/02/2019	Aggregate contributions \$50.00	\$50.00
Last Name Kubel	First Ken	MI	Principal Occupation	Amount of Contribution
Residential Street Address 91 Woods End Road	City Stratford	State CT	Zip Code 06824	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 # <u>A20190802</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 checked="" type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 08/02/2019	Aggregate contributions \$40.00	\$40.00
Last Name Scala	First Judy	MI A	Principal Occupation Assistant to the Registrar	Amount of Contribution
Residential Street Address 435 Warner Hill 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 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? <i>If yes, list Event # <u>A20190802</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 checked="" 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 checked="" type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 08/02/2019	Aggregate contributions \$40.00	\$40.00
Last Name Donohr	First Jerome	MI	Principal Occupation	Amount of Contribution
Residential Street Address 1700 Broadbridge Avenue	City Stratford	State CT	Zip Code 06614	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 # <u>A20190802</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 checked="" type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 08/02/2019	Aggregate contributions \$75.00	\$75.00

SUBTOTAL Section B-This Page **\$305.00**

I. MONETARY RECEIPTS
Section B. Additional Page

NAME OF COMMITTEE Perillo for Council	FILING DUE DATE 10/10/2019
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B. Itemized Contributions from Individuals

Last Name Gazaille	First Nancy	MI C	Principal Occupation Hairdresser	Amount of Contribution
Residential Street Address 473 Woodlawn 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 # <u>A20190802</u></i>		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 checked="" type="radio"/> Yes <input 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 08/02/2019	Aggregate contributions \$25.00	\$25.00
Last Name Scheck	First Linnea	MI A	Principal Occupation Co/Owner	Amount of Contribution
Residential Street Address 72 Howard Street	City Stratford	State CT	Zip Code 06615	Name of Employer Butterworth 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? <i>If yes, list Event # <u>A20190802</u></i>		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 08/02/2019	Aggregate contributions \$50.00	\$50.00
Last Name Rodia	First Karen	MI	Principal Occupation Clerical	Amount of Contribution
Residential Street Address 2115 Cutspring Road	City Stratford	State CT	Zip Code 06614	Name of Employer T Brunoski MD
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>A20190802</u></i>		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 08/02/2019	Aggregate contributions \$25.00	\$25.00
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 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? <i>If yes, list Event # <u>A20190802</u></i>		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 08/02/2019	Aggregate contributions \$100.00	\$100.00
Last Name Williams	First Stephen	MI J	Principal Occupation Police Officer	Amount of Contribution
Residential Street Address 2 Brookwood Lane	City Shelton	State CT	Zip Code 06484	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>		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 checked="" type="radio"/> Money Order		Date Received 08/11/2019	Aggregate contributions \$100.00	\$100.00

SUBTOTAL Section B-This Page **\$300.00**

I. MONETARY RECEIPTS
Section B. Additional Page

NAME OF COMMITTEE Perillo for Council	FILING DUE DATE 10/10/2019
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B. Itemized Contributions from Individuals

Last Name Eanotti	First Kristy	MI A	Principal Occupation Clerical	Amount of Contribution
Residential Street Address 610 Hilltop Drive	City Stratford	State CT	Zip Code 06614	Name of Employer Law Office
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? <input type="radio"/> Yes <input checked="" type="radio"/> No If yes, list Event # _____	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 08/11/2019	Aggregate contributions \$50.00

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 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 type="radio"/> No			
Is this contribution associated with a fundraising event listed in Section L1? <input type="radio"/> Yes <input type="radio"/> No If yes, list Event # _____	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 type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order			Date Received	Aggregate contributions \$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 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 type="radio"/> No			
Is this contribution associated with a fundraising event listed in Section L1? <input type="radio"/> Yes <input type="radio"/> No If yes, list Event # _____	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 type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order			Date Received	Aggregate contributions \$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 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 type="radio"/> No			
Is this contribution associated with a fundraising event listed in Section L1? <input type="radio"/> Yes <input type="radio"/> No If yes, list Event # _____	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 type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order			Date Received	Aggregate contributions \$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 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 type="radio"/> No			
Is this contribution associated with a fundraising event listed in Section L1? <input type="radio"/> Yes <input type="radio"/> No If yes, list Event # _____	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 type="radio"/> Personal Check			Date Received	Aggregate contributions \$0.00

RECEIVED FOR RECORD AT STRATFORD, CT
10/9/2019 08:04 AM

Steven M. Paulick
Stratford Town Clerk

SUBTOTAL Section B-This Page **\$50.00**