

**SEEC FORM 20**

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



Do Not Mark in This Space For  
 Official Use Only

**SUMMARY PAGE**

**1. NAME OF COMMITTEE**

**Segarra for Mayor**

**2. TREASURER NAME**

Title	First	MI	Last	Suffix
Miss	Doris	E	Rojas	

**3. TREASURER ADDRESS**

Street Address	City	State	Zip Code
73 Mountford Street	Hartford	CT	06114

**4. ELECTION/REFERENDUM DATE**      **5. OFFICE SOUGHT** (Complete only if Candidate Committee)      **6. DISTRICT NUMBER** (if applicable)

(mm/dd/yyyy)		
11/08/2011	Mayor	

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

Title	First	MI	Last	Suffix
Mr	Pedro	E	Segarra	

**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
10/01/2010	12/31/2010

thru

TOWN & CITY CLERK  
 HARTFORD  
 2011 JAN 10 P 2:08  
*[Signature]*

**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.

	<b>Doris E. Rojas</b>	<b>01/07/2010</b>
TREASURER OR DEPUTY TREASURER (SIGNATURE)	PRINT NAME OF SIGNER	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	
	01/10/2011	
Segarra for Mayor	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		
12. Balance on hand at the beginning of Reporting Period	\$0.00	
13. Contributions received from Individuals (Sections A and B)	\$15,205.00	
14. Receipts from Other Committees (Sections C1 and C2)	\$0.00	\$0.00
15. Other Monetary Receipts (Sections D-K)	\$26.00	\$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)	\$15,231.00	\$0.00
18. Subtotals (add totals in line 12 + line 17 in Column A; and in line 11 + 17 in Column B)	\$15,231.00	\$15,231.00
19. Expenses Paid by Committee (Section P)	\$90.00	\$0.00
20. Balance on hand at close of Reporting Period (Subtract line 19 from line 18 in both Columns)	\$15,141.00	\$15,141.00
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	
Segarra for Mayor						01/10/2011	
<b>A. Total Contributions from Small Contributors-Received this Period ONLY</b> <i>(See instructions for definition of Small Contributor)</i>						<b>Subtotal Section A</b> \$ 305.00	
<b>B. Itemized Contributions from Individuals</b>							
Last Name Paindiris		First Nicholas		MI	Principal Occupation Attorney		<b>Amount of Contribution</b>
Residential Street Address 119 Butler Dr		City Glastonbury	State CT	Zip Code 06033	Name of Employer Brown, Paindiris & Scott		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="radio"/> Yes <input checked="" type="radio"/> No					
Is this contribution associated with a fundraising event listed in Section L1? <i>If yes, list Event #</i> <input type="radio"/> Yes <input checked="" type="radio"/> No		Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="radio"/> Executive <input type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No					
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order				Date Received 12/06/2010		Aggregate contributions \$0.00	
<b>\$1,000.00</b>							
Last Name Wallington		First Dale		MI J	Principal Occupation Physician		<b>Amount of Contribution</b>
Residential Street Address 50 Beachtree Ln		City West Hartford	State CT	Zip Code 06107	Name of Employer Resilience Healthcare LLC		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="radio"/> Yes <input checked="" type="radio"/> No					
Is this contribution associated with a fundraising event listed in Section L1? <i>If yes, list Event #</i> <input type="radio"/> Yes <input checked="" type="radio"/> No		Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="radio"/> Executive <input type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No					
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order				Date Received 12/09/2010		Aggregate contributions \$0.00	
<b>\$250.00</b>							
Last Name Feltman		First Art		MI	Principal Occupation Executive Director/Educator		<b>Amount of Contribution</b>
Residential Street Address 50 Beechtree Lane		City West Hartford	State CT	Zip Code 06107	Name of Employer Parent Academy		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="radio"/> Yes <input checked="" type="radio"/> No					
Is this contribution associated with a fundraising event listed in Section L1? <i>If yes, list Event #</i> <input type="radio"/> Yes <input checked="" type="radio"/> No		Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="radio"/> Executive <input 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 type="radio"/> Payroll Deduction <input type="radio"/> Money Order				Date Received 12/13/2010		Aggregate contributions \$0.00	
<b>\$250.00</b>							
Last Name Pinard		First Gerald		MI M	Principal Occupation Environmental Consultant		<b>Amount of Contribution</b>
Residential Street Address 650 Stone Rd		City Windsor	State CT	Zip Code 06095	Name of Employer Alternative Global Energy Inc		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="radio"/> Yes <input checked="" type="radio"/> No					
Is this contribution associated with a fundraising event listed in Section L1? <i>If yes, list Event #</i> <input type="radio"/> Yes <input checked="" type="radio"/> No 12/17/2010		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 12/17/2010		Aggregate contributions \$0.00	
<b>\$250.00</b>							
<b>SUBTOTAL Section B-This Page</b>							<b>\$1,750.00</b>
<b>TOTAL of additional Section B Pages</b>							<b>\$13,150.00</b>
<b>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A &amp; B) (Enter total on Line 13 of Summary Page)</b>							<b>\$15,205.00</b>

# I. MONETARY RECEIPTS

## Section B. Additional Page

<b>NAME OF COMMITTEE</b> Segarra for Mayor	<b>FILING DUE DATE</b> 01/10/2011
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### B. Itemized Contributions from Individuals

Last Name <b>Lopez</b>	First <b>Alfonso</b>	MI	Principal Occupation <b>Owner</b>	<b>Amount of Contribution</b>
Residential Street Address <b>5 Meadow Rd</b>	City <b>Cromwell</b>	State <b>CT</b>	Zip Code <b>06416</b>	
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> <b>12/17/2010</b> <input type="radio"/> Yes <input checked="" type="radio"/> No		Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="radio"/> Executive <input type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No		
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input checked="" type="radio"/> Money Order		Date Received <b>12/17/2010</b>	Aggregate contributions <b>\$0.00</b>	<b>\$250.00</b>
Last Name <b>Diaz</b>	First <b>Toribio</b>	MI	Principal Occupation <b>Store Manager</b>	<b>Amount of Contribution</b>
Residential Street Address <b>873 West Boulevard Apt 320</b>	City <b>Hartford</b>	State <b>CT</b>	Zip Code <b>06106</b>	
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> <b>12/17/2010</b> <input type="radio"/> Yes <input checked="" type="radio"/> No		Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="radio"/> Executive <input type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No		
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input checked="" type="radio"/> Money Order		Date Received <b>12/17/2010</b>	Aggregate contributions <b>\$0.00</b>	<b>\$500.00</b>
Last Name <b>Flores</b>	First <b>Ramon</b>	MI	Principal Occupation <b>President</b>	<b>Amount of Contribution</b>
Residential Street Address <b>2 Park Place Apt 12K</b>	City <b>Hartford</b>	State <b>CT</b>	Zip Code <b>06106</b>	
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> <b>12/17/2010</b> <input type="radio"/> Yes <input checked="" type="radio"/> No		Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="radio"/> Executive <input type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No		
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input checked="" type="radio"/> Money Order		Date Received <b>12/17/2010</b>	Aggregate contributions <b>\$0.00</b>	<b>\$500.00</b>
Last Name <b>Pelaez</b>	First <b>Sofia</b>	MI	Principal Occupation <b>Owner</b>	<b>Amount of Contribution</b>
Residential Street Address <b>229 Linnmoore Street</b>	City <b>Hartford</b>	State <b>CT</b>	Zip Code <b>06106</b>	
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		
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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 checked="" type="radio"/> Money Order		Date Received <b>12/15/2010</b>	Aggregate contributions <b>\$0.00</b>	<b>\$500.00</b>
Last Name <b>Pelaez</b>	First <b>Julian</b>	MI	Principal Occupation <b>Owner</b>	<b>Amount of Contribution</b>
Residential Street Address <b>229 Linnmoore Street</b>	City <b>Hartford</b>	State <b>CT</b>	Zip Code <b>06106</b>	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="radio"/> Yes <input checked="" type="radio"/> No		
Is this contribution associated with a fundraising event listed in Section L1? <i>If yes, list Event #</i> <input type="radio"/> Yes <input checked="" type="radio"/> No		Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="radio"/> Executive <input type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No		
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input checked="" type="radio"/> Money Order		Date Received <b>12/15/2010</b>	Aggregate contributions <b>\$0.00</b>	<b>\$500.00</b>

**SUBTOTAL Section B-This Page**

**\$2,250.00**

**I. MONETARY RECEIPTS**  
**Section B. Additional Page**

<b>NAME OF COMMITTEE</b> Segarra for Mayor	<b>FILING DUE DATE</b> 01/10/2011
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**B. Itemized Contributions from Individuals**

Last Name <b>Kliman</b>	First <b>Robert</b>	MI <b>H</b>	Principal Occupation <b>Real State Management</b>	<b>Amount of Contribution</b>
Residential Street Address <b>182 Talcott Ridge Rd</b>	City <b>South Windsor</b>	State <b>CT</b>	Zip Code <b>06074</b>	Name of Employer <b>Self Employer</b>
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> <b>12/17/2010</b>		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 <b>12/17/2010</b>	Aggregate contributions <b>\$0.00</b>
<b>\$1,000.00</b>				
Last Name <b>Lopez</b>	First <b>Carlos</b>	MI	Principal Occupation <b>Manager/Owner</b>	<b>Amount of Contribution</b>
Residential Street Address <b>3 Muls Hill Drive</b>	City <b>Farmington</b>	State <b>CT</b>	Zip Code <b>06032</b>	Name of Employer <b>CT Parking</b>
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> <b>12/17/2010</b>		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 <b>12/17/2010</b>	Aggregate contributions <b>\$0.00</b>
<b>\$1,000.00</b>				
Last Name <b>Pomales</b>	First <b>Jennifer</b>	MI	Principal Occupation <b>Citation Hearing Officer</b>	<b>Amount of Contribution</b>
Residential Street Address <b>19 Rodney Street</b>	City <b>Hartford</b>	State <b>CT</b>	Zip Code <b>06105</b>	Name of Employer <b>Hartford Parking Authority</b>
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> <b>12/17/2010</b>		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 <b>12/17/2010</b>	Aggregate contributions <b>\$0.00</b>
<b>\$150.00</b>				
Last Name <b>Sierra</b>	First <b>Arnaldo</b>	MI <b>J</b>	Principal Occupation <b>Attorney</b>	<b>Amount of Contribution</b>
Residential Street Address <b>215 Washington Street</b>	City <b>Hartford</b>	State <b>CT</b>	Zip Code <b>06106</b>	Name of Employer <b>Self-Employer</b>
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		
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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 <b>12/17/2010</b>	Aggregate contributions <b>\$0.00</b>
<b>\$150.00</b>				
Last Name <b>Mass</b>	First <b>Martha</b>	MI <b>A</b>	Principal Occupation <b>Doctor of Optometry</b>	<b>Amount of Contribution</b>
Residential Street Address <b>33 Southpond Rd</b>	City <b>Glastonbury</b>	State <b>CT</b>	Zip Code <b>06073</b>	Name of Employer <b>Self Employer</b>
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 checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order			Date Received <b>12/15/2010</b>	Aggregate contributions <b>\$0.00</b>
<b>\$250.00</b>				

**SUBTOTAL Section B-This Page** **\$2,550.00**

# I. MONETARY RECEIPTS

## Section B. Additional Page

<b>NAME OF COMMITTEE</b> Segarra for Mayor	<b>FILING DUE DATE</b> 01/10/2011
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### B. Itemized Contributions from Individuals

Last Name <b>Sanchez</b>	First <b>Danilo</b>	MI	Principal Occupation <b>Manager</b>	<b>Amount of Contribution</b>
Residential Street Address <b>283 Pennwood Place</b>	City <b>Bristol</b>	State <b>CT</b>	Zip Code <b>06010</b>	
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> <b>12/17/2010</b>		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 <b>12/17/2010</b>	Aggregate contributions <b>\$0.00</b>	<b>\$500.00</b>

Last Name <b>Caro</b>	First <b>Angel</b>	MI	Principal Occupation <b>Hair Stylist</b>	<b>Amount of Contribution</b>
Residential Street Address <b>150 Fern Street</b>	City <b>Hartford</b>	State <b>CT</b>	Zip Code <b>06105</b>	
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> <b>12/17/2010</b>		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 checked="" type="radio"/> Money Order		Date Received <b>12/17/2010</b>	Aggregate contributions <b>\$0.00</b>	<b>\$100.00</b>

Last Name <b>Platts</b>	First <b>James</b>	MI <b>E</b>	Principal Occupation <b>Engineer</b>	<b>Amount of Contribution</b>
Residential Street Address <b>1 Gold Street</b>	City <b>Hartford</b>	State <b>CT</b>	Zip Code <b>06103</b>	
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> <b>12/17/2010</b>		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 checked="" type="radio"/> Money Order		Date Received <b>12/17/2010</b>	Aggregate contributions <b>\$0.00</b>	<b>\$100.00</b>

Last Name <b>Alvarez</b>	First <b>Carlos</b>	MI <b>A</b>	Principal Occupation <b>Manager</b>	<b>Amount of Contribution</b>
Residential Street Address <b>187 Talcott Notch Road</b>	City <b>Farmington</b>	State <b>CT</b>	Zip Code <b>06032</b>	
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> <b>12/17/2010</b>		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 checked="" type="radio"/> Money Order		Date Received <b>12/17/2010</b>	Aggregate contributions <b>\$0.00</b>	<b>\$100.00</b>

Last Name <b>Blake</b>	First <b>Thomas</b>	MI <b>A</b>	Principal Occupation <b>Social Worker</b>	<b>Amount of Contribution</b>
Residential Street Address <b>106 Oakwood Avenue A-6</b>	City <b>West Hartford</b>	State <b>CT</b>	Zip Code <b>06119</b>	
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> <b>12/17/2010</b>		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 checked="" type="radio"/> Money Order		Date Received <b>12/17/2010</b>	Aggregate contributions <b>\$0.00</b>	<b>\$100.00</b>

**SUBTOTAL Section B-This Page**

**\$900.00**



**I. MONETARY RECEIPTS**  
**Section B. Additional Page**

<b>NAME OF COMMITTEE</b> Segarra for Mayor	<b>FILING DATE</b> 01/10/2011
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**B. Itemized Contributions from Individuals**

Last Name <b>Riccio</b>	First <b>Anne</b>	MI	Principal Occupation <b>Retail Hardware</b>	<b>Amount of Contribution</b>
Residential Street Address <b>7 Hayrake Drive</b>	City <b>Wethersfield</b>	State <b>CT</b>	Zip Code <b>06109</b>	Name of Employer <b>Park Hardware</b>
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> <b>12/17/2010</b>		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		
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 checked="" type="radio"/> Money Order		Date Received <b>12/17/2010</b>	Aggregate contributions <b>\$0.00</b>	<b>\$100.00</b>
Last Name <b>Casares</b>	First <b>Edward</b>	MI	Principal Occupation <b>Fire Chief</b>	<b>Amount of Contribution</b>
Residential Street Address <b>78 Roger Street</b>	City <b>Hartford</b>	State <b>CT</b>	Zip Code <b>06106</b>	Name of Employer <b>City of Hartford</b>
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 checked="" 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 checked="" type="radio"/> Money Order		Date Received <b>12/16/2010</b>	Aggregate contributions <b>\$0.00</b>	<b>\$100.00</b>
Last Name <b>Schulman</b>	First <b>Sydney</b>	MI <b>T</b>	Principal Occupation <b>Attorney</b>	<b>Amount of Contribution</b>
Residential Street Address <b>8 High Ledge Road</b>	City <b>Bloomfield</b>	State <b>CT</b>	Zip Code <b>06002</b>	Name of Employer <b>Schulman &amp; Associates</b>
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> <b>12/17/2010</b>		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		
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 checked="" type="radio"/> Money Order		Date Received <b>12/17/2010</b>	Aggregate contributions <b>\$0.00</b>	<b>\$100.00</b>
Last Name <b>Sanchez</b>	First <b>Gerardo</b>	MI	Principal Occupation <b>Electrician</b>	<b>Amount of Contribution</b>
Residential Street Address <b>53 Lincoln Street #2</b>	City <b>Hartford</b>	State <b>CT</b>	Zip Code <b>06106</b>	Name of Employer <b>Self Employer</b>
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 checked="" 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 checked="" type="radio"/> Money Order		Date Received <b>12/15/2010</b>	Aggregate contributions <b>\$0.00</b>	<b>\$250.00</b>
Last Name <b>Ziebka</b>	First <b>Michael</b>	MI <b>A</b>	Principal Occupation <b>CPA</b>	<b>Amount of Contribution</b>
Residential Street Address <b>5 Greencrest Drive</b>	City <b>Farmington</b>	State <b>CT</b>	Zip Code <b>06032</b>	Name of Employer <b>Budwitz &amp; MeyerJack PC</b>
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> <b>12/17/2010</b>		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		
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 checked="" type="radio"/> Money Order		Date Received <b>12/17/2010</b>	Aggregate contributions <b>\$0.00</b>	<b>\$250.00</b>

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

# I. MONETARY RECEIPTS

## Section B. Additional Page

NAME OF COMMITTEE <b>Segarra for Mayor</b>	FILING DATE <b>01/10/2011</b>
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### B. Itemized Contributions from Individuals

Last Name <b>Carvajal</b>	First <b>Andrea</b>	MI <b>P</b>	Principal Occupation <b>Bookkeeper</b>	<b>Amount of Contribution</b>
Residential Street Address <b>79 Otis Street</b>	City <b>Hartford</b>	State <b>CT</b>	Zip Code <b>06114</b>	
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 # <b>12/17/2010</b>		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="radio"/> Executive <input type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No		
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received <b>12/17/2010</b>	Aggregate contributions <b>\$0.00</b>	<b>\$250.00</b>

Last Name <b>Carvajal</b>	First <b>Nelson</b>	MI <b>R</b>	Principal Occupation <b>Manager</b>	<b>Amount of Contribution</b>
Residential Street Address <b>182 Linnmoore Street</b>	City <b>Hartford</b>	State <b>CT</b>	Zip Code <b>06114</b>	
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 #		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="radio"/> Executive <input type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No		
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received <b>12/13/2010</b>	Aggregate contributions <b>\$0.00</b>	<b>\$250.00</b>

Last Name <b>Mendez</b>	First <b>Serafin</b>	MI	Principal Occupation <b>Executive Director</b>	<b>Amount of Contribution</b>
Residential Street Address <b>71-B Inlay Street</b>	City <b>Hartford</b>	State <b>CT</b>	Zip Code <b>06105</b>	
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 #		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="radio"/> Executive <input type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No		
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received <b>12/16/2010</b>	Aggregate contributions <b>\$0.00</b>	<b>\$250.00</b>

Last Name <b>Zayas</b>	First <b>Richard</b>	MI <b>L</b>	Principal Occupation <b>Attorney</b>	<b>Amount of Contribution</b>
Residential Street Address <b>7 Hunter Road Ext</b>	City <b>Simsbury</b>	State <b>CT</b>	Zip Code <b>06070</b>	
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 # <b>12/17/2010</b>		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="radio"/> Executive <input type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No		
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received <b>12/17/2010</b>	Aggregate contributions <b>\$0.00</b>	<b>\$250.00</b>

Last Name <b>Chavez</b>	First <b>Jose</b>	MI <b>A</b>	Principal Occupation <b>Retired</b>	<b>Amount of Contribution</b>
Residential Street Address <b>130 Eleanor Road</b>	City <b>Springfield</b>	State <b>MA</b>	Zip Code <b>01108</b>	
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 #		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="radio"/> Executive <input type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No		
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received <b>12/16/2010</b>	Aggregate contributions <b>\$0.00</b>	<b>\$250.00</b>

**SUBTOTAL Section B-This Page**

**\$1,250.00**



# I. MONETARY RECEIPTS

## Section B. Additional Page

<b>NAME OF COMMITTEE</b> Segarra for Mayor	<b>FILING DUE DATE</b> 01/10/2011
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### B. Itemized Contributions from Individuals

Last Name <b>Muniz</b>	First <b>Roberto</b>	MI	Principal Occupation <b>Baker</b>	<b>Amount of Contribution</b>
Residential Street Address <b>59 Valley View Drive</b>	City <b>Rocky Hill</b>	State <b>CT</b>	Zip Code <b>06067</b>	
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"/> Yes <input checked="" type="radio"/> No		<input type="radio"/> Executive <input type="radio"/> Legislative <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 <b>12/11/2010</b>	Aggregate contributions <b>\$0.00</b>	<b>\$250.00</b>
<hr/>				
Last Name <b>Sierra</b>	First <b>Angel</b>	MI <b>L</b>	Principal Occupation <b>Optician</b>	<b>Amount of Contribution</b>
Residential Street Address <b>505 Wickham Road</b>	City <b>Glastonbury</b>	State <b>CT</b>	Zip Code <b>06033</b>	
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"/> Yes <input checked="" type="radio"/> No <b>12/17/2010</b>		<input type="radio"/> Executive <input type="radio"/> Legislative <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 <b>12/17/2010</b>	Aggregate contributions <b>\$0.00</b>	<b>\$250.00</b>
<hr/>				
Last Name <b>Manousos</b>	First <b>Stathis</b>	MI	Principal Occupation <b>General Manager</b>	<b>Amount of Contribution</b>
Residential Street Address <b>136 Windmill Hill</b>	City <b>Wethersfield</b>	State <b>CT</b>	Zip Code <b>06109</b>	
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"/> Yes <input checked="" type="radio"/> No <b>12/17/2010</b>		<input type="radio"/> Executive <input type="radio"/> Legislative <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 <b>12/17/2010</b>	Aggregate contributions <b>\$0.00</b>	<b>\$250.00</b>
<hr/>				
Last Name <b>Reategui</b>	First <b>Jose</b>	MI	Principal Occupation <b>Manager</b>	<b>Amount of Contribution</b>
Residential Street Address <b>75 Colonial Drive</b>	City <b>Wethersfield</b>	State <b>CT</b>	Zip Code <b>06109</b>	
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"/> Yes <input checked="" type="radio"/> No <b>12/17/2010</b>		<input type="radio"/> Executive <input type="radio"/> Legislative <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 <b>12/17/2010</b>	Aggregate contributions <b>\$0.00</b>	<b>\$250.00</b>
<hr/>				
Last Name <b>Hoheb</b>	First <b>Christian</b>	MI <b>R</b>	Principal Occupation <b>Attorney</b>	<b>Amount of Contribution</b>
Residential Street Address <b>44 Forest Hill Drive</b>	City <b>Farmington</b>	State <b>CT</b>	Zip Code <b>06032</b>	
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"/> Yes <input checked="" type="radio"/> No <b>12/17/2010</b>		<input type="radio"/> Executive <input type="radio"/> Legislative <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 <b>12/17/2010</b>	Aggregate contributions <b>\$0.00</b>	<b>\$250.00</b>

**SUBTOTAL Section B-This Page** **\$1,250.00**

# I. MONETARY RECEIPTS

## Section B. Additional Page

<b>NAME OF COMMITTEE</b> Segarra for Mayor	<b>FILING DUE DATE</b> 01/10/2011
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### B. Itemized Contributions from Individuals

Last Name <b>Rico</b>	First <b>Ricardo</b>	MI	Principal Occupation <b>Clinician</b>	<b>Amount of Contribution</b>
Residential Street Address <b>193 Hollister Drive</b>	City <b>East Hartford</b>	State <b>CT</b>	Zip Code <b>06032</b>	
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> <b>12/17/2010</b>		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 <b>12/17/2010</b>	Aggregate contributions <b>\$0.00</b>	<b>\$250.00</b>
Last Name <b>Caban</b>	First <b>Maria</b>	MI	Principal Occupation <b>Retired</b>	<b>Amount of Contribution</b>
Residential Street Address <b>69 Brownell Avenue</b>	City <b>Hartford</b>	State <b>CT</b>	Zip Code <b>06106</b>	
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> <b>12/17/2010</b>		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 <b>12/17/2010</b>	Aggregate contributions <b>\$0.00</b>	<b>\$250.00</b>
Last Name <b>Davila</b>	First <b>Marlyn</b>	MI	Principal Occupation <b>Clinician</b>	<b>Amount of Contribution</b>
Residential Street Address <b>54 Whitmore Street Apt 3</b>	City <b>Hartford</b>	State <b>CT</b>	Zip Code <b>06106</b>	
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> <b>12/17/2010</b>		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 <b>12/17/2010</b>	Aggregate contributions <b>\$0.00</b>	<b>\$250.00</b>
Last Name <b>Aponte</b>	First <b>Marisol</b>	MI	Principal Occupation <b>Associate Director</b>	<b>Amount of Contribution</b>
Residential Street Address <b>69 Bloomfield Avenue</b>	City <b>Hartford</b>	State <b>CT</b>	Zip Code <b>06105</b>	
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> <b>12/17/2010</b>		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 <b>12/17/2010</b>	Aggregate contributions <b>\$0.00</b>	<b>\$250.00</b>
Last Name <b>Feljo</b>	First <b>Jose</b>	MI <b>A</b>	Principal Occupation <b>Owner</b>	<b>Amount of Contribution</b>
Residential Street Address <b>80 Willow Street</b>	City <b>Wethersfield</b>	State <b>CT</b>	Zip Code <b>06109</b>	
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> <b>12/17/2010</b>		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 <b>12/17/2010</b>	Aggregate contributions <b>\$0.00</b>	<b>\$250.00</b>

**SUBTOTAL Section B-This Page**

**\$1,250.00**

**I. MONETARY RECEIPTS**  
**Section B. Additional Page**

NAME OF COMMITTEE <b>Segarra for Mayor</b>	FILING DUE DATE <b>01/10/2011</b>
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**B. Itemized Contributions from Individuals**

Last Name <b>Hwang</b>	First <b>Joon</b>	MI	Principal Occupation <b>Owner</b>	<b>Amount of Contribution</b>
Residential Street Address <b>22 Fairway Drive</b>	City <b>Bolton</b>	State <b>CT</b>	Zip Code <b>06043</b>	
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 # <b>12/17/2010</b>		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="radio"/> Executive <input type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No		
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input checked="" type="radio"/> Money Order		Date Received <b>12/17/2010</b>	Aggregate contributions <b>\$0.00</b>	<b>\$150.00</b>

Last Name <b>Rodriguez</b>	First <b>Luis</b>	MI	Principal Occupation <b>Owner/Manager</b>	<b>Amount of Contribution</b>
Residential Street Address <b>26 Mayfield Road</b>	City <b>Wethersfield</b>	State <b>CT</b>	Zip Code <b>06109</b>	
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 # <b>12/17/2010</b>		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="radio"/> Executive <input type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No		
Method of contribution: <input type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input checked="" type="radio"/> Money Order		Date Received <b>12/17/2010</b>	Aggregate contributions <b>\$0.00</b>	<b>\$250.00</b>

Last Name <b>Dobski</b>	First <b>Bernard</b>	MI <b>J</b>	Principal Occupation <b>Professor</b>	<b>Amount of Contribution</b>
Residential Street Address <b>19 Caspar Street</b>	City <b>Wolcester</b>	State <b>MA</b>	Zip Code <b>01604</b>	
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 <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 checked="" type="radio"/> Money Order		Date Received <b>12/20/2010</b>	Aggregate contributions <b>\$0.00</b>	<b>\$1,000.00</b>

Last Name <b>Ramirez</b>	First <b>Armando</b>	MI	Principal Occupation <b>Business/Merchant</b>	<b>Amount of Contribution</b>
Residential Street Address <b>1 Divinity Street</b>	City <b>Bristol</b>	State <b>CT</b>	Zip Code <b>06010</b>	
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 checked="" type="radio"/> Yes <input 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 # <b>12/17/2010</b>		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="radio"/> Executive <input type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No		
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input checked="" type="radio"/> Money Order		Date Received <b>12/17/2010</b>	Aggregate contributions <b>\$0.00</b>	<b>\$250.00</b>

Last Name <b>Cullen</b>	First <b>James</b>	MI <b>T</b>	Principal Occupation <b>Stockbroker</b>	<b>Amount of Contribution</b>
Residential Street Address <b>61 Landing Road</b>	City <b>Higganum</b>	State <b>CT</b>	Zip Code <b>06441</b>	
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 <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 checked="" type="radio"/> Money Order		Date Received <b>12/03/2010</b>	Aggregate contributions <b>\$0.00</b>	<b>\$250.00</b>

<b>SUBTOTAL Section B-This Page</b>				<b>\$1,900.00</b>
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# I. MONETARY RECEIPTS

## Section B. Additional Page

<b>NAME OF COMMITTEE</b> Segarra for Mayor	<b>FILING DUE DATE</b> 01/10/2011
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### B. Itemized Contributions from Individuals

Last Name <b>Ortiz</b>	First <b>Charlie</b>	MI	Principal Occupation <b>CEO</b>	<b>Amount of Contribution</b>
Residential Street Address <b>760 Prospect Avenue</b>	City <b>Hartford</b>	State <b>CT</b>	Zip Code <b>06105</b>	
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> <b>12/17/2010</b> <input type="radio"/> Yes <input checked="" type="radio"/> No		Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="radio"/> Executive <input type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No		
Method of contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order			Date Received <b>12/17/2010</b>	Aggregate contributions <b>\$1,000.00</b>

  

Last Name	First	MI	Principal Occupation	<b>Amount of Contribution</b>
Residential Street Address	City	State	Zip Code	
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	Aggregate contributions

  

Last Name	First	MI	Principal Occupation	<b>Amount of Contribution</b>
Residential Street Address	City	State	Zip Code	
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 checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order			Date Received	Aggregate contributions

  

Last Name	First	MI	Principal Occupation	<b>Amount of Contribution</b>
Residential Street Address	City	State	Zip Code	
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 checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order			Date Received	Aggregate contributions

**SUBTOTAL Section B-This Page** **\$1,000.00**

I. MONETARY RECEIPTS (Sections A-K)

NAME OF COMMITTEE Segarra for Mayor	FILING DUE DATE 01/10/2011
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**C1. Contributions from Other Committees**

Name of Committee				Name of Treasurer		Amount of Contribution \$0.00
Address				Is this contribution associated with a fundraising event listed in Section L1? <input type="radio"/> Yes <i>If yes, list Event #</i> <input type="radio"/> No		
City	State CT	Zip Code	Date Received	Aggregate Contributions \$0.00		
Name of Committee				Name of Treasurer		Amount of Contribution \$0.00
Address				Is this contribution associated with a fundraising event listed in Section L1? <input type="radio"/> Yes <i>If yes, list Event #</i> <input type="radio"/> No		
City	State CT	Zip Code	Date Received	Aggregate Contributions \$0.00		
Name of Committee				Name of Treasurer		Amount of Contribution \$0.00
Address				Is this contribution associated with a fundraising event listed in Section L1? <input type="radio"/> Yes <i>If yes, list Event #</i> <input type="radio"/> No		
City	State CT	Zip Code	Date Received	Aggregate Contributions \$0.00		
Name of Committee				Name of Treasurer		Amount of Contribution \$0.00
Address				Is this contribution associated with a fundraising event listed in Section L1? <input type="radio"/> Yes <i>If yes, list Event #</i> <input type="radio"/> No		
City	State CT	Zip Code	Date Received	Aggregate Contributions \$0.00		
Name of Committee				Name of Treasurer		Amount of Contribution \$0.00
Address				Is this contribution associated with a fundraising event listed in Section L1? <input type="radio"/> Yes <i>If yes, list Event #</i> <input type="radio"/> No		
City	State CT	Zip Code	Date Received	Aggregate Contributions \$0.00		
Name of Committee				Name of Treasurer		Amount of Contribution \$0.00
Address				Is this contribution associated with a fundraising event listed in Section L1? <input type="radio"/> Yes <i>If yes, list Event #</i> <input type="radio"/> No		
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			Amount of Receipt \$0.00
Address			Date Received			
City	State CT	Zip Code	<input checked="" type="checkbox"/> Reimbursement for shared expense <input type="checkbox"/> Payment for goods and services		<input checked="" type="checkbox"/> Surplus Distribution	
Name of Committee			Name of Treasurer			Amount of Receipt \$0.00
Address			Date Received			
City	State CT	Zip Code	<input checked="" type="checkbox"/> Reimbursement for shared expense <input type="checkbox"/> Payment for goods and services		<input checked="" type="checkbox"/> Surplus Distribution	
<b>SUBTOTAL Section C-This Page</b>						\$0.00
<b>TOTAL of additional Section C Pages</b>						\$0.00
<b>TOTAL OF ALL COMMITTEE CONTRIBUTIONS AND RECEIPTS (Enter total on Line 14 of Summary Page)</b>						\$0.00

I. MONETARY RECEIPTS (Sections A-K)

NAME OF COMMITTEE Segarra for Mayor	FILING DUE DATE 01/10/2011
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D. Loans Received this Period

Name of Lender	Source of Loan:	Is there a Cosigner or Guarantor of this loan?	Amount Received
Street Address: _____ City: _____ State: CT Zip Code: _____	<input type="checkbox"/> Bank <input type="checkbox"/> Candidate	<input type="checkbox"/> Yes (if yes list name and address of Cosigner/Guarantor) <input type="checkbox"/> No	\$0.00
Name of Cosigner/Guarantor: _____	<input type="checkbox"/> Individual <input type="checkbox"/> Other Committee		
Street Address: _____ City: _____ State: CT Zip Code: _____	Date of Receipt: _____		
Name of Lender	Source of Loan:	Is there a Cosigner or Guarantor of this loan?	Amount Received
Street Address: _____ City: _____ State: CT Zip Code: _____	<input type="checkbox"/> Bank <input type="checkbox"/> Candidate	<input type="checkbox"/> Yes (if yes list name and address of Cosigner/Guarantor) <input type="checkbox"/> No	\$0.00
Name of Cosigner/Guarantor: _____	<input type="checkbox"/> Individual <input type="checkbox"/> Other Committee		
Street Address: _____ City: _____ State: CT Zip Code: _____	Date of Receipt: _____		
<b>Total Section D</b>			\$ 0.00

E. Receipts from Entities other than Individuals or Other Committees (Referendum Committees ONLY)

Name of Entity	Street Address	Date Received	Amount Received
_____	_____	_____	\$0.00
City: _____ State: CT Zip Code: _____	Aggregate Contributions: \$0.00		
Name of Entity	Street Address	Date Received	Amount Received
_____	_____	_____	\$0.00
City: _____ State: CT Zip Code: _____	Aggregate Contributions: \$0.00		
Name of Entity	Street Address	Date Received	Amount Received
_____	_____	_____	\$0.00
City: _____ State: CT Zip Code: _____	Aggregate Contributions: \$0.00		
<b>Total Section E</b>			\$ 0.00

F. Amount Transferred from Affiliated Business Treasury (Business Entity Committees ONLY)

Date of Receipt	Amount	Date of Receipt	Amount	Total Transfers
_____	\$0.00	_____	\$0.00	\$ 0.00
Is this transaction associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <i>If yes, list Event # _____</i> <input type="checkbox"/> No		Is this transaction associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <i>If yes, list Event # _____</i> <input type="checkbox"/> No		

G. Amount Transferred from Affiliated Labor Union or Other Organization Treasury (Organization Committees ONLY)

Date of Receipt	Amount	Date of Receipt	Amount	Total Transfers
_____	\$0.00	_____	\$0.00	\$ 0.00

H. Personal Funds of the Candidate Received this Period (Candidate Committees ONLY)

Date of Receipt	Method of payment:	Date of Receipt	Method of payment:	Total Amount Received
_____	<input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	_____	<input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	\$ 0.00
Amount: \$0.00		Amount: \$0.00		



I. MONETARY RECEIPTS (Sections A-K)

NAME OF COMMITTEE Segarra for Mayor	FILING DUE DATE 01/10/2011
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I. Anonymous Contributions (Specify dollar amount of the bills received)

Date Received	Amount	Date Received	Amount	Total Amount Received
	\$0.00		\$0.00	
\$1 bills \$0.00	\$5 bills \$0.00	\$1 bills \$0.00	\$5 bills \$0.00	
coins \$0.00	\$10 bill \$0.00	coins \$0.00	\$10 bill \$0.00	

J. Interest from Deposits in Authorized Accounts

Date Received	Amount	Date Received	Amount	Total Amount Received
	\$0.00		\$0.00	
Name of Institution		Name of Institution		
Street Address		Street Address		
City	State	City	State	
	CT		CT	\$ 0.00

K. Miscellaneous Monetary Receipts not Considered Contributions

Name Doris Rojas	Date of Transaction 12/01/2010	Amount Received
Street Address 73 Mountford St Apt. 6-B	City Hartford	State CT
	Zip Code 06114	
Description To activate the account debit card		\$ 1.00

Name Doris Rojas	Date of Transaction 12/03/2010	Amount Received
Street Address 73 Mountford St Apt. 6-B	City Hartford	State CT
	Zip Code 06114	
Description To open the checking account		\$ 25.00

Name	Date of Transaction	Amount Received
Street Address	City	State
		CT
Description		\$ 0.00

Total Section K \$ 26.00

Summary of Other Monetary Receipts (Sections D-K)

Total Loans Received this Period (Section D)		0.00
Total Receipts from Entities other than Individuals or Other Committees (Section E)	+	0.00
Total Amount Transferred from Affiliated Business Treasury (Section F)	+	0.00
Total Amount Transferred from Affiliated Labor Union or Other Organization Treasury (Section G)	+	0.00
Total Amount of Personal Funds of the Candidate Received this Period (Section H)	+	0.00
Total Amount of Anonymous Contributions (Section I)	+	0.00
Total Amount of Interest from Deposits in Authorized Accounts (Section J)	+	0.00
Total Miscellaneous Monetary Receipts not Considered Contributions (Section K)	+	26.00
Total of Other Monetary Receipts (Add Sections D-K) (Enter total on Line 15 of Summary Page)		26.00

**II. FUNDRAISING EVENT ACTIVITY**

NAME OF COMMITTEE	FILING DUE DATE
Segarra for Mayor	01/10/2011

**L1. Fundraiser Event Information**

Fundraising Event # Date of Fundraiser	Letter	Description	Location: Street Address	City	State	Zip Code
12/17/2010		Cocktail Party	693 Park Street	Hartford	CT	06106

**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
---------

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

**II. FUNDRAISING EVENT ACTIVITY**

<b>NAME OF COMMITTEE</b>	<b>FILING DUE DATE</b>
Segarra for Mayor	01/10/2011

**L2. Proceeds from Tag Sale, Auction, or Other Sale of Donated Items**

Name of Purchaser Last Name <i>(Individuals ONLY)</i>	First	MI	Method of payment: <input type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card	<b>Aggregate Amount of Purchases</b>
Residential Street Address	City	State CT	Zip Code	Date Received
Items Purchased				\$0.00

Name of Purchaser Last Name <i>(Individuals ONLY)</i>	First	MI	Method of payment: <input type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card	<b>Aggregate Amount of Purchases</b>
Residential Street Address	City	State CT	Zip Code	Date Received
Items Purchased				\$0.00

Name of Purchaser Last Name <i>(Individuals ONLY)</i>	First	MI	Method of payment: <input type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card	<b>Aggregate Amount of Purchases</b>
Residential Street Address	City	State CT	Zip Code	Date Received
Items Purchased				\$0.00

Name of Purchaser Last Name <i>(Individuals ONLY)</i>	First	MI	Method of payment: <input type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card	<b>Aggregate Amount of Purchases</b>
Residential Street Address	City	State CT	Zip Code	Date Received
Items Purchased				\$0.00

Name of Purchaser Last Name <i>(Individuals ONLY)</i>	First	MI	Method of payment: <input type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card	<b>Aggregate Amount of Purchases</b>
Residential Street Address	City	State CT	Zip Code	Date Received
Items Purchased				\$0.00

Name of Purchaser Last Name <i>(Individuals ONLY)</i>	First	MI	Method of payment: <input type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card	<b>Aggregate Amount of Purchases</b>
Residential Street Address	City	State CT	Zip Code	Date Received
Items Purchased				\$0.00

Name of Purchaser Last Name <i>(Individuals ONLY)</i>	First	MI	Method of payment: <input type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card	<b>Aggregate Amount of Purchases</b>
Residential Street Address	City	State CT	Zip Code	Date Received
Items Purchased				\$0.00

Name of Purchaser Last Name <i>(Individuals ONLY)</i>	First	MI	Method of payment: <input type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card	<b>Aggregate Amount of Purchases</b>
Residential Street Address	City	State CT	Zip Code	Date Received
Items Purchased				\$0.00

Name of Purchaser Last Name <i>(Individuals ONLY)</i>	First	MI	Method of payment: <input type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card	<b>Aggregate Amount of Purchases</b>
Residential Street Address	City	State CT	Zip Code	Date Received
Items Purchased				\$0.00

<b>SUBTOTAL Section L2-This Page</b>				\$0.00
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<b>TOTAL of additional Section L2 Pages</b>				\$0.00
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<b>TOTAL OF ALL SMALL PURCHASES FROM TAG SALES, AUCTIONS OR OTHER SALES OF DONATED ITEMS</b> <i>(Enter total on Line 16b of Summary Page)</i>				\$0.00
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**II. FUNDRAISING EVENT ACTIVITY**

<b>NAME OF COMMITTEE</b> Segarra for Mayor	<b>FILING DUE DATE</b> 01/10/2011
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**L3. Purchases of Advertising in a Program Book (Municipal Candidate and Town Committees ONLY)**

Name of Purchaser	Business Entity	Date Received	Aggregate Purchases for All Events	Amount of Purchase
Street Address: _____ City: _____ State: <b>CT</b> Zip Code: _____	<input type="radio"/> Yes <input type="radio"/> No	Event # _____	\$0.00	\$0.00
Street Address: _____ City: _____ State: <b>CT</b> Zip Code: _____	<input type="radio"/> Yes <input type="radio"/> No	Event # _____	\$0.00	\$0.00
Street Address: _____ City: _____ State: <b>CT</b> Zip Code: _____	<input type="radio"/> Yes <input type="radio"/> No	Event # _____	\$0.00	\$0.00
Street Address: _____ City: _____ State: <b>CT</b> Zip Code: _____	<input type="radio"/> Yes <input type="radio"/> No	Event # _____	\$0.00	\$0.00
Street Address: _____ City: _____ State: <b>CT</b> Zip Code: _____	<input type="radio"/> Yes <input type="radio"/> No	Event # _____	\$0.00	\$0.00
Street Address: _____ City: _____ State: <b>CT</b> Zip Code: _____	<input type="radio"/> Yes <input type="radio"/> No	Event # _____	\$0.00	\$0.00
Street Address: _____ City: _____ State: <b>CT</b> Zip Code: _____	<input type="radio"/> Yes <input type="radio"/> No	Event # _____	\$0.00	\$0.00
Street Address: _____ City: _____ State: <b>CT</b> Zip Code: _____	<input type="radio"/> Yes <input type="radio"/> No	Event # _____	\$0.00	\$0.00
Street Address: _____ City: _____ State: <b>CT</b> Zip Code: _____	<input type="radio"/> Yes <input type="radio"/> No	Event # _____	\$0.00	\$0.00
Street Address: _____ City: _____ State: <b>CT</b> Zip Code: _____	<input type="radio"/> Yes <input type="radio"/> No	Event # _____	\$0.00	\$0.00
Street Address: _____ City: _____ State: <b>CT</b> Zip Code: _____	<input type="radio"/> Yes <input type="radio"/> No	Event # _____	\$0.00	\$0.00
Street Address: _____ City: _____ State: <b>CT</b> Zip Code: _____	<input type="radio"/> Yes <input type="radio"/> No	Event # _____	\$0.00	\$0.00
Street Address: _____ City: _____ State: <b>CT</b> Zip Code: _____	<input type="radio"/> Yes <input type="radio"/> No	Event # _____	\$0.00	\$0.00
Street Address: _____ City: _____ State: <b>CT</b> Zip Code: _____	<input type="radio"/> Yes <input type="radio"/> No	Event # _____	\$0.00	\$0.00

<b>SUBTOTAL Section L3-This Page</b>				\$0.00
<b>TOTAL of additional Section L3 Pages</b>				\$0.00
<b>TOTAL OF ALL PURCHASES OF ADVERTISING IN A PROGRAM BOOK (Enter total on Line 16c of Summary Page)</b>				\$0.00

**II. FUNDRAISING EVENT ACTIVITY**

<b>NAME OF COMMITTEE</b> Segarra for Mayor	<b>FILING DUE DATE</b> 01/10/2011
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**L4. In-Kind Donations Not Considered Contributions**

Name of Donor	Donation given by:	<input type="radio"/> Individual	<input type="radio"/> Business Entity	Fair Market Value of Donation
Street Address: _____ City: _____ State: <b>CT</b> Zip Code: _____	Aggregate value for this event	\$0.00		\$0.00
Description of donation: _____	Date Received: _____	Event # _____		
Street Address: _____ City: _____ State: <b>CT</b> Zip Code: _____	Aggregate value for this event	\$0.00		\$0.00
Description of donation: _____	Date Received: _____	Event # _____		
Street Address: _____ City: _____ State: <b>CT</b> Zip Code: _____	Aggregate value for this event	\$0.00		\$0.00
Description of donation: _____	Date Received: _____	Event # _____		
Street Address: _____ City: _____ State: <b>CT</b> Zip Code: _____	Aggregate value for this event	\$0.00		\$0.00
Description of donation: _____	Date Received: _____	Event # _____		
Street Address: _____ City: _____ State: <b>CT</b> Zip Code: _____	Aggregate value for this event	\$0.00		\$0.00
Description of donation: _____	Date Received: _____	Event # _____		
Street Address: _____ City: _____ State: <b>CT</b> Zip Code: _____	Aggregate value for this event	\$0.00		\$0.00
Description of donation: _____	Date Received: _____	Event # _____		
Street Address: _____ City: _____ State: <b>CT</b> Zip Code: _____	Aggregate value for this event	\$0.00		\$0.00
Description of donation: _____	Date Received: _____	Event # _____		
Street Address: _____ City: _____ State: <b>CT</b> Zip Code: _____	Aggregate value for this event	\$0.00		\$0.00
Description of donation: _____	Date Received: _____	Event # _____		
<b>SUBTOTAL Section L4-This Page</b>				\$0.00
<b>TOTAL of additional Section L4 Pages</b>				\$0.00
<b>TOTAL OF ALL IN-KIND DONATIONS NOT CONSIDERED CONTRIBUTIONS (Enter total on Line 21 of Summary Page)</b>				\$0.00

**III. NONMONETARY RECEIPTS**

<b>NAME OF COMMITTEE</b> Segarra for Mayor	<b>FILING DUE DATE</b> 01/10/2011
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**M. In-Kind Contributions**

<b>Name</b>				<b>Type of Contributor:</b> <input type="radio"/> Individual <input type="radio"/> Committee <input type="radio"/> Other (Applicable only to Referendum Committees)		<b>Fair Market Value of this Contribution</b>
<b>Street Address</b>		<b>City</b>	<b>State</b> CT	<b>Zip Code</b>		
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				
<b>Date Received</b>	Is this contribution associated with a fundraising event listed in Section L1? <i>If yes, list Event #</i>	<input type="radio"/> Yes <input type="radio"/> No	<b>Description of In-Kind Contribution</b>		<b>Aggregate contributions</b> \$0.00	\$0.00

<b>Name</b>				<b>Type of Contributor:</b> <input type="radio"/> Individual <input type="radio"/> Committee <input type="radio"/> Other (Applicable only to Referendum Committees)		<b>Fair Market Value of this Contribution</b>
<b>Street Address</b>		<b>City</b>	<b>State</b> CT	<b>Zip Code</b>		
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				
<b>Date Received</b>	Is this contribution associated with a fundraising event listed in Section L1? <i>If yes, list Event #</i>	<input type="radio"/> Yes <input type="radio"/> No	<b>Description of In-Kind Contribution</b>		<b>Aggregate contributions</b> \$0.00	\$0.00

<b>Name</b>				<b>Type of Contributor:</b> <input type="radio"/> Individual <input type="radio"/> Committee <input type="radio"/> Other (Applicable only to Referendum Committees)		<b>Fair Market Value of this Contribution</b>
<b>Street Address</b>		<b>City</b>	<b>State</b> CT	<b>Zip Code</b>		
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				
<b>Date Received</b>	Is this contribution associated with a fundraising event listed in Section L1? <i>If yes, list Event #</i>	<input type="radio"/> Yes <input type="radio"/> No	<b>Description of In-Kind Contribution</b>		<b>Aggregate contributions</b> \$0.00	\$0.00

<b>Name</b>				<b>Type of Contributor:</b> <input type="radio"/> Individual <input type="radio"/> Committee <input type="radio"/> Other (Applicable only to Referendum Committees)		<b>Fair Market Value of this Contribution</b>
<b>Street Address</b>		<b>City</b>	<b>State</b> CT	<b>Zip Code</b>		
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				
<b>Date Received</b>	Is this contribution associated with a fundraising event listed in Section L1? <i>If yes, list Event #</i>	<input type="radio"/> Yes <input type="radio"/> No	<b>Description of In-Kind Contribution</b>		<b>Aggregate contributions</b> \$0.00	\$0.00

<b>Name</b>				<b>Type of Contributor:</b> <input type="radio"/> Individual <input type="radio"/> Committee <input type="radio"/> Other (Applicable only to Referendum Committees)		<b>Fair Market Value of this Contribution</b>
<b>Street Address</b>		<b>City</b>	<b>State</b> CT	<b>Zip Code</b>		
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				
<b>Date Received</b>	Is this contribution associated with a fundraising event listed in Section L1? <i>If yes, list Event #</i>	<input type="radio"/> Yes <input type="radio"/> No	<b>Description of In-Kind Contribution</b>		<b>Aggregate contributions</b> \$0.00	\$0.00

<b>SUBTOTAL Section M-This Page</b>						\$0.00
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<b>TOTAL of additional Section M Pages</b>						\$0.00
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<b>TOTAL OF ALL IN-KIND CONTRIBUTIONS (Enter total on Line 22 of Summary Page)</b>						\$0.00
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**N. Refundable Deposit to Telephone Company** (NOTE: This section refers only to advances of deposits by individuals from personal funds to benefit the committee, not deposits made by the committee.)

<b>Last Name of Individual</b>		<b>First</b>	<b>MI</b>	<b>Date Deposit Made</b>		<b>Amount of Deposit</b>
<b>Residential Street Address</b>		<b>City</b>	<b>State</b> CT	<b>Zip Code</b>		
<b>Name of telephone company</b>						
<b>Street Address</b>		<b>City</b>	<b>State</b> CT	<b>Zip Code</b>		\$0.00

<b>Total Section N (Enter total on Line 23 of Summary Page)</b>						\$0.00
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**IV. EXPENDITURES**

NAME OF COMMITTEE				FILING DUE DATE			
Segarra for Mayor				01/10/2011			
<b>P. Expenses Paid by Committee</b>							
Name of Payee Bank of America				Date of Payment 12/22/2010		Method of Payment <input type="radio"/> Check # <input checked="" type="radio"/> Debit Card	Amount
Street Address 550 Farmington Ave		City Hartford	State CT	Zip Code 06105			
Purpose of Expenditure (by code) BNK		Description Checks Order				Event #	
Type of Expenditure (if applicable): <input type="radio"/> Coordinated with reimbursement sought <input checked="" type="radio"/> Coordinated without reimbursement sought <input type="radio"/> Independent <input type="radio"/> Organization (see Instructions)		Candidate(s) Name (if applicable)		Office Sought		<input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$ 90.00
A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D <input type="radio"/> E							
Name of Payee				Date of Payment		Method of Payment <input type="radio"/> Check # <input type="radio"/> Debit Card	Amount
Street Address		City	State CT	Zip Code			
Purpose of Expenditure (by code)		Description				Event #	
Type of Expenditure (if applicable): <input type="radio"/> Coordinated with reimbursement sought <input type="radio"/> Coordinated without reimbursement sought <input type="radio"/> Independent <input type="radio"/> Organization (see Instructions)		Candidate(s) Name (if applicable)		Office Sought		<input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$ 0.00
A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D <input type="radio"/> E							
Name of Payee				Date of Payment		Method of Payment <input type="radio"/> Check # <input type="radio"/> Debit Card	Amount
Street Address		City	State CT	Zip Code			
Purpose of Expenditure (by code)		Description				Event #	
Type of Expenditure (if applicable): <input type="radio"/> Coordinated with reimbursement sought <input type="radio"/> Coordinated without reimbursement sought <input type="radio"/> Independent <input type="radio"/> Organization (see Instructions)		Candidate(s) Name (if applicable)		Office Sought		<input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$ 0.00
A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D <input type="radio"/> E							
Name of Payee				Date of Payment		Method of Payment <input type="radio"/> Check # <input type="radio"/> Debit Card	Amount
Street Address		City	State CT	Zip Code			
Purpose of Expenditure (by code)		Description				Event #	
Type of Expenditure (if applicable): <input type="radio"/> Coordinated with reimbursement sought <input type="radio"/> Coordinated without reimbursement sought <input type="radio"/> Independent <input type="radio"/> Organization (see Instructions)		Candidate(s) Name (if applicable)		Office Sought		<input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$ 0.00
A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D <input type="radio"/> E							
Name of Payee				Date of Payment		Method of Payment <input type="radio"/> Check # <input type="radio"/> Debit Card	Amount
Street Address		City	State CT	Zip Code			
Purpose of Expenditure (by code)		Description				Event #	
Type of Expenditure (if applicable): <input type="radio"/> Coordinated with reimbursement sought <input type="radio"/> Coordinated without reimbursement sought <input type="radio"/> Independent <input type="radio"/> Organization (see Instructions)		Candidate(s) Name (if applicable)		Office Sought		<input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$ 0.00
A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D <input type="radio"/> E							
Name of Payee				Date of Payment		Method of Payment <input type="radio"/> Check # <input type="radio"/> Debit Card	Amount
Street Address		City	State CT	Zip Code			
Purpose of Expenditure (by code)		Description				Event #	
Type of Expenditure (if applicable): <input type="radio"/> Coordinated with reimbursement sought <input type="radio"/> Coordinated without reimbursement sought <input type="radio"/> Independent <input type="radio"/> Organization (see Instructions)		Candidate(s) Name (if applicable)		Office Sought		<input type="checkbox"/> Supported <input type="checkbox"/> Opposed	\$ 0.00
A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D <input type="radio"/> E							
<b>SUBTOTAL Section P-This Page</b>						\$90.00	
<b>TOTAL of additional Section P. Pages</b>						\$0.00	
<b>TOTAL OF ALL EXPENSES PAID BY COMMITTEE (Enter total on Line 19 of Summary Page)</b>						\$90.00	

**IV. EXPENDITURES**

<b>NAME OF COMMITTEE</b> Segarra for Mayor	<b>FILING DUE DATE</b> 01/10/2011
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**Q. Campaign Expenses Paid by Candidate**

Name of Payee (Name of Vendor who candidate paid directly)	Date of Payment	Is Reimbursement Claimed?	Amount								
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">Street Address</td> <td style="width:15%;">City</td> <td style="width:10%;">State CT</td> <td style="width:15%;">Zip Code</td> </tr> <tr> <td colspan="2">Purpose of Expenditure (by code)</td> <td colspan="2">Description</td> </tr> </table>	Street Address	City	State CT	Zip Code	Purpose of Expenditure (by code)		Description			<input type="radio"/> Yes <input type="radio"/> No	\$0.00
Street Address	City	State CT	Zip Code								
Purpose of Expenditure (by code)		Description									
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">Street Address</td> <td style="width:15%;">City</td> <td style="width:10%;">State CT</td> <td style="width:15%;">Zip Code</td> </tr> <tr> <td colspan="2">Purpose of Expenditure (by code)</td> <td colspan="2">Description</td> </tr> </table>	Street Address	City	State CT	Zip Code	Purpose of Expenditure (by code)		Description			<input type="radio"/> Yes <input type="radio"/> No	\$0.00
Street Address	City	State CT	Zip Code								
Purpose of Expenditure (by code)		Description									
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">Street Address</td> <td style="width:15%;">City</td> <td style="width:10%;">State CT</td> <td style="width:15%;">Zip Code</td> </tr> <tr> <td colspan="2">Purpose of Expenditure (by code)</td> <td colspan="2">Description</td> </tr> </table>	Street Address	City	State CT	Zip Code	Purpose of Expenditure (by code)		Description			<input type="radio"/> Yes <input type="radio"/> No	\$0.00
Street Address	City	State CT	Zip Code								
Purpose of Expenditure (by code)		Description									
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">Street Address</td> <td style="width:15%;">City</td> <td style="width:10%;">State CT</td> <td style="width:15%;">Zip Code</td> </tr> <tr> <td colspan="2">Purpose of Expenditure (by code)</td> <td colspan="2">Description</td> </tr> </table>	Street Address	City	State CT	Zip Code	Purpose of Expenditure (by code)		Description			<input type="radio"/> Yes <input type="radio"/> No	\$0.00
Street Address	City	State CT	Zip Code								
Purpose of Expenditure (by code)		Description									
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">Street Address</td> <td style="width:15%;">City</td> <td style="width:10%;">State CT</td> <td style="width:15%;">Zip Code</td> </tr> <tr> <td colspan="2">Purpose of Expenditure (by code)</td> <td colspan="2">Description</td> </tr> </table>	Street Address	City	State CT	Zip Code	Purpose of Expenditure (by code)		Description			<input type="radio"/> Yes <input type="radio"/> No	\$0.00
Street Address	City	State CT	Zip Code								
Purpose of Expenditure (by code)		Description									
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">Street Address</td> <td style="width:15%;">City</td> <td style="width:10%;">State CT</td> <td style="width:15%;">Zip Code</td> </tr> <tr> <td colspan="2">Purpose of Expenditure (by code)</td> <td colspan="2">Description</td> </tr> </table>	Street Address	City	State CT	Zip Code	Purpose of Expenditure (by code)		Description			<input type="radio"/> Yes <input type="radio"/> No	\$0.00
Street Address	City	State CT	Zip Code								
Purpose of Expenditure (by code)		Description									
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">Street Address</td> <td style="width:15%;">City</td> <td style="width:10%;">State CT</td> <td style="width:15%;">Zip Code</td> </tr> <tr> <td colspan="2">Purpose of Expenditure (by code)</td> <td colspan="2">Description</td> </tr> </table>	Street Address	City	State CT	Zip Code	Purpose of Expenditure (by code)		Description			<input type="radio"/> Yes <input type="radio"/> No	\$0.00
Street Address	City	State CT	Zip Code								
Purpose of Expenditure (by code)		Description									
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">Street Address</td> <td style="width:15%;">City</td> <td style="width:10%;">State CT</td> <td style="width:15%;">Zip Code</td> </tr> <tr> <td colspan="2">Purpose of Expenditure (by code)</td> <td colspan="2">Description</td> </tr> </table>	Street Address	City	State CT	Zip Code	Purpose of Expenditure (by code)		Description			<input type="radio"/> Yes <input type="radio"/> No	\$0.00
Street Address	City	State CT	Zip Code								
Purpose of Expenditure (by code)		Description									
<b>SUBTOTAL Section Q-This Page</b>			\$0.00								
<b>TOTAL of additional Section Q Pages</b>			\$0.00								
<b>TOTAL OF ALL EXPENSES PAID BY CANDIDATE (Enter total on Line 26 of Summary Page)</b>			\$0.00								

**IV. EXPENDITURES**

<b>NAME OF COMMITTEE</b>	<b>FILED DUE DATE</b>
Segarra for Mayor	01/10/2011

**R. Expenses Incurred on Committee Credit Card**

<b>Name of Issuing Institution</b>	<b>Type of Credit Card:</b>
	<input type="radio"/> Visa <input type="radio"/> Master Card <input type="radio"/> Discover <input type="radio"/> American Express <input type="radio"/> Other

Name of Vendor	Date of Transaction	<b>Amount</b>
Street Address		
City		
State		
Zip Code		
Purpose of Expenditure (by code)	Description	Event #
		\$0.00

Name of Vendor	Date of Transaction	<b>Amount</b>
Street Address		
City		
State		
Zip Code		
Purpose of Expenditure (by code)	Description	Event #
		\$0.00

Name of Vendor	Date of Transaction	<b>Amount</b>
Street Address		
City		
State		
Zip Code		
Purpose of Expenditure (by code)	Description	Event #
		\$0.00

Name of Vendor	Date of Transaction	<b>Amount</b>
Street Address		
City		
State		
Zip Code		
Purpose of Expenditure (by code)	Description	Event #
		\$0.00

Name of Vendor	Date of Transaction	<b>Amount</b>
Street Address		
City		
State		
Zip Code		
Purpose of Expenditure (by code)	Description	Event #
		\$0.00

Name of Vendor	Date of Transaction	<b>Amount</b>
Street Address		
City		
State		
Zip Code		
Purpose of Expenditure (by code)	Description	Event #
		\$0.00

Name of Vendor	Date of Transaction	<b>Amount</b>
Street Address		
City		
State		
Zip Code		
Purpose of Expenditure (by code)	Description	Event #
		\$0.00

Name of Vendor	Date of Transaction	<b>Amount</b>
Street Address		
City		
State		
Zip Code		
Purpose of Expenditure (by code)	Description	Event #
		\$0.00

<b>SUBTOTAL Section R-This Page</b>		\$0.00
<b>TOTAL of additional Section R Pages</b>		\$0.00
<b>TOTAL OF ALL EXPENSES INCURRED ON COMMITTEE CREDIT CARD (Enter total on Line 27 of Summary Page)</b>		\$0.00

IV. EXPENDITURES

NAME OF COMMITTEE Segarra for Mayor	FILING DUE DATE 01/10/2011
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**S. Expenses Incurred by Committee but Not Paid During this Period**

Name of Creditor		Date Incurred		Amount Incurred (Estimate or Actual)
Street Address		Event #		
City	State CT	Zip Code	Candidate(s) Name (if applicable) Office Sought	
Purpose of Expenditure (by code)	Type of Expenditure (if applicable): <input type="radio"/> Coordinated with reimbursement sought <input type="radio"/> Coordinated without reimbursement sought <input type="radio"/> Independent <input type="radio"/> Organization (see Instructions) <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D <input type="radio"/> E		<input type="radio"/> Supported <input type="radio"/> Opposed	\$0.00
Description				

Name of Creditor		Date Incurred		Amount Incurred (Estimate or Actual)
Street Address		Event #		
City	State CT	Zip Code	Candidate(s) Name (if applicable) Office Sought	
Purpose of Expenditure (by code)	Type of Expenditure (if applicable): <input type="radio"/> Coordinated with reimbursement sought <input type="radio"/> Coordinated without reimbursement sought <input type="radio"/> Independent <input type="radio"/> Organization (see Instructions) <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D <input type="radio"/> E		<input type="radio"/> Supported <input type="radio"/> Opposed	\$0.00
Description				

Name of Creditor		Date Incurred		Amount Incurred (Estimate or Actual)
Street Address		Event #		
City	State CT	Zip Code	Candidate(s) Name (if applicable) Office Sought	
Purpose of Expenditure (by code)	Type of Expenditure (if applicable): <input type="radio"/> Coordinated with reimbursement sought <input type="radio"/> Coordinated without reimbursement sought <input type="radio"/> Independent <input type="radio"/> Organization (see Instructions) <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D <input type="radio"/> E		<input type="radio"/> Supported <input type="radio"/> Opposed	\$0.00
Description				

Name of Creditor		Date Incurred		Amount Incurred (Estimate or Actual)
Street Address		Event #		
City	State CT	Zip Code	Candidate(s) Name (if applicable) Office Sought	
Purpose of Expenditure (by code)	Type of Expenditure (if applicable): <input type="radio"/> Coordinated with reimbursement sought <input type="radio"/> Coordinated without reimbursement sought <input type="radio"/> Independent <input type="radio"/> Organization (see Instructions) <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D <input type="radio"/> E		<input type="radio"/> Supported <input type="radio"/> Opposed	\$0.00
Description				

<b>SUBTOTAL Section S-This Page</b>	\$0.00
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<b>TOTAL of additional Section S Pages</b>	\$0.00
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<b>TOTAL OF ALL EXPENSES INCURRED BY COMMITTEE DURING THIS PERIOD BUT NOT PAID</b> (Enter total on Line 28 of Summary Page)	\$0.00
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Previously reported Expenses Unpaid and still Outstanding	+	\$0.00
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<b>TOTAL OF ALL EXPENSES INCURRED BY COMMITTEE BUT NOT PAID</b> (Enter total on Line 28a of Summary Page)	\$0.00
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IV. EXPENDITURES

NAME OF COMMITTEE Segarra for Mayor	FILING DUE DATE 01/10/2011
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**T. Itemization of Reimbursements to Committee Workers and Consultants**

Last Name of Worker/Consultant	First	MI	Date of Payment	Method of Payment	Amount
Secondary Payee			Purpose of Expenditure (by code)	<input type="checkbox"/> Check # <input type="checkbox"/> Debit Card	
Street Address		City	State CT	Zip Code	
Description					
Type of Expenditure (if applicable): <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input checked="" 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					

Last Name of Worker/Consultant	First	MI	Date of Payment	Method of Payment	Amount
Secondary Payee			Purpose of Expenditure (by code)	<input type="checkbox"/> Check # <input type="checkbox"/> Debit Card	
Street Address		City	State CT	Zip Code	
Description					
Type of Expenditure (if applicable): <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input checked="" 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					

Last Name of Worker/Consultant	First	MI	Date of Payment	Method of Payment	Amount
Secondary Payee			Purpose of Expenditure (by code)	<input type="checkbox"/> Check # <input type="checkbox"/> Debit Card	
Street Address		City	State CT	Zip Code	
Description					
Type of Expenditure (if applicable): <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input checked="" 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					

Last Name of Worker/Consultant	First	MI	Date of Payment	Method of Payment	Amount
Secondary Payee			Purpose of Expenditure (by code)	<input type="checkbox"/> Check # <input type="checkbox"/> Debit Card	
Street Address		City	State	Zip Code	
Description					
Type of Expenditure (if applicable): <input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input checked="" 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 T-This Page	\$0.00
TOTAL of additional Section T Pages	\$0.00
<b>TOTAL OF ALL REIMBURSEMENTS TO COMMITTEE WORKERS AND CONSULTANTS</b>	<b>\$0.00</b>