

SEEC FORM 20

Itemized Campaign Finance Disclosure Statement

CONNECTICUT STATE ELECTIONS ENFORCEMENT COMMISSION

Rev. 1/08



Electronic Filing
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SUMMARY PAGE

1. NAME OF COMMITTEE

East Haven Republican Town Committee

2. TREASURER NAME

Title	First	MI	Last	Suffix
	James	N	Farrell	

3. TREASURER ADDRESS

Street Address	City	State	Zip Code
7 Erico Dr	East Haven	CT	06512

4. ELECTION DATE	5. OFFICE SOUGHT (if applicable)	6. DISTRICT CODE (if applicable)

7. CANDIDATE NAME

Title	First	MI	Last	Suffix

8. TYPE OF REPORT

April 10 Filing - Original

9. PERIOD COVERED

Beginning Date	Ending Date
01/01/2011	thru 03/31/2011

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.

Electronic Filing
SIGNATURE

James Farrell
PRINT NAME OF THE SIGNER

04/11/2011 10:05:34 am
DATE CERTIFIED

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

RECEIVED FOR FILING
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EAST HAVEN, CONN.

TOWN CLERK

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	
East Haven Republican Town Committee	Original 04/11/2011	
	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		\$5,576.59
12. Balance on hand at the beginning of Reporting Period	\$5,576.59	
13. Contributions received from Individuals (Section A and B)	\$0.00	\$0.00
14. Receipts from Other Committees (Sections C1 + C2)	\$0.00	\$0.00
15. Other Monetary Receipts (Section D-K)	\$0.00	\$0.00
16a. Total Small Food and Beverage Receipts at Fair (Section L1)	\$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)	\$0.00	\$0.00
17. Total Monetary Receipts (add totals for lines 13-16c)	\$0.00	\$0.00
18. Subtotals (add totals in line 12 + line 17 in Column A and in line 11 + 17 in Column B)	\$5,576.59	\$5,576.59
19. Expenses Paid by Committee (Section P)	\$50.00	\$50.00
20. Balance on hand at close of Reporting Period (Subtract line 19 from line 18)	\$5,526.59	\$5,526.59
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(s)	\$0.00	\$0.00
25c. - Payments on Loan(s)	\$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 (Section A-K)									
NAME OF COMMITTEE								FILING DUE DATE	
East Haven Republican Town Committee								Original 04/11/2011	
A. Total Contributions from Small Contributors-Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>						Subtotal Section			
B. Itemized Contributions from Individuals									
Last Name		First Name		MI	Name of Employer			Amount of Contribution	
Residential Street Address		City		State	Zip Code	Principal Occupation			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		Yes	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000?					Yes	No
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event #		Yes	Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:					Yes	No
Method of Contribution		Date Received			Aggregate Contribution				
Cash	Personal Check	Credit/Debit Card	Payroll Deduction	Money Order					
Total of Section B									
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) <i>(Total on Line 14 of Summary Page)</i>									

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE	FILING DUE DATE
East Haven Republican Town Committee	Original 04/11/2011

C1. Contributions from Other Committees

Name of Committee	Name of Treasurer

Address		Is this contribution associated with a fundraising event listed in Section L1?		Yes If yes, list Event #	No	Amount of Contribution
City	State	Zip Code	Date Received	Aggregate Contributions		

Total of Section C1

I. MONETARY RECEIPTS (Section A-I)

NAME OF COMMITTEE	FILING DUE DATE
East Haven Republican Town Committee	Original 04/11/2011
C2. Reimbursements, Payments, or Surplus Distributions from other Committees	

Name of Committee			Name of Treasurer	
Address			Date Received	Amount of Receipt
City	State	Zip Code	Reimbursement for shared expense Payment for goods and services Surplus Distribution	
Total of Section C2				

I. MONETARY RECEIPTS (Section A-K)

NAME OF COMMITTEE	FILING DUE DATE
East Haven Republican Town Committee	Original 04/11/2011

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	Zip Code			
Name of Cosigner/Guarantor				Bank	Yes No	
				Candidate		
				Individual		
Name of Cosigner/Guarantor				Other	Yes No	
				Committee		
Street Address	City	State	Zip Code	Date Received		
Total of Section D						

I. MONETARY RECEIPTS (Section A-K)				
NAME OF COMMITTEE				FILING DUE DATE
East Haven Republican Town Committee				Original 04/11/2011
E. Receipts from Entities other than Individuals or Other Committees (Referendum Committees ONLY)				
Name				
Street Address			Date Received	Amount Received
City	State	Zip Code	Aggregate Contributions	
Total of Section E				

I. MONETARY RECEIPTS (Section A-I)		
NAME OF COMMITTEE		FILING DUE DATE
East Haven Republican Town Committee		Original 04/11/2011
F. Amount Transferred from Affiliated Business Treasury (Business Entity Committees ONLY)		
Is this transaction associated with a fundraising event listed in Section L1? Yes No If yes, list Event #		Date of Receipt Amount
		Total of Section F

I. MONETARY RECEIPTS (Section A-I)	
NAME OF COMMITTEE	FILING DUE DATE
East Haven Republican Town Committee	Original 04/11/2011
G. Amount Transferred from Affiliated Labor Union or Other Organization Treasury (Organization Committees ONLY)	
Date of Receipt	Amount
Total of Section G	

I. MONETARY RECEIPTS (Section A-K)			
NAME OF COMMITTEE			FILING DUE DATE
East Haven Republican Town Committee			Original 04/11/2011
H. Personal Funds of the Candidate Received this Period (Candidate Committees ONLY)			
Date Received	Amount	Method of Payment	
		Cash	Personal Check Credit/Debit Card
			Total of Section H

I. MONETARY RECEIPTS (Section A-K)					
NAME OF COMMITTEE					FILING DUE DATE
East Haven Republican Town Committee					Original 04/11/2011
I. Anonymous Contributions					
Date Received	\$ 1 bills	\$ 5 bills	\$ 10 bill	coins	Amount
Total of Section I					

I. Monetary Receipts (Section A-I)				
NAME OF COMMITTEE				FILING DUE DATE
East Haven Republican Town Committee				Original 04/11/2011
J. Interest from Deposits in Authorized Accounts				
Name of Institution		Date Received		Amount Received
Street Address	City	State	Zip Code	
Total of Section J				

I. MONETARY RECEIPTS (Section A-K)					
NAME OF COMMITTEE				FILING DUE DATE	
East Haven Republican Town Committee				Original 04/11/2011	
K. Miscellaneous Monetary Receipts not Considered Contributions					
Name			Date of Transaction		Amount Received
Street Address		City	State	Zip Code	
Description					
Total of Section K					

II. FUNDRAISING EVENT ACTIVITY

NAME OF COMMITTEE					FILING DUE DATE	
East Haven Republican Town Committee					Original 04/11/2011	
L1. Fundraiser Event Information						
Fundraising Event # <small>Date of Fundraiser</small>	<small>Letter</small>	Description	Location: Street Address	City	State	Zip Code
<i>Subpart 1: (All Committees)</i>						
Was this fundraising event hosted at a personal residence?				Yes	No	<i>If yes, go to Section L4</i>
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	No	<i>If yes, go to Section L4</i>
Was this fundraiser a tag sale, auction, or other sale of donated items?				Yes	No	<i>If yes, go to Section L2</i>
<i>Subpart 2: (Town Committees and Municipal Candidate Committees ONLY)</i>						
Were there purchases of advertising space in a program book associated with this fundraiser?				Yes	No	<i>If yes, go to Section L3</i>
<i>Subpart 3: (Town Committees ONLY)</i>						
Did your committee sell food or beverage at a fair or similar mass gathering held within the state?				Yes	No	<i>If yes, enter Total Receipts from small purchases</i>
Total of Section L1						

II. FUNDRAISING EVENT ACTIVITY								
NAME OF COMMITTEE						FILING DUE DATE		
East Haven Republican Town Committee						Original 04/11/2011		
L2. Proceeds from Tag Sale, Auction, or Other Sale of Donated Items								
Name of the Purchaser <i>(Individuals ONLY)</i> Last Name		First Name		MI	Method of payment: Cash Personal Check Credit/Debit Card			Aggregate Amount of Purchases
Residential Street Address		City		State	Zip Code	Date Received	Event #	
Items Purchased								
							Total of Section L2	

II. FUNDRAISING EVENT ACTIVITY

NAME OF COMMITTEE	FILING DUE DATE
East Haven Republican Town Committee	Original 04/11/2011

L3. Purchases of Advertising in a Program Book (Municipal Candidate and Town Committees ONLY)

Name of Purchaser for All Events	Business Entity		Event #	Date Received	Amount of Purchase
	Yes	No			
Street Address	City		State	Zip Code	Aggregate Purchases for All Events

Total of Section L3

II. FUNDRAISING EVENT ACTIVITY						
NAME OF COMMITTEE					FILING DUE DATE	
East Haven Republican Town Committee					Original 04/11/2011	
I4. In-Kind Donations Not Considered Contributions						
Name of the Donor				Donation given by:		Fair Market Value of Donation
				Individual Business Entity		
Street Address		City		Aggregate value for this event		
		State		Zip Code		
Description of Donation			Date Received		Event #	
Total of Section I4						

III. NONMONETARY RECEIPTS

NAME OF COMMITTEE

FILING DUE DATE

East Haven Republican Town Committee

Original 04/11/2011

M. In-Kind Contributions

Name		Type of Contributor:		Fair Market Value of this Contribution
Street Address		Individual Committee Other		
City		Date Received		
State	Zip Code	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more	Yes No	
Is Contributor a lobbyist, spouse, or dependent child of a lobbyist?		Is contributor a principal of state contractor or prospective state contractor?		
Yes No		Yes No		
Is this contribution associated with a fundraising event listed in Section J1?		Description of In-Kind Contribution		Aggregate contributions
Yes No				
If yes, list Event#				
Total of Section M				

III. NONMONETARY RECEIPTS					
NAME OF COMMITTEE					FILING DUE DATE
East Haven Republican Town Committee					Original 04/11/2011
N. Refundable Deposit to Telephone Company					
Last Name (Individuals Only)	First Name	MI	Date Received	Amount of Deposit	
Residential Street Address	City	State	Zip Code		
Name of Telephone company					
Street Address	City	State	Zip Code		
Total of Section N					

III. NONMONETARY RECEIPTS							
NAME OF COMMITTEE				FILING DUE DATE			
East Haven Republican Town Committee				Original 04/11/2011			
O. Non-Monetary Receipts of Organization Expenditures Made By Legislative Leadership, Legislative Caucus, and Party Committee							
Name of Committee			Name of Treasurer				
Street Address			Date Notice Received	Fair Market Value of Donation			
City	State	Zip Code	Aggregate Donations				
Description of Donation			Purpose of Expenditure				
			A	B	C	D	E
Total of Section O							

IV. EXPENDITURES							
NAME OF COMMITTEE						FILING DUE DATE	
East Haven Republican Town Committee						Original 04/11/2011	
P. Expenses Paid By Committee							
Name of Payee				Date of Payment		Method of Payment	Amount
Riverside Co 6				02/07/2011		<input checked="" type="checkbox"/> Check # 520	
Street Address		City		State	Zip Code	Purpose of Expenditure (by code) Misc *	
Short Beach Road		East Haven		CT	06512	<input type="checkbox"/> Debit Card	
Description						Event #	
Hall Rental for Meeting							
Type of Expenditure (if applicable)			Candidate(s) Name (if applicable)		Office Sought	<input type="checkbox"/> Supported	\$50.00
<input type="checkbox"/> Coordinated with reimbursement sought <input type="checkbox"/> Coordinated without reimbursement sought <input type="checkbox"/> Independent <input type="checkbox"/> Organization (see Instructions) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E						<input type="checkbox"/> Opposed	
Total of Section P						\$50.00	

IV. EXPENDITURES						
NAME OF COMMITTEE					FILING DUE DATE	
East Haven Republican Town Committee					Original 04/11/2011	
Q. Campaign Expenses Paid By Candidate						
Name of Payee (Name of Vendor who candidate paid directly)		Date of Payment	Purpose of Expenditure (by code)	Is Reimbursement Claimed?		Amount
				Yes	No	
Street Address	City	State	Zip Code	Event #		
Description						
					Total of Section Q	

IV. EXPENDITURES						
NAME OF COMMITTEE					FILING DUE DATE	
East Haven Republican Town Committee					Original 04/11/2011	
R. Expenses Incurred on Committee Credit Card						
Name of Issuing Institution			Type of Credit Card:			
			Visa Master Card Discover American Express Other			
Name of Vendor			Purpose of Expenditure (by code)		Date of Transaction	Amount
Street Address	City		State	Zip Code	Event #	
Description						
Total of Section R						

IV. EXPENDITURES						
NAME OF COMMITTEE					FILING DUE DATE	
East Haven Republican Town Committee					Original 04/11/2011	
S. Expenses Incurred By Committee but Not Paid During this Period						
Name of Creditor				Event #	Date Incurred	Amount Incurred (Estimate or Actual)
Street Address	City	State	Zip Code	Purpose of Expenditure (by code)		
Description						
Type of Expenditure (if applicable)		Candidate(s) Name (if applicable)		Office Sought	Supported	
Coordinated with reimbursement sought Coordinated without reimbursement sought Independent Organization (see Instructions)					Opposed	
A	B	C	D	E		
Total of Section S						

IV. EXPENDITURES					
NAME OF COMMITTEE					FILING DUE DATE
East Haven Republican Town Committee					Original 04/11/2011
T. Itemization of Reimbursements to Committee Workers and Consultants					
Name of Worker/Consultant		Date of Payment	Method of Payment		Amount
Secondary Payee		Purpose of Expenditure	Check #		
Street Address		City	State	Zip Code	Debit Card
Description					
Type of Expenditure (if applicable)		Other Candidate(s) Name	Office Sought	Supported	
Coordinated with reimbursement sought Coordinated without reimbursement sought Independent Organization (see Instructions)				Opposed	
A	B	C	D	E	
Total of Section T					