# Statement of Financial Interests for 2025

Departure Date :

## PERSONAL INFORMATION

| First Name and Middle initial: | | Last Name: |
|---|---|---|
| David J | | Rutigliano |
| **Street Address 1:** | | **Street Address 2:** |
| 52 Stemway Rd | | |
| **City:** | **State:** | **Zip:** |
| Trumbull | CONNECTICUT | 06611 |

☐ **If you are claiming an exemption from disclosure for this property under FOIA**

| Phone Number: | Email Address: |
|---|---|
| (860) 240-8700 | sbcfood@hotmail.com |

## OCCUPATION

☐ **Current Dual Employment**

| Current State Position: | Membership: |
|---|---|
| Connecticut General Assembly | Representative - Republican |

**Name of District:**

123

☐ **If you also hold or have held a different State position than the position above during the period for which this filing is being made,and that position also required the filing of the SFI form**

☐ **Previous Dual Employment**

| Previous State Position: | Membership: |
|---|---|
| | |

**Name of Agency:**

## SPOUSE

☐ **If you do not have a Spouse**

| **Spouse First Name and Initial:** | **Spouse Last Name:** |
|---|---|
| Michele A | Rutigliano |

## FAMILY MEMBERS (CHILDREN)

☐ **If you do not have dependent children**

| **Child First Name and Initial:** | **Child Last Name:** |
|---|---|
| Child | *** |
| Child | *** |

## REAL PROPERTY

☐ **If you do not own a property**

☐ **If you are claiming an exemption from disclosure for this property under FOIA**

| **Street Address 1:** | | **Street Address 2:** |
|---|---|---|
| 52 Stemway Rd | | |
| **City:** | **State:** | **Zip:** |
| Trumbull | CONNECTICUT | 06611 |

**Country:**

United States

**Owner or Beneficiary:**

David & Michele Rutigliano

☑ **Held Directly?:**

**Held By:** Note: If the property is not held directly, please list the corporation, partnership, or trust that holds the property for the benefit of you, your spouse, or dependent children residing with you.

☐ **If you are claiming an exemption from disclosure for this property under FOIA**

| **Street Address 1:** | | **Street Address 2:** |
|---|---|---|
| 850 West main St | | |
| **City:** | **State:** | **Zip:** |
| Branford | CONNECTICUT | 06405 |

**Country:**

**Owner or Beneficiary:**

David Rutigliano

☐ **Held Directly?:**

**Held By:** Note: If the property is not held directly, please list the corporation, partnership, or trust that holds the property for the benefit of you, your spouse, or dependent children residing with you.

Shoreline Real Estate LLC

## BUSINESSES

## BUSINESS (WITH WHICH ASSOCIATED)

☐ **If you are not associated with any business**

**Name of Business:**

Stamford Brewing Co LLC

**Street Address 1:**

151 Summer St

**Street Address 2:**

**City:**

Stamford

**State:**

CONNECTICUT

**Zip:**

06902

**Nature of Business:**

BrewPub

**Nature of Interest:**

owner

**Interest Held By:**

Self

## Business Affiliation

**Category of Affiliated Business/Individual:**

No affiliation

**Name of Business:**

Nutmeg Brewing Restaurant Group LLC

**Street Address 1:**

2600 Post Rd

**Street Address 2:**

**City:**

southport

**State:**

CONNECTICUT

**Zip:**

06890

**Nature of Business:**

Brew Pub

**Nature of Interest:**

owner

**Interest Held By:**

Self

## Business Affiliation

**Category of Affiliated Business/Individual:**

No affiliation

**Name of Business:**

Geaux Fish LLC

**Street Address 1:**

68 Washington St

**Street Address 2:**

**City:**

Norwalk

**State:**

CONNECTICUT

**Zip:**

06854

**Nature of Business:**

Restaurant

**Nature of Interest:**

Owner

**Interest Held By:**

Self

## Business Affiliation

**Category of Affiliated Business/Individual:**

No affiliation

**Name of Business:**

Mallard Group LLC

**Street Address 1:**

3694 main st

**Street Address 2:**

**City:**

Stratford

**State:**

CONNECTICUT

**Zip:**

06614

**Nature of Business:**

Restaurant

**Nature of Interest:**

owner

**Interest Held By:**

Self

## Business Affiliation

**Category of Affiliated Business/Individual:**

No affiliation

**Name of Business:**

Milford Brewing Co LLC

**Street Address 1:**

33 New Haven Ave

**Street Address 2:**

**City:** Milford

**State:** CONNECTICUT

**Zip:** 06460

**Nature of Business:**

Restaurant

**Nature of Interest:**

owner

**Interest Held By:**

Self

## Business Affiliation

**Category of Affiliated Business/Individual:**

No affiliation

**Name of Business:**

shoreline brewing co

**Street Address 1:**

850 West Main St

**Street Address 2:**

**City:** Branford

**State:** CONNECTICUT

**Zip:** 06805

**Nature of Business:**

Restaurant

**Nature of Interest:**

owner

**Interest Held By:**

Self

## Business Affiliation

**Category of Affiliated Business/Individual:**

No affiliation

**Name of Business:**

SBC Real Estate

**Street Address 1:**

819 Bridgeport Ave

**Street Address 2:**

**City:**

Shelton

**State:**

CONNECTICUT

**Zip:**

06484

**Nature of Business:**

Real Estate

**Nature of Interest:**

owner

**Interest Held By:**

Self

## Business Affiliation

**Category of Affiliated Business/Individual:**

No affiliation

**Name of Business:**

DDR Restaurant Group LLC

**Street Address 1:**

819 Bridgeport Ave

**Street Address 2:**

**City:**

Shelton

**State:**

CONNECTICUT

**Zip:**

06484

**Nature of Business:**

Charter

**Nature of Interest:**

Owner

**Interest Held By:**

Self

## Business Affiliation

**Category of Affiliated Business/Individual:**

No affiliation

**Name of Business:**

SBC Bottling LLC

**Street Address 1:**

819 Bridgeport Ave

**Street Address 2:**

**City:** Shelton

**State:** CONNECTICUT

**Zip:** 06484

**Nature of Business:**

Beer Manufacture & Bottling

**Nature of Interest:**

Owner

**Interest Held By:**

Spouse

## Business Affiliation

**Category of Affiliated Business/Individual:**

No affiliation

**Name of Business:**

Geaux Fish Fairfield LLC

**Street Address 1:**

85 MIll Plain Rd

**Street Address 2:**

**City:** Fairfield

**State:** CONNECTICUT

**Zip:** 06824

**Nature of Business:**

Restaurant

**Nature of Interest:**

Owner

**Interest Held By:**

Self

## Business Affiliation

**Category of Affiliated Business/Individual:**

No affiliation

**Name of Business:**

Mighty Duck LLC

**Street Address 1:**

4244 Madison ave

**Street Address 2:**

**City:** Trumbull

**State:** CONNECTICUT

**Zip:** 06611

**Nature of Business:**

Restaurant

**Nature of Interest:**

Owner

**Interest Held By:**

Self

## Business Affiliation

**Category of Affiliated Business/Individual:**

No affiliation

**Name of Business:**

Quarry Duck llc

**Street Address 1:**

360 Center Rock Green

**Street Address 2:**

**City:** Oxford

**State:** CONNECTICUT

**Zip:** 06478

**Nature of Business:**

Restaurant

**Nature of Interest:**

owner

**Interest Held By:**

Self

## Business Affiliation

**Category of Affiliated Business/Individual:**

No affiliation

**Name of Business:**

Shoreline Real Estate llc

**Street Address 1:**

819 Bridgeport Avenue, Shelton, CT, USA

**Street Address 2:**

**City:**

Shelton

**State:**

CONNECTICUT

**Zip:**

06484

**Nature of Business:**

Real Estate

**Nature of Interest:**

member

**Interest Held By:**

Self

## Business Affiliation

**Category of Affiliated Business/Individual:**

No affiliation

## BUSINESSES

## TRUSTS

☑ **If you are not part of a trust**

## INCOME SOURCES

☐ **If you do not have an Income Source(s)**

**Type Of Income Received:**

Salary/Wages

**Name of Employer or Other Source:**

milford brewering co

**Recipient:**

Self

**Type Of Income Received:**

Salary/Wages

**Name of Employer or Other Source:**

shoreline brewing co

**Recipient:**

Self

**Type Of Income Received:**

Salary/Wages

**Name of Employer or Other Source:**

Trumbull Public School

**Recipient:**

Spouse

**Type Of Income Received:**

Partnership Distributions

**Name of Employer or Other Source:**

sitting duck tavern

**Recipient:**

Self

**Type Of Income Received:**

Partnership Distributions

**Name of Employer or Other Source:**

Milford Brewing Co

**Recipient:**

Self

**Type Of Income Received:**

Salary/Wages

**Name of Employer or Other Source:**

State of CT

**Recipient:**

Self

**Type Of Income Received:**

Salary/Wages

**Name of Employer or Other Source:**

Gauex fish Fairfield

**Recipient:**

Self

**Type Of Income Received:**

Partnership Distributions

**Name of Employer or Other Source:**

MIGHTY DUCK LLC

**Recipient:**

Self

**Type Of Income Received:**

Partnership Distributions

**Name of Employer or Other Source:**

Gauex Fish Fairfield

**Recipient:**

Self

**Type Of Income Received:**

Partnership Distributions

**Name of Employer or Other Source:**

Quarry Duck LLC

**Recipient:**

Self

**Type Of Income Received:**

Salary/Wages

**Name of Employer or Other Source:**

Mighty Duck LLC

**Recipient:**

Self

**Type Of Income Received:**

Salary/Wages

**Name of Employer or Other Source:**

gauex fish llc

**Recipient:**

Dependent Residing in Household

**Type Of Income Received:**

Salary/Wages

**Name of Employer or Other Source:**

Quarry duck LLC

**Recipient:**

Self

**Type Of Income Received:**

Partnership Distributions

**Name of Employer or Other Source:**

Mallard Group LLC

**Recipient:**

Self

**Type Of Income Received:**

Partnership Distributions

**Name of Employer or Other Source:**

Gauex Fish Fairfield LLC

**Recipient:**

Self

**Type Of Income Received:**

Partnership Distributions

**Name of Employer or Other Source:**

Shoreline Real Estate

**Recipient:**

Self

## BLIND TRUST

☑ **If you do not have a Blind Trust(s)**

## SECURITIES

☐ **If you had no interest in securities with a fair market value in excess of $5,000 at any time during the calendar year**

**Security Name:**

Please see the attached statement

**Owner or beneficiary if held by another:**

Joint

☑ **Held Directly?:**

**Held By:**

Note: If the Security is not held directly, list the trustee, corporation, etc.

## LEASES

☑ **If you do not have a State lease(s)**

## CONTRACTS

☑ **If you do not have a State contract(s)**

## CONFIDENTIAL ADDENDUM

- ☐ **If you, your spouse and/or your dependent children owe no debts of more than ten thousand dollars**
- ☑ **I choose to waive confidentiality such that my confidential addendum may be disclosed.**
- ☐ **I choose to retain confidentiality. Note: You must be ready to file all confidential information in this one session.**

**Name of Creditor:**

American Express

**Street Address 1:** | **Street Address 2:**

P.O. Box 650448

**City :** | **State:** | **Zip:**

Dallas | TEXAS | 75265

**Name of Creditor:**

mutual security credit union

**Street Address 1:** | **Street Address 2:**

1000 Bridgeport ave

**City :** | **State:** | **Zip:**

shelton | CONNECTICUT | 06484

**Name of Creditor:**

Westlake Financial

**Street Address 1:** | **Street Address 2:**

PO BOX 54807

**City :** | **State:** | **Zip:**

Los Angeles | CALIFORNIA | 90054

## CERTIFICATION

- I UNDERSTAND that if I fail to file this statement timely and accurately, I may be subject to a penalty of up to $10,000.
- I UNDERSTAND that all information I provide on this form shall be a matter of public record and may be disclosed by the Office of State ethics upon request, unless exempt from disclosure by General Statues 1-83(c) or the Freedom of Information Act, Connecticut General Statutes 1-200 *et. seq* if I chose to retain confidentiality on my addendum.
- I UNDERSTAND that if, by reason of impossibility, I am unable to provide the information required by this form, I may petition the Citizen's Ethics Advisory Board for a waiver.
- I UNDERSTAND that I must file with the Office of State Ethics, a report of the payment or reimbursement of "necessary expenses" for lodging and/or out-of-state travel incurred by me, in my capacity as a public official or state employee, for an article, appearance, speech, or for my participation at an event, unless the payment or reimbursement is provided by the State of Connecticut, the federal government or another state government. I FURTHER UNDERSTAND that if, either intentionally or due to gross negligence, I fail to file such a report within thirty(30) days after receiving the payment or reimbursement, I will be required to return the payment or reimbursement and may be subject to a penalty for up to $10,000.
- I CERTIFY, UNDER PENALTY OF FALSE STATEMENT, that this Annual Statement of Financial Interests, including the Confidential Addendum, is a complete and accurate statement of financial interests, as defined by Connecticut General Statutes 1-83(b)(1), for myself, my spouse, and dependent residing in my household, during the calendar year 2025

☑ **I have read and agree to all above certifications.**

| | |
|---|---|
| **Name:** | David J Rutigliano |
| **Filed Date and Time:** | 03/29/2026 9:32 AM |