



CONNECTICUT STATE ELECTIONS ENFORCEMENT COMMISSION SEEC FORM 8

INDEPENDENT EXPENDITURE ONLY POLITICAL COMMITTEE (PAC) REGISTRATION

Revised January 2021

GENERAL INSTRUCTIONS

- Type or print clearly all information in black or blue pen. **Please do not use pencil.**
- SEEC staff is available to answer legal compliance questions and advise on how to complete this form (860-256-2940).

WHERE TO FILE THIS FORM

With the State Elections Enforcement Commission ONLY (State Elections Enforcement Commission, Campaign Finance Disclosure Unit, 55 Farmington Ave, Hartford, CT 06105):

- Independent Expenditure Only Political Committees which intend to support or oppose candidates for the office of Governor, Lieutenant Governor, Secretary of the State, State Treasurer, Comptroller, Attorney General, Judge of Probate, State Senator or State Representative.
- Independent Expenditure Only Political Committees which intend to promote the success or defeat of a constitutional amendment to be voted upon by the electors throughout the state.
- Any combination of these purposes.

With a Town Clerk ONLY:

- Independent Expenditure Only Political Committees formed *solely* to promote the success or defeat of candidates for town, city or borough office in municipal elections — *The office of Registrar of Voters is treated as an elective office of a municipality.*
- Independent Expenditure Only Political Committees formed *solely* to promote the success or defeat of local referendum questions to be voted upon by the electors of a municipality— *If any such referendum question appears on the ballot of several municipalities, but not statewide, then the committee must file with the clerk of each municipality in which the committee makes an expenditure.*

WHO FILES THIS FORM

Please Note: This form is only to be used by groups that intend to make independent expenditures in excess of \$1,000 and do not intend to make coordinated expenditures or contributions to candidates or other committees. The chairperson of each political committee is required to file a SEEC Form 8 with the proper filing authority (*See Where to File this Form*) within **ten days** after the date that it is organized, which includes the dates that funds or other resources are first solicited, received or expended.

Independent Expenditure Only Political Committees that file with SEEC Only: The treasurer must file an amended SEEC Form 8 with the Commission within ten days of any changes in the information contained on the form, unless the change is to the committee officers. If there has been a change in committee officers, then the chairperson must file an amended SEEC Form 8 within the ten day period with the Commission.

The treasurer of each ongoing political committee for which the State Elections Enforcement Commission is the filing repository must file a SEEC Form 8 with the Commission on or before November 15th of each even-numbered year. Note that biennial re-registration is required even if there are no changes, additions or deletions to the information on the existing SEEC Form 8. If there are no changes, additions or deletions to the information on the existing SEEC Form 8, the treasurer should NOT file a SEEC Form 8 and should instead file a SEEC Form 8NC to fulfill the biennial re-registration requirement.

LATE FILING PENALTY

If the chairperson fails to file the SEEC Form 8 within the time prescribed by law, he or she may be liable for fines or imprisonment or both.

SEEC MAILING ADDRESS:

STATE ELECTIONS ENFORCEMENT COMMISSION
CAMPAIGN FINANCE DISCLOSURE UNIT
55 FARMINGTON AVE
HARTFORD, CONNECTICUT 06105

SEEC TELEPHONE NUMBER:

MAIN NUMBER: 860-256-2940
TOLL FREE WITHIN CT: 866-SEEC-INFO
SEEC WEBSITE ADDRESS: www.ct.gov/seec

SEEC FORM 8 INSTRUCTIONS

1. **Registration Type:** Check the type of filing that the current document refers to, either *Initial* or *Amendment/Biennial with Changes*. Check **Initial** registration statement if this is the independent expenditure only political committee's first registration statement. Check **Amendment/Biennial with Changes** if changes are being made to information on a previously filed independent expenditure only political committee registration statement.

Independent expenditure only political committees that file with SEEC only: Check **Amendment/Biennial with Changes** if this is the biennial re-registration filed by the treasurer on or before November 15th of an even-numbered year and there are **changes** to the most recent SEEC Form 8 on file. If there are **no changes**, additions or deletions to the information on the existing SEEC Form 8 on file with SEEC, the treasurer should **NOT** file a SEEC Form 8 and should instead file a **SEEC Form 8NC** to fulfill the biennial re-registration requirement.

COMMITTEE INFORMATION

2. **Name of Committee:** Provide the full name of the committee. *This will be the registered name with the filing repository and used on all financial disclosure statements, advertising, etc.* Check the box if this committee was previously registered as a different political committee using the SEEC Form 3. If the name of the committee has changed, indicate the previous name in the space provided.

3. **Acronym:** Provide the committee's acronym, if any. *Example: CBG for Citizens for Better Government.*

4. **Committee Address:** Provide the address of the committee. *Post Office Boxes are acceptable as a committee address.*

5. **Committee E-Mail Address & Website:** Provide the committee's e-mail address and website address, if any.

CHAIRPERSON INFORMATION

6. **Chairperson Name:** Provide the full name of the chairperson.

7. **Chairperson Residence Address:** Provide the residential street address of the chairperson. The chairperson may enter an alternate address in lieu of a residential address *only* if they are in the Address Confidentiality Program pursuant to General Statutes § 54-240 (a) or have protected address status under General Statutes § 1-217. *Business Addresses or Post Office Boxes are not acceptable for residential street address.*

8. **Chairperson Mailing Address:** Provide the mailing address of the chairperson if different from the residence address reported on Line 7.

9. **Chairperson Telephone:** Provide the phone number of the chairperson including area code.

10. **Chairperson E-Mail Address:** Provide the e-mail address of the chairperson. *Completion of this information is encouraged in order to disseminate important communications in the most efficient and timely manner.*

TREASURER INFORMATION

11. **Treasurer Name:** Provide the full name of the treasurer.

12. **Treasurer Residence Address:** Provide the residential street address of the treasurer. The treasurer may enter an alternate address in lieu of a residential address *only* if they are in the Address Confidentiality Program pursuant to General Statutes § 54-240 (a) or have protected address status under General Statutes § 1-217. *Business Addresses or Post Office Boxes are not acceptable for residential street address.*

13. **Treasurer Mailing Address:** Provide the mailing address of the treasurer if different from the residence address reported on Line 12.

14. **Treasurer Telephone:** Provide the phone number of the treasurer including area code.

15. **Treasurer E-Mail Address:** Provide the e-mail address of the treasurer. *Completion of this information is encouraged in order to disseminate important communications in the most efficient and timely manner.*

DEPUTY TREASURER INFORMATION *(Optional)*

16. **Deputy Treasurer Name:** Provide the full name of the deputy treasurer.
17. **Deputy Treasurer Residence Address:** Provide the residential street address of the deputy treasurer. The deputy treasurer may enter an alternate address in lieu of a residential address *only* if they are in the Address Confidentiality Program pursuant to General Statutes § 54-240 (a) or have protected address status under General Statutes § 1-217. *Business Addresses or Post Office Boxes are not acceptable for residential street address.*
18. **Deputy Treasurer Mailing Address:** Provide the mailing address of the deputy treasurer if different from the residence address reported on Line 17.
19. **Deputy Treasurer Telephone:** Provide the phone number of the deputy treasurer including area code.
20. **Deputy Treasurer E-Mail Address:** Provide the e-mail address of the deputy treasurer. *Completion of this information is encouraged in order to disseminate important communications in the most efficient and timely manner.*

DEPOSITORY INSTITUTION INFORMATION

21. **Depository Institution Name:** Provide the complete name of the financial institution located in this state which serves as the depository of the committee's funds.
22. **Depository Institution Address:** Provide the complete address of the committee's depository institution. *Post Office Boxes are acceptable.*

SEEC FORM 8 INSTRUCTIONS

Please Note: At the top of page 2 and every page that follows, report the **Name of Committee** and the **Registration Type** in the appropriate fields.

Registration Type: Check the type of filing that the current document refers to, either **Initial** or **Amendment/Biennial with Changes**. Check **Initial** registration statement if this is the independent expenditure only political committee's first registration statement. Check **Amendment/Biennial with Changes** if changes are being made to information on a previously filed independent expenditure only political committee registration statement.

Independent expenditure only political committees that file with SEEC only: Check **Amendment/Biennial with Changes** if this is the biennial re-registration filed by the treasurer on or before November 15th of an even-numbered year and there are **changes** to the most recent SEEC Form 8 on file. If there are **no changes**, additions or deletions to the information on the existing SEEC Form 8 on file with SEEC, the treasurer should **NOT** file a SEEC Form 8 and should instead file a **SEEC Form 8NC** to fulfill the biennial re-registration requirement.

Name of Committee: Provide the committee's name as registered with the filing repository for reference purposes.

OTHER OFFICER(S) INFORMATION *(if applicable)*

23. **Officer Name:** Provide the full name of any individual serving as an other officer.

Title or Position: Provide the name of the title or position, if any.

Officer Residence Address: Provide the residential street address of the "other officer." The "other officer" may enter an alternate address in lieu of a residential address *only* if they are in the Address Confidentiality Program pursuant to General Statutes § 54-240 (a) or have protected address status under General Statutes § 1-217. *Business Addresses or Post Office Boxes are not acceptable for residential street address.*

23A.— 23G. If the committee designated additional officers or members of the control group, please disclose all other officers' or members' information on lines 23A—23G. *If there is insufficient space on the form for identifying all of the committee's "Other Officers" use "Additional Section 23" of this form.*

COMMITTEE SUBTYPE

24. **Committee Subtype:** Select committee subtype.

25. **Purpose of Committee:** Select the purpose of the committee, *either* Ongoing *or* Durational, then select the appropriate subtype.

REFERENDUM / CONSTITUTIONAL AMENDMENT

26. **Referendum Question or Constitutional Amendment Only:** For committees that checked the applicable subtype in item 25B (Single Referendum or Constitutional Amendment), briefly summarize the referendum question that will be before the voters. *Example: To Appropriate Funds and Issue Bonds for Renovations of Town Hall.*

27. **Group's Position on the Referendum Question or Constitutional Amendment:** Indicate whether the committee supports or opposes the question or amendment.

ADDITIONAL PAC INFORMATION

28. **Committees Established by a Business Entity, Labor Union or Other Organization or Association Only:** Provide the name and address of the connected entity, organization or association that is responsible for establishing the committee.

29. *Section Reserved*

30. *Section Reserved*

LOBBYIST STATUS

31. **Is Committee Established or Controlled by a Registered Lobbyist?:** Check either the *no* or *yes* box to identify whether the committee is established or controlled by a lobbyist registered with the Office of State Ethics. *If yes*, enter the name of the registered lobbyist. Then check the box to identify whether the lobbyist is a client lobbyist, communicator lobbyist or both. *If there is insufficient space on the form for identifying all of the names of the registered lobbyists, use "Additional Section 31" of this form.*

GENERAL ASSEMBLY

32. **Is Committee Established or Controlled by an Elected Statewide Official, General Assembly Member or Agent thereof?:** Check either the *no* or *yes* box. *If yes*, enter the name or names of the individuals who are elected statewide officials or members of the General Assembly who *established* or *controlled* the committee or their agents. *If there is insufficient space on the form for identifying all of the officials or members who established or controlled the committee, use "Additional Section 32" of this form.*

OUT-OF-STATE FILING INFORMATION

33. **Does Committee File Reports with the Federal Election Commission or Any Out-of-State Elections Agency?:** Check either *no* or *yes* box. *If yes*, identify the name of the out-of-state elections agency.

PRE-REGISTRATION INFORMATION

34. **Has a Contribution or Disbursement Been Received Prior to this Registration Statement?:** Check either the *no* or *yes* box. This only applies to new Independent Expenditure Only PACs. *If yes is checked*, the treasurer is required to file SEEC Form 40, Itemized Campaign Finance Disclosure Statement, together with this SEEC FORM 8, which must be itemized and complete as to the first day of the committee's deposits into the committee's single checking account. *If no is checked*, the deadline date for the committee's first SEEC Form 40 filing is no later than 48 hours after the committee's first day of deposit.

STATE CONTRACTOR

35. **Is Committee Established or Controlled by a State Contractor or Principal of a State Contractor?:** Check either the *no* or *yes* box. *If yes*, identify the name of the state contractor or principal, which may be either an individual or an entity. Item 35 requires disclosure of (1) the name of any individual who is a principal of a state contractor or prospective state contractor, as defined, and who is associated with this committee either as a chairperson, treasurer, or deputy treasurer, as well as the name of a business entity, labor union or other entity disclosed under Item 28 as connected to this committee *if* such entity is also a state contractor or prospective state contractor, as defined. *If there is insufficient space on the form for identifying all of the names of principals, use "Additional Section 35" of this form.*

STATEWIDE AND GENERAL ASSEMBLY

36. **Purpose of Committee as to Statewide and General Assembly Candidates:** Check either the *no* or *yes* boxes in *both A and B*.

INVESTMENT FIRM

37. **Is Committee Established or Controlled by a Principal of an Investment Services Firm?:** Check either the *no* or *yes* box. *If yes*, provide the full name of the principal. *If there is insufficient space on the form for identifying all of the names of principals, use "Additional Section 37" of this form.*

CERTIFICATION

38. **Certification:** These certifications, which are made under penalties of false statement, must be signed and dated (as outlined below) by the chairperson, treasurer and/or deputy treasurer (*if applicable*).

If this is an **Initial Committee Registration**, the chairperson must sign the Chairperson Certification. If this is an **Amended Committee Registration** or a **Biennial Committee Re-Registration**, the chairperson need only sign the Chairperson Certification if he or she is appointing a new treasurer and/or deputy treasurer with this filing.

In addition, if this is an **Initial Committee Registration**, *both* the treasurer and deputy treasurer (if one has been appointed) must check the box for **Initial Committee Registration** and sign the applicable certification to show they have accepted their appointment by the chairperson as treasurer and deputy treasurer respectively.

If this is an **Amended Committee Registration**, and the chairperson has appointed a **new** treasurer and/or a **new** deputy treasurer, then the new treasurer and/or deputy treasurer must check the box for **Amended Committee Registration** and sign the applicable certification to show that he or she has accepted the appointment as treasurer or deputy treasurer respectively. If this is an **Amended Committee Registration** and there is no change in officers then *only* the treasurer or deputy treasurer who is filing the amendment must check the box for **Amended Committee Registration** and sign the applicable certification.

If this is the **Biennial Committee Re-Registration** due by November 15th in even numbered years, the treasurer or deputy treasurer who is completing the biennial re-registration filing requirement must check the box for **Biennial Committee Re-Registration** and sign that certification. If the chairperson is appointing a new treasurer and/or deputy treasurer using this filing, then, in addition to the chairperson signing the chairperson certification, that new treasurer and/or deputy treasurer must check the box for **Biennial Committee Re-Registration** and sign that certification to show that he or she has accepted the appointment as treasurer or deputy treasurer respectively.

Please Note: This SEEC Form 8 will *not* satisfy the biennial re-registration requirement unless the Biennial Committee Re-Registration Certification is made by the treasurer or deputy treasurer (*if applicable*).

ADDITIONAL PAGES FOR SEEC FORM 8

If additional pages are needed to complete all information required in Sections 23, 31, 32, 35 or 37 of the form, please reproduce the "Additional Page" for the appropriate section, and attach the page(s) to the SEEC Form 8.