SEEC FORM 26

Revised September 2012

Independent Expenditure Statement for an Entity (NOT Individuals or Committees)



122440

☑ Original ☐ Amendment

Official Use Only

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			esociation or Other Papal Entity	ILED SE	GAX EXP	EMPT STATUS
1. NAME OF ENTITY (Provide Complete Name	1	, Organization, A	3300 Marie 197 298 - 197 797	A THE OWNER OF THE PROPERTY.		527 □ N/A
Normater Boad Barminer	or, wc.			1850 to 184	െബ	
3. MAILING ADDRESS OF ENTITY		- P	City.	St	ate 2	Zip Code
P.O.Boy 531			Jarfild		ן די	06824
4. PRINCIPAL BUSINESS ADDRESS OF	ENTITY			St	ale .	Zip Code
Street Address Po. Boy 531			Juntich	1		06824
5. CEO OR FUNCTIONAL EQUIVALEN	rof entity	300 - 300 - 30			i je	
First Name	l Mi	Last Name	•			Suffix
Elitasoth	S	Kuranto	WIE			
Manuja Director					44500 - 46074	
6. TELEPHONE & EMAIL ADDRESS OF	CEO OR FUN	TIONAL EQ	UIVALENT OF ENTITY			
(Include Area Code) 1002 - 11-10 - 9595	ite	cappublic	afairs.com	and the second s	o u william u make kilo	ana magazina magainaka ka
7. NAME OF INDIVIDUAL AUTHORIZE	D TO FILE IN	EPENDENT	EXPENDITURE STATEM	ENTS		Suffix
First Name	MI _	Last Name Tyrnu	I TIT			ì
James	t	lurro	(C 111			
Title Conval		norma and a sound in the legal bibliotic of			r Transport	
8. TELEPHONE & EMAIL ADDRESS OF	Email Address	AUTHORIZE	D TO FILE			The second secon
(Include Area Code) 202-412-0915	JTYM		khill·com	transport of the second	X verses establis	
9. AGENT FOR SERVICE OF PROGESS	IN CONNECT	CUT			38 (7384) (770)	Service Property Association
In Corp Services, Inc.					Section from the Broom Post	AND ALICE AND
10, ADDRESS OF AGENT FOR SERVICE	E OF PROCES	S IN CONNEC	TICUT	-	State	Zip Code
Street Address			Flush Hantford		CT .	06108
1622 Jain Street				A CONTRACTOR OF THE CONTRACTOR		0210
11. TÉLEPHONE & EMAIL ADDRESS O	OF AGENT FOI	SERVICE O	F PROCESS IN CONNECT	ICUT	ESC. NO.	
(Include Area Code) 402 - 866 - 2500	Email Address	processing	@inusp.com			
12. DATE	13 BRIEF	DESCRIPTIO	N OF REFERENDUM QUI	ESTION (If applica	ole)	14. POSITION:
	5865 - F F F F F F F F F F F F F F F F F F	10-10 V 4-11. 1 V 10-11-11				(If applicable)
Primary		ALIA				☐ Support
Election 11/6/2012		NIA				
						☐ Oppose
□ Referendum	w Silenger - De Silenger Herri	- CONT				
15. STATE OF POLITICAL SUBDIVIS					Banka, mostiliani naga	845 - 1 - 120 - 11 - 1180 9 C - 15
☐ State ☐ Political Subdivision(s): (Please list)					

Types and the complete State

Therefore the accent and ences the developmental statement.

NAME OF ENTIT	Y (Provide Complete Name of Business Entity, c	Organization, Associa	don or Other Legal Entity	
	r Good government, Inc.			
	ORT (Check One Box)			
☐ January 10	☐ 7th day preceding primary	☐ 7th day		nt Expenditure Statement for Primary
□April 10	☐ 30 days following primary	precedin <u>e</u> referendum	•	nt Expenditure Statement for Election
□July 10	□ 7th day preceding election	☐ 90 days	☐ 48/24 hour Independe	nt Expenditure Statement for Special Election
C October 10	☐ 7th day preceding special election	following referendum	☐ Amendment to (Type of	(Report)
	☐45 days following special election	*****		
17. PERIOD COV	(POPA	. 1931-1		
D.PERIOD COV	3.MAD			
	Beginning Da	ie	Ending Date	
	10/23/2012	through	10/23/2012	
,	Transfer Comment	DEC.	D ¹¹	
IS CERTIFICA	tion of Ceo or Functional Equ	IVALENT OF E	NTHY	
Independent Exp	& Knots	Elizaka Print nam	M S KINGINGS	10/34/3012 DATE (mm/dd/yyyy)
19. CERTIFICA	tion of individual authorize	TO FILE INDE	PENDENT EXPENDITUI	re statements
Independe information set to be made by entity, candids these expendi	the Entity, for the period covered, and I	ne Entity. I trithet atement is a true, at these expenditue entity has not be deritand that the a shable violation o	certify and state, under the accurate and complete iter tres and obligations were receptance of any such reinformers of any such reinformers.	eperantes of expenditures made or obligated made independent of any other individual, have an expectation of reimbursement for abursement any time in the figure may
SKONATURE	13414-	PRINT NAM	E. Tyre 4 77	DATE (min/od/yyyy)
Signort ords	and the same of th	SUMM		
		C(OLUMN A Tids Pedod	COLUMN B Aggregate
20. Expenditure	es Made by Entity (Section A - Page 3)	37,969.0	00	
21. Expenditure This Period	es Incurred by Entity but Not Paid (Section B - Page 4)	φ		
22. Total Outst by Entity st	anding Expenditures Incurred III Unpaid (Section B - Page 4)	ø		

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INDEPENDENT EXPENDITURES

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AME OF ENTITY (Provide Com	plete Name of Bi	siness Entity, Organizati	on, Association on	Other Segal Ratity) TYPE O	F REPORT			
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	•	A. Independer	at Expenditu	res Made,by Entity				nount
ame of Payee						37,	969.	0 0
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Ho Eastern Blud.			6/1	wheney		1		d with Referendum?
ate of Expenditure Purpose of the code Purpose of the code	of Expenditure	Description Media Placemen	t and Producti	on for TV Ads]Yes ☑No
ame of Candidate (if applicable)				Office Sought Pate Senate District 4		Oppose	ted d i	Independent Expenditure on behalf of more than two candidates?
Steve Cuss unc				Office Sought	E	Suppor Oppose		☐ Yes 【 No If yes, complete Section A. Addendum
famte of Payce							A	mount
treet Address			City			State	•	Zip Code
		Description				1-1	Associat	ed with Referendum
Parpose (by code)	of Expenditure	Desemption					[∏Yes ☐ No
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Date of Expenditure Purpose (By sold)	e of Expenditure	Description				!		ated with Referendur
Name of Candidate (if applicable)				Office Sought		Supp	orted ased	Independent Expenditure on behalf of more that two candidates?
Name of Candidate ((f applicable)				Office Sought		Supp		☐ Yes ☐ N If yes, complete Section A. Addena
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				E. Section A - This Page	37,96	1.60		<u></u>
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TOTAL OF ALL I	NDEPENDE	NT EXPENDITUR	ES MADE B	ENTITY THIS PERIOD (Enter total on Line 2)	34,96	4.00		

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	-B. Indeper	ident Expend	itures Incurred b	Entity this Period	I Dut Not Palc	Access (A.)	4 moun	t Incurred
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	N/H		Total			State	<u> </u>	Zip Code
Street Address			City				Ì	
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Name of Candidate (if a	applicable).			Office Sought		Suppor		If yes, complete
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en e	Previous Reporti	d Independent	Expenditures Unp	aid and Still Outstan	ming.			
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Revised September 2012	TWO OF DEDOOT	
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If the Entity has IRC §§ 501(c) or 527 tax exempt status and has made or obligated	to make independent	t expenditures during
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