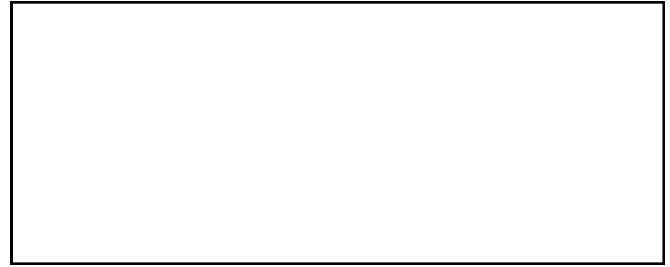




# SEEC FORM 8NC

**Independent Expenditure Only Political Committee (PAC)**  
**Biennial Re-Registration Without Changes**  
STATE ELECTIONS ENFORCEMENT COMMISSION  
Revised October 2022



| 1. NAME OF COMMITTEE   |       |          |   | 2. ACRONYM |          |
|--|-------|----------|---|------------|----------|
| <input type="checkbox"/> <b>Previously Registered as Different Committee</b><br><i>Name of previous committee (if different from above)</i>  |       |          |   |            |          |
| 3. COMMITTEE ADDRESS   |       |          | 4. COMMITTEE EMAIL & WEBSITE  |            |          |
| Address  |       |          | Email Address   |            |          |
| City   | State | Zip Code | Website   |            |          |
| 5. TREASURER / DEPUTY TREASURER NAME   |       |          |   |            |          |
| First Name   |       | MI       | Last Name   |            | Suffix   |
| 6. TREASURER / DEPUTY TREASURER RESIDENCE ADDRESS  |       |          | 7. TREASURER / DEPUTY TREASURER MAILING ADDRESS <i>(If different)</i> |            |          |
| Street Address   |       |          | Address   |            |          |
| City   | State | Zip Code | City  | State      | Zip Code |
| 8. TREASURER / DEPUTY TREASURER TELEPHONE  |       |          | 9. TREASURER / DEPUTY TREASURER EMAIL ADDRESS                         |            |          |
| <i>(Include Area Code)</i>   |       |          |   |            |          |
| 10. CERTIFICATION  |       |          |   |            |          |
| Treasurer / Deputy Treasurer   |       |          |   |            |          |
| <p>I hereby certify and state, under penalties of false statement, that I have reviewed in full the most recent SEEC Form 8 on file with the State Elections Enforcement Commission, that, upon review, all of the designations set forth in that political committee registration statement are true, accurate and complete to the best of my knowledge and belief, and that there have been no changes, additions, or deletions to the information contained therein since that registration statement was filed.</p> <p>I certify that I have paid any civil penalties or forfeitures assessed pursuant to Chapters 155 to 157, inclusive.</p> <p>I certify that I have not been convicted of or pled guilty or nolo contendere to, in a court of competent jurisdiction, any (A) felony involving fraud, forgery, larceny, embezzlement or bribery, or (B) criminal offense under Title 9 of the General Statutes, or that at least eight years have elapsed from the date of the conviction or plea or the completion of any sentence, whichever date is later, without a subsequent conviction of or plea to another such felony or offense.</p> <p>I certify that I am not otherwise barred from serving as a treasurer by order of the State Elections Enforcement Commission.</p> |       |          |   |            |          |
| _____  |       |          | _____   |            |          |
| TREASURER / DEPUTY TREASURER SIGNATURE   |       |          | DATE (mm/dd/yyyy)   |            |          |

Making a false statement on this form may subject you to criminal penalties, including but not limited to, imprisonment for up to one year or a fine of up to two thousand dollars, or both.