

SEEC FORM 21

Short Form Campaign Finance Disclosure Statement

CONNECTICUT STATE ELECTIONS ENFORCEMENT COMMISSION

Rev. 1/07



Electronic Filing

Office Use Only

1. NAME OF COMMITTEE

Friends of John Levin

2. TREASURER NAME

Title	First Christopher	MI F	Last Potts	Suffix
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3. TREASURER ADDRESS

Street Address 73 Nursery St	City Norwalk	State CT	Zip Code 06850
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4. ELECTION DATE

11/03/2026

5. OFFICE SOUGHT (if applicable)

Undetermined

6. DISTRICT CODE (if applicable)

7. CANDIDATE NAME

Title	First John	MI	Last Levin	Suffix
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8. TYPE OF REPORT

April 10 Filing - Original

9. PERIOD COVERED

Beginning Date

Ending Date

02/27/2026

thru

03/31/2026

10. CERTIFICATION



I hereby certify and state, under penalties of false statement, that the committee named above, did not receive contributions or other funds, or make or incur expenditures in excess of \$1000 for the period covered by this Short Form Campaign Finance Disclosure Statement.

Electronic Filing

SIGNATURE

Christopher Potts

PRINT NAME OF THE SIGNER

04/09/2026 8:39:49AM

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.