

**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

**Amplify**

2. TREASURER NAME

Title	First <b>Jessica</b>	MI <b>K</b>	Last <b>Martin</b>	Suffix
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3. TREASURER ADDRESS

Street Address <b>431 Church St</b>	City <b>Wethersfield</b>	State <b>CT</b>	Zip Code <b>06109</b>
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4. ELECTION DATE

5. OFFICE SOUGHT (if applicable)

6. DISTRICT CODE (if applicable)

7. CANDIDATE NAME

Title	First	MI	Last	Suffix
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8. TYPE OF REPORT

**April 10 Filing - Original**

9. PERIOD COVERED

Beginning Date

Ending Date

**01/01/2026**

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

**Kaci White**

PRINT NAME OF THE SIGNER

**04/10/2026 11:44:34AM**

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.