

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	MI	Last	Suffix
	Christopher	F	Potts	

3. TREASURER ADDRESS

Street Address	City	State	Zip Code
73 Nursery St	Norwalk	CT	06850

4. ELECTION DATE

11/03/2026

5. OFFICE SOUGHT (if applicable)

Undetermined

6. DISTRICT CODE (if applicable)

7. CANDIDATE NAME

Title	First	MI	Last	Suffix
	John		Levin	

8. TYPE OF REPORT

July 10 Filing - Original

9. PERIOD COVERED

Beginning Date

Ending Date

04/01/2026

thru

06/30/2026

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

07/01/2026 1:39:15PM

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.