

# SEEC FORM 3NC

## Political Committee (PAC)

### Biennial Re-Registration Without Changes

STATE ELECTIONS ENFORCEMENT COMMISSION

Revised September 2012



Do Not Mark in This Space For Official Use Only

<b>1. NAME OF COMMITTEE</b>			<b>2. ACRONYM</b>		
Eighth Senatorial Political Action Committee					
<b>3. COMMITTEE ADDRESS</b>			<b>4. COMMITTEE E-MAIL &amp; WEBSITE</b>		
Address 12 Church St			E-Mail Address joshua.storm@gmail.com		
City Tariffville	State CT	Zip Code 06081	Website		
<b>5. TREASURER NAME</b>					
First Name Joshua		MI	Last Name Storm		Suffix
<b>6. TREASURER RESIDENCE ADDRESS</b>			<b>7. TREASURER MAILING ADDRESS (If different)</b>		
Street Address 12 Church St			Address		
City Tariffville	State CT	Zip Code 06081	City	State	Zip Code
<b>8. TREASURER TELEPHONE</b>		<b>9. TREASURER E-MAIL ADDRESS</b>			
(Include Area Code) ( 860 ) 408 - 9442		Joshua.storm@gmail.com			

<b>10. CERTIFICATION</b>	
Treasurer	
I hereby certify and state, under penalties of false statement, that I have reviewed in full the most recent SEEC Form 3 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.	
Joshua Storm	11/09/2014
_____ 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.