

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

1. NAME OF COMMITTEE			2. ACRONYM		
NARAL Pro-Choice Connecticut PAC					
3. COMMITTEE ADDRESS			4. COMMITTEE E-MAIL & WEBSITE		
Address PO Box 9521			E-Mail Address info@prochoicect.org		
City New Haven	State CT	Zip Code 06534	Website www.prochoicect.org		
5. TREASURER NAME					
First Name Laura		MI E	Last Name Bartok		Suffix
6. TREASURER RESIDENCE ADDRESS			7. TREASURER MAILING ADDRESS (If different)		
Street Address 140 Carriage Rd			Address		
City Bristol	State CT	Zip Code 06010	City	State	Zip Code
8. TREASURER TELEPHONE		9. TREASURER E-MAIL ADDRESS			
(Include Area Code) (860) 919 - 5021		laura.bartok@gmail.com			

10. CERTIFICATION	
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.	
Laura E Bartok	01/10/2013
_____ 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.