

SEEC FORM 3NC

Political Committee (PAC)

Biennial Re-Registration Without Changes

STATE ELECTIONS ENFORCEMENT COMMISSION

Revised August 2016



1. NAME OF COMMITTEE				2. ACRONYM	
Democrats Electoral Majority PAC				DEMPAC	
3. COMMITTEE ADDRESS			4. COMMITTEE E-MAIL & WEBSITE		
Address 8 Lisa Ln			E-Mail Address kstar.murray@gmail.com		
City Tolland	State CT	Zip Code 06084	Website		
5. TREASURER NAME					
First Name Katherine		MI S	Last Name Murray		Suffix
6. TREASURER RESIDENCE ADDRESS			7. TREASURER MAILING ADDRESS (If different)		
Street Address 8 Lisa Ln			Address		
City Tolland	State CT	Zip Code 06084	City	State	Zip Code
8. TREASURER TELEPHONE		9. TREASURER E-MAIL ADDRESS			
(Include Area Code) 860 874 8060		kstar.murray@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. I certify that I have paid any civil penalties or forfeitures assessed pursuant to Chapters 155 to 157, inclusive. I certify that I have not been convicted of or pled guilty or nolo contendere to, in a court of competent jurisdiction, any (A) felony involving fraud, forgery, larceny, embezzlement or bribery, or (B) criminal offense under Title 9 of the General Statutes, or that at least eight years have elapsed from the date of the conviction or plea or the completion of any sentence, whichever date is later, without a subsequent conviction of or plea to another such felony or offense. I certify that I am not otherwise barred from serving as a treasurer by order of the State Elections Enforcement Commission.					
Katherine S Murray			11/14/2016		
TREASURER SIGNATURE			DATE (mm/dd/yyyy)		