



SEEC FORM 3

Political Committee (PAC) Registration STATE ELECTIONS ENFORCEMENT COMMISSION Revised September 2012

REGISTRATION TYPE

- Original
- Amendment/
Biennial with Changes

1. NAME OF COMMITTEE				2. ACRONYM	
Realtors PAC				RPAC	
3. COMMITTEE ADDRESS			4. COMMITTEE E-MAIL / 5. COMMITTEE WEBSITE		
Address 111 Founders Plz Ste 1101			Email rpac@ctrealtor.com		
City East Hartford	State CT	Zip Code 06108	Website		
6. CHAIRPERSON NAME					
First Name Cheryl		MI	Last Name Scott-Daniels		Suffix
7. CHAIRPERSON RESIDENCE ADDRESS			8. CHAIRPERSON MAILING ADDRESS (If different)		
Street Address 15 Blind Brook Rd			Address 111 Founders Plz Ste 1101		
City Westport	State CT	Zip Code 06880	City East Hartford	State CT	Zip Code 06108
9. CHAIRPERSON TELEPHONE			10. CHAIRPERSON E-MAIL ADDRESS		
(Include Area Code) 203 341 0100			cheryl@csdgroup.com		
11. TREASURER NAME					
First Name Cheryl		MI	Last Name Scott-Daniels		Suffix
12. TREASURER RESIDENCE ADDRESS			13. TREASURER MAILING ADDRESS (If different)		
Street Address 15 Blind Brook Rd			Address 111 Founders Plz Ste 1101		
City Westport	State CT	Zip Code 06880	City East Hartford	State CT	Zip Code 06108
14. TREASURER TELEPHONE			15. TREASURER E-MAIL ADDRESS		
(Include Area Code) 203 341 0100			cheryl@csdgroup.com		
16. DEPUTY TREASURER NAME					
First Name Scott		MI	Last Name Cooney		Suffix
17. DEPUTY TREASURER RESIDENCE ADDRESS			18. DEPUTY TREASURER MAILING ADDRESS (If different)		
Street Address 17 Wooster Hts			Address 111 Founders Plz Ste 1101		
City Danbury	State CT	Zip Code 06810-7536	City East Hartford	State CT	Zip Code 06108
19. DEPUTY TREASURER TELEPHONE			20. DEPUTY TREASURER E-MAIL ADDRESS		
(Include Area Code) 203 750 7500			Scott.Cooney@coldwellbankermoves.com		
21. DEPOSITORY INSTITUTION NAME					
Bank of America					
22. DEPOSITORY INSTITUTION ADDRESS					
Address 157 Church Street, New Haven, CT 06511					

NAME OF COMMITTEE	REGISTRATION TYPE
Realtors PAC	<input type="radio"/> Original <input checked="" type="radio"/> Amendment/ Biennial with Changes
38. IS COMMITTEE ESTABLISHED BY OR ON BEHALF OF A STATE CONTRACTOR OR PRINCIPAL OF A STATE CONTRACTOR?	
<input checked="" type="radio"/> No <input type="radio"/> Yes If Yes, Name of Contractor or Principal _____ <input type="checkbox"/> See Addendum	
39. PURPOSE OF COMMITTEE AS TO STATEWIDE & GENERAL ASSEMBLY CANDIDATES	
A. Is this Political Committee authorized to make contributions or expenditures to or for the benefit of candidates for Statewide Office? <input type="radio"/> No <input checked="" type="radio"/> Yes	B. Is this Political Committee authorized to make contributions or expenditures to or for the benefit of candidates for General Assembly? <input type="radio"/> No <input checked="" type="radio"/> Yes
40. IS COMMITTEE ESTABLISHED BY OR ON BEHALF OF A PRINCIPAL OF AN INVESTMENT SERVICES FIRM?	
<input checked="" type="radio"/> No <input type="radio"/> Yes If Yes, Name of Principal _____ <input type="checkbox"/> See Addendum	
41. CERTIFICATION	
<p>Chairperson</p> <p>I hereby certify and state, under penalties of false statement, that all of the designations set forth in this political committee registration statement are true, accurate and complete to the best of my knowledge and belief, and further, that this statement includes my certification to the fact that any individual designated herein to serve as the treasurer or deputy treasurer have indicated to me their acceptance of my appointment of them to those positions.</p> <p>Cheryl Scott-Daniels _____ 01/12/2017 CHAIRPERSON SIGNATURE DATE (mm/dd/yyyy)</p>	
<p>Treasurer</p> <p><input type="radio"/> Initial Committee Registration: I hereby certify and state, under penalties of false statement, that I have accepted my appointment by the chairperson to serve as the designated Treasurer of this political committee, and that I am <i>either</i> submitting this registration statement <i>together with</i> a SEEC FORM 20 complete as to the committee's first day of receiving contributions or distributions benefiting the committee or that I understand that I shall become obligated to file the committee's first SEEC FORM 20 within 48 hours after receiving the committee's first contribution or distribution.</p> <p><input checked="" type="radio"/> Amended Committee Registration: I hereby certify and state, under penalties of false statement, that I have accepted my appointment by the chairperson to serve as the designated treasurer of this political committee. I intend to comply with all the campaign finance disclosure requirements as contained in Chapter 155 of the General Statutes, and to abide by any prohibitions, limitations or restrictions concerning campaign contributions and expenditures.</p> <p><input type="radio"/> Biennial Committee Re-Registration: I hereby certify and state, under penalties of false statement, that I have accepted my appointment by the chairperson to serve as the designated treasurer of this political committee. I intend to comply with all the campaign finance disclosure requirements as contained in Chapter 155 of the General Statutes, and to abide by any prohibitions, limitations or restrictions concerning campaign contributions and expenditures. I further hereby certify and state, under penalties of false statement, that all of the designations set forth in this political committee registration statement are true, accurate and complete to the best of my knowledge and belief.</p> <p>Cheryl Scott-Daniels _____ 01/12/2017 TREASURER SIGNATURE DATE (mm/dd/yyyy)</p>	

NAME OF COMMITTEE	REGISTRATION TYPE
Realtors PAC	<input type="radio"/> Original <input checked="" type="radio"/> Amendment/ Biennial with Changes

41. CERTIFICATION *continued*

Deputy Treasurer

Initial Committee Registration: I hereby certify and state, under penalties of false statement, that I have accepted my appointment by the chairperson to serve as the designated deputy treasurer of this political committee. I intend to comply with all the campaign finance disclosure requirements as contained in Chapter 155 of the General Statutes, and to abide by any prohibitions, limitations or restrictions concerning campaign contributions and expenditures.

Amended Committee Registration: I hereby certify and state, under penalties of false statement, that I have accepted my appointment by the chairperson to serve as the designated deputy treasurer of this political committee. I intend to comply with all the campaign finance disclosure requirements as contained in Chapter 155 of the General Statutes, and to abide by any prohibitions, limitations or restrictions concerning campaign contributions and expenditures.

Biennial Committee Re-Registration: I hereby certify and state, under penalties of false statement, that I have accepted my appointment by the chairperson to serve as the designated deputy treasurer of this political committee. I intend to comply with all the campaign finance disclosure requirements as contained in Chapter 155 of the General Statutes, and to abide by any prohibitions, limitations or restrictions concerning campaign contributions and expenditures. I further hereby certify and state, under penalties of false statement, that all of the designations set forth in this political committee registration statement are true, accurate and complete to the best of my knowledge and belief.

Scott Cooney

01/06/2017

DEPUTY TREASURER SIGNATURE

DATE (mm/dd/yyyy)

42. CERTIFICATION FOR LEGISLATIVE LEADERSHIP COMMITTEES ONLY

Legislative Leader

I hereby certify and state, under penalties of false statement, that this political committee has been designated by me, a General Assembly Leader, as a Legislative Leadership Committee, in accordance with Section 9-605(e)(3) of the Connecticut General Statutes.

LEGISLATIVE LEADER SIGNATURE

DATE (mm/dd/yyyy)

ADDITIONAL PAGES FOR SEEC FORM 3

If additional pages are needed to complete all information required in Sections 23, 27, 31, 32, 37 and 39 of the form, please reproduce the "Additional Page" for the appropriate section, and attach the page(s) to the SEEC Form 3.

THIS PAGE INTENTIONALLY LEFT BLANK

NAME OF COMMITTEE		REGISTRATION TYPE		
Realtors PAC		<input type="radio"/> Original <input checked="" type="radio"/> Amendment/ Biennial with Changes		
23H. OFFICER NAME		TITLE OR POSITION		
MaryAnn Hebert		Trustee		
OFFICER RESIDENCE ADDRESS				
Address 15 Ridgeview Rd		City Southbury	State CT	Zip Code 06488
23I. OFFICER NAME		TITLE OR POSITION		
Dan Keune		Trustee		
OFFICER RESIDENCE ADDRESS				
Address 335 Somers Rd		City Ellington	State CT	Zip Code 06029
23J. OFFICER NAME		TITLE OR POSITION		
Augustus Ryer		Trustee		
OFFICER RESIDENCE ADDRESS				
Address 13 Sunset Ln		City Ridgefield	State CT	Zip Code 06029
23K. OFFICER NAME		TITLE OR POSITION		
Joseph S Stafford		Trustee		
OFFICER RESIDENCE ADDRESS				
Address 48 Claybar Dr		City West Hartford	State CT	Zip Code 06117
23L. OFFICER NAME		TITLE OR POSITION		
Byran J Tunney		Trustee		
OFFICER RESIDENCE ADDRESS				
Address 221 Orchard St		City Cos Cob	State CT	Zip Code 06807
23M. OFFICER NAME		TITLE OR POSITION		
OFFICER RESIDENCE ADDRESS				
Address		City	State	Zip Code
23N. OFFICER NAME		TITLE OR POSITION		
OFFICER RESIDENCE ADDRESS				
Address		City	State	Zip Code
23O. OFFICER NAME		TITLE OR POSITION		
OFFICER RESIDENCE ADDRESS				
Address		City	State	Zip Code

THIS PAGE INTENTIONALLY LEFT BLANK

THIS PAGE INTENTIONALLY LEFT BLANK

NAME OF COMMITTEE	REGISTRATION TYPE		
Realtors PAC	<input type="radio"/> Original	<input checked="" type="radio"/> Amendment/ Biennial with Changes	
32. COMMITTEE ESTABLISHED OR CONTROLLED BY A REGISTERED LOBBYIST			
Name of Registered Lobbyist	<input type="radio"/> Client Lobbyist	<input type="radio"/> Communicator Lobbyist	<input type="radio"/> Both
Name of Registered Lobbyist	<input type="radio"/> Client Lobbyist	<input type="radio"/> Communicator Lobbyist	<input type="radio"/> Both
Name of Registered Lobbyist	<input type="radio"/> Client Lobbyist	<input type="radio"/> Communicator Lobbyist	<input type="radio"/> Both
Name of Registered Lobbyist	<input type="radio"/> Client Lobbyist	<input type="radio"/> Communicator Lobbyist	<input type="radio"/> Both
Name of Registered Lobbyist	<input type="radio"/> Client Lobbyist	<input type="radio"/> Communicator Lobbyist	<input type="radio"/> Both
Name of Registered Lobbyist	<input type="radio"/> Client Lobbyist	<input type="radio"/> Communicator Lobbyist	<input type="radio"/> Both
Name of Registered Lobbyist	<input type="radio"/> Client Lobbyist	<input type="radio"/> Communicator Lobbyist	<input type="radio"/> Both
Name of Registered Lobbyist	<input type="radio"/> Client Lobbyist	<input type="radio"/> Communicator Lobbyist	<input type="radio"/> Both
Name of Registered Lobbyist	<input type="radio"/> Client Lobbyist	<input type="radio"/> Communicator Lobbyist	<input type="radio"/> Both
Name of Registered Lobbyist	<input type="radio"/> Client Lobbyist	<input type="radio"/> Communicator Lobbyist	<input type="radio"/> Both
Name of Registered Lobbyist	<input type="radio"/> Client Lobbyist	<input type="radio"/> Communicator Lobbyist	<input type="radio"/> Both
Name of Registered Lobbyist	<input type="radio"/> Client Lobbyist	<input type="radio"/> Communicator Lobbyist	<input type="radio"/> Both
Name of Registered Lobbyist	<input type="radio"/> Client Lobbyist	<input type="radio"/> Communicator Lobbyist	<input type="radio"/> Both
Name of Registered Lobbyist	<input type="radio"/> Client Lobbyist	<input type="radio"/> Communicator Lobbyist	<input type="radio"/> Both
Name of Registered Lobbyist	<input type="radio"/> Client Lobbyist	<input type="radio"/> Communicator Lobbyist	<input type="radio"/> Both
Name of Registered Lobbyist	<input type="radio"/> Client Lobbyist	<input type="radio"/> Communicator Lobbyist	<input type="radio"/> Both
Name of Registered Lobbyist	<input type="radio"/> Client Lobbyist	<input type="radio"/> Communicator Lobbyist	<input type="radio"/> Both
Name of Registered Lobbyist	<input type="radio"/> Client Lobbyist	<input type="radio"/> Communicator Lobbyist	<input type="radio"/> Both
Name of Registered Lobbyist	<input type="radio"/> Client Lobbyist	<input type="radio"/> Communicator Lobbyist	<input type="radio"/> Both
Name of Registered Lobbyist	<input type="radio"/> Client Lobbyist	<input type="radio"/> Communicator Lobbyist	<input type="radio"/> Both
Name of Registered Lobbyist	<input type="radio"/> Client Lobbyist	<input type="radio"/> Communicator Lobbyist	<input type="radio"/> Both

THIS PAGE INTENTIONALLY LEFT BLANK

NAME OF COMMITTEE	REGISTRATION TYPE
Realtors PAC	<input type="radio"/> Original <input checked="" type="radio"/> Amendment/ Biennial with Changes
33 COMMITTEE ESTABLISHED BY AN ELECTED STATEWIDE OFFICIAL, GENERAL ASSEMBLY MEMBER OR AGENT THEREOF	
Name of Member of Official	
Name of Member of Official	
Name of Member of Official	
Name of Member of Official	
Name of Member of Official	
Name of Member of Official	
Name of Member of Official	
Name of Member of Official	
Name of Member of Official	
Name of Member of Official	
Name of Member of Official	
Name of Member of Official	
Name of Member of Official	
Name of Member of Official	
Name of Member of Official	
Name of Member of Official	
Name of Member of Official	
Name of Member of Official	
Name of Member of Official	
Name of Member of Official	
Name of Member of Official	

THIS PAGE INTENTIONALLY LEFT BLANK

NAME OF COMMITTEE	REGISTRATION TYPE
Realtors PAC	<input type="radio"/> Original <input checked="" type="radio"/> Amendment/ Biennial with Changes

38. COMMITTEE ESTABLISHED BY OR ON BEHALF OF A STATE CONTRACTOR OR PRINCIPAL OF A STATE CONTRACTOR
Name of Principal
Name of Principal
Name of Principal
Name of Principal
Name of Principal
Name of Principal
Name of Principal
Name of Principal
Name of Principal
Name of Principal
Name of Principal
Name of Principal
Name of Principal
Name of Principal
Name of Principal
Name of Principal
Name of Principal
Name of Principal
Name of Principal
Name of Principal
Name of Principal

THIS PAGE INTENTIONALLY LEFT BLANK

NAME OF COMMITTEE	REGISTRATION TYPE
Realtors PAC	<input type="radio"/> Original <input checked="" type="radio"/> Amendment/ Biennial with Changes
40. COMMITTEE ESTABLISHED BY OR ON BEHALF OF A PRINCIPAL OF AN INVESTMENT SERVICES FIRM	
Name of Principal	
Name of Principal	
Name of Principal	
Name of Principal	
Name of Principal	
Name of Principal	
Name of Principal	
Name of Principal	
Name of Principal	
Name of Principal	
Name of Principal	
Name of Principal	
Name of Principal	
Name of Principal	
Name of Principal	
Name of Principal	
Name of Principal	
Name of Principal	
Name of Principal	
Name of Principal	
Name of Principal	
Name of Principal	
Name of Principal	