

# SEEC FORM 2

STATE ELECTIONS ENFORCEMENT COMMISSION

## Party Committee Registration

Revised January 2016



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Received by SEEC

01/21/2023 08:00 AM

<b>REGISTRATION TYPE</b> <input type="checkbox"/> Initial <input checked="" type="checkbox"/> Amendment		<b>1. COMMITTEE NAME</b> Westport Democratic Town Committee			<b>2. ACRONYM</b> WDTC	
<b>3. SUBTYPE OF COMMITTEE</b> <input checked="" type="checkbox"/> Town Committee <input type="checkbox"/> State Central Committee			<b>4. PARTY AFFILIATION</b> <input type="checkbox"/> Republican <input checked="" type="checkbox"/> Democrat <input type="checkbox"/> Other (Specify) _____			
<b>5. COMMITTEE ADDRESS</b> Address PO Box 381 City Westport			State CT		Zip Code 06880	
			<b>6. COMMITTEE EMAIL &amp; WEBSITE</b> Email Address  Website www.westportdemocrats.org			
<b>7. CHAIRPERSON NAME</b>						
First Name Michelle		MI	Last Name Mechanic		Suffix	
<b>8. CHAIRPERSON RESIDENCE ADDRESS</b> Street Address 6 Blackberry Ln City Westport			State CT	Zip Code 06880-27		
			<b>9. CHAIRPERSON MAILING ADDRESS (If different)</b> Address  City  State  Zip Code			
<b>10. CHAIRPERSON TELEPHONE</b> (Include Area Code) 845 608 4963			<b>11. CHAIRPERSON EMAIL ADDRESS</b> michellemechanic@gmail.com			
<b>12. TREASURER NAME</b>						
First Name Alan		MI	Last Name Shinbaum		Suffix	
<b>13. TREASURER RESIDENCE ADDRESS</b> Street Address 202 Harvest Cmns City Westport			State CT	Zip Code 06880		
			<b>14. TREASURER MAILING ADDRESS (If different)</b> Address  City  State  Zip Code			
<b>15. TREASURER TELEPHONE</b> (Include Area Code) 203 984 8478			<b>16. TREASURER EMAIL ADDRESS</b> ashinbaum@optonline.net			
<b>17. DEPUTY TREASURER NAME</b>						
First Name Brian		MI	Last Name Macpherson		Suffix	
<b>18. DEPUTY TREASURER RESIDENCE ADDRESS</b> Street Address 4 Woods End Ln City Westport			State CT	Zip Code 06880		
			<b>19. DEPUTY TREASURER MAILING ADDRESS (If different)</b> Address  City  State  Zip Code			
<b>20. DEPUTY TREASURER TELEPHONE</b> (Include Area Code) 203 984 9599			<b>21. DEPUTY TREASURER EMAIL ADDRESS</b> brmac09@yahoo.com			

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.

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REGISTRATION TYPE		COMMITTEE NAME			
<input type="checkbox"/> Initial <input checked="" type="checkbox"/> Amendment		<b>Westport Democratic Town Committee</b>			
<b>22. ALTERNATE DEPUTY TREASURER NAME</b> <i>(State Central Committees ONLY)</i>					
First Name		MI	Last Name		Suffix
<b>23. ALTERNATE DEPUTY TREASURER RESIDENCE ADDRESS</b>			<b>24. ALTERNATE DEPUTY TREASURER MAILING ADDRESS</b> <i>(If different)</i>		
Street Address			Address		
City	State	Zip Code	City	State	Zip Code
<b>25. ALTERNATE DEPUTY TREASURER TELEPHONE</b> <i>(Include Area Code)</i>		<b>26. ALTERNATE DEPUTY TREASURER EMAIL ADDRESS</b>			
<b>27. DEPOSITORY INSTITUTION NAME</b>					
Fairfield County Bank					
<b>28. DEPOSITORY INSTITUTION ADDRESS</b>					
Address 20 Compo Road South, Westport, CT 06880					
<b>29. CERTIFICATION</b>					
Chairperson					
<p>I hereby certify and state, under penalties of false statement, that all of the designations set forth in this party committee registration statement are true and accurate 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 to such position.</p>					
Michelle Mechanic			01/09/2023		
CHAIRPERSON SIGNATURE			DATE (mm/dd/yyyy)		
Treasurer					
<p>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 party committee. I certify that I am an elector in the State of Connecticut. I intend to comply with all the campaign finance registration and disclosure requirements as contained in Chapter 155 through 157 of the General Statutes, and to abide by any prohibitions, limitations or restrictions concerning campaign contributions and expenditures.</p> <p>I certify that I have paid any civil penalties or forfeitures assessed pursuant to Chapters 155 to 157, inclusive.</p> <p>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.</p> <p>I certify that I am not otherwise barred from serving as a treasurer by order of the State Elections Enforcement Commission.</p>					
Alan Shinbaum			01/21/2023		
TREASURER SIGNATURE			DATE (mm/dd/yyyy)		

