



SEEC FORM 3

Political Committee (PAC) Registration
STATE ELECTIONS ENFORCEMENT COMMISSION
Revised 2024

Received by SEEC

11/06/2024 10:23 PM

REGISTRATION TYPE

- Original
- Amendment/
Biennial with Changes

| | | | | | |
|--|-------------|--|--|-------------------|-------------------|
| 1. NAME OF COMMITTEE | | | | 2. ACRONYM | |
| District B Democratic Committee | | | | | |
| 3. COMMITTEE ADDRESS | | | 4. COMMITTEE E-MAIL / 5. COMMITTEE WEBSITE | | |
| Address 15 Madison St Unit H3 | | | Email seolive@aol.com | | |
| City Norwalk | State CT | Zip Code 06854 | Website | | |
| 6. CHAIRPERSON NAME | | | | | |
| First Name Sonia | | MI E | Last Name Oliver | | Suffix |
| 7. CHAIRPERSON RESIDENCE ADDRESS | | | 8. CHAIRPERSON MAILING ADDRESS (If different) | | |
| Street Address 15 Madison St Unit H3 | | | Address | | |
| City Norwalk | State CT | Zip Code 06854 | City | State | Zip Code |
| 9. CHAIRPERSON TELEPHONE | | 10. CHAIRPERSON E-MAIL ADDRESS | | | |
| (Include Area Code) 203 838 9504 | | seolive@aol.com | | | |
| 11. TREASURER NAME | | | | | |
| First Name Jody | | MI K | Last Name Proct | | Suffix |
| 12. TREASURER RESIDENCE ADDRESS | | | 13. TREASURER MAILING ADDRESS (If different) | | |
| Street Address 14 Naromake Ave | | | Address | | |
| City Norwalk | State CT | Zip Code 06854 | City | State | Zip Code |
| 14. TREASURER TELEPHONE | | 15. TREASURER E-MAIL ADDRESS | | | |
| (Include Area Code) 203 722 0753 | | JKP730@gmail.com | | | |
| 16. DEPUTY TREASURER NAME | | | | | |
| First Name | | MI | Last Name | | Suffix |
| 17. DEPUTY TREASURER RESIDENCE ADDRESS | | | 18. DEPUTY TREASURER MAILING ADDRESS (If different) | | |
| Street Address | | | Address | | |
| City | State | Zip Code | City | State | Zip Code |
| 19. DEPUTY TREASURER TELEPHONE | | 20. DEPUTY TREASURER E-MAIL ADDRESS | | | |
| (Include Area Code) | | | | | |
| 21. DEPOSITORY INSTITUTION NAME | | | | | |
| Webster Bank | | | | | |
| 22. DEPOSITORY INSTITUTION ADDRESS | | | | | |
| Address 402 Connecticut Avenue, Norwalk, CT 06854 | | | City | | State Zip Code |

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.

| NAME OF COMMITTEE | | REGISTRATION TYPE | |
|---------------------------------|------|--|----------|
| District B Democratic Committee | | <input type="radio"/> Original <input checked="" type="radio"/> Amendment/ Biennial with Changes | |
| 23. OFFICER NAME | | TITLE OR POSITION | |
| | | | |
| OFFICER RESIDENCE ADDRESS | | | |
| Address | City | State | Zip Code |
| 23A. OFFICER NAME | | TITLE OR POSITION | |
| | | | |
| OFFICER RESIDENCE ADDRESS | | | |
| Address | City | State | Zip Code |
| 23B. OFFICER NAME | | TITLE OR POSITION | |
| | | | |
| OFFICER RESIDENCE ADDRESS | | | |
| Address | City | State | Zip Code |
| 23C. OFFICER NAME | | TITLE OR POSITION | |
| | | | |
| OFFICER RESIDENCE ADDRESS | | | |
| Address | City | State | Zip Code |
| 23D. OFFICER NAME | | TITLE OR POSITION | |
| | | | |
| OFFICER RESIDENCE ADDRESS | | | |
| Address | City | State | Zip Code |
| 23E. OFFICER NAME | | TITLE OR POSITION | |
| | | | |
| OFFICER RESIDENCE ADDRESS | | | |
| Address | City | State | Zip Code |
| 23F. OFFICER NAME | | TITLE OR POSITION | |
| | | | |
| OFFICER RESIDENCE ADDRESS | | | |
| Address | City | State | Zip Code |
| 23G. OFFICER NAME | | TITLE OR POSITION | |
| | | | |
| OFFICER RESIDENCE ADDRESS | | | |
| Address | City | State | Zip Code |

| | | | |
|--|----------------------|--|---------------------------------------|
| NAME OF COMMITTEE | | REGISTRATION TYPE | |
| District B Democratic Committee | | <input type="radio"/> Original <input checked="" type="radio"/> Amendment/ Biennial with Changes | |
| 24. COMMITTEE SUBTYPE (Select a single committee subtype under A or B. If you check B, you must also check one of four caucus subtypes) | | | |
| A. <input checked="" type="radio"/> Two or More Individuals <input type="radio"/> Labor Union <input type="radio"/> Two or More Committees (Event(s)) <input type="radio"/> Other Organization <input type="radio"/> Business Entity <input type="radio"/> Legislative Leadership | | B. <input type="checkbox"/> Legislative Caucus (Select subtype) <input type="radio"/> Senate Democrats <input type="radio"/> House Democrats <input type="radio"/> Senate Republicans <input type="radio"/> House Republicans | |
| 25. PURPOSE OF COMMITTEE (Select a single committee purpose under A or B and applicable subtype) | | | |
| A. <input checked="" type="radio"/> Ongoing (Select subtype) <input type="radio"/> State Elections Only <input type="radio"/> Municipal Elections Only <input checked="" type="radio"/> Both | | B. <input type="radio"/> Durational (Select subtype) <input type="radio"/> Single Election Date _____ <input type="radio"/> Single Referendum Date _____ <input type="radio"/> Single Primary Date _____ <input type="radio"/> Constitutional Amendment Date _____ <input type="radio"/> Single Candidate <input type="radio"/> Event(s) (Names of Participating Committees) _____ <input type="radio"/> Political Slate Committee _____ | |
| 26. REFERENDUM QUESTION OR CONSTITUTIONAL AMENDMENT ONLY | | 27. GROUP'S POSITION ON THE REFERENDUM QUESTION OR CONSTITUTIONAL AMENDMENT | |
| Brief description of subject matter of Referendum Question or Constitutional Amendment | | <input type="radio"/> Support <input type="radio"/> Oppose | |
| 28. DURATIONAL COMMITTEE FORMED FOR SINGLE OR MULTIPLE CANDIDATES ONLY | | | <input type="checkbox"/> See Addendum |
| Position <input type="radio"/> Support <input type="radio"/> Oppose | Name of Candidate(s) | Office(s) Sought | Party Designation |
| 29. COMMITTEES ESTABLISHED BY BUSINESS ENTITY, LABOR UNION OR OTHER MEMBERSHIP ASSOCIATION ONLY | | | |
| Entity Name | Address | City | State Zip Code |
| 29a. IF THE COMMITTEE IS ESTABLISHED BY A PERSON OTHER THAN A HUMAN BEING, IS THAT PERSON MAKING THE EXPENDITURE A FOREIGN NATIONAL? | | | |
| <input checked="" type="radio"/> No <input type="radio"/> Yes | | | |
| 30. HOW WILL FUNDS BE RECEIVED? | | 31. COMMITTEE A COMPONENT MEMBER OF A STATEWIDE ENTITY | |
| <i>Committees formed by a Labor Union or Other Organization ONLY</i> <input type="radio"/> Treasury <input type="radio"/> Voluntary Member Contributions | | <i>(i.e. AFL-CIO, AFSCME, CBIA, etc.)</i> <input type="radio"/> No <input type="radio"/> Yes (Name & Address) _____ | |
| 32. IS COMMITTEE ESTABLISHED OR CONTROLLED BY A REGISTERED LOBBYIST? | | | <input type="checkbox"/> See Addendum |
| <input checked="" type="radio"/> No <input type="radio"/> Yes If Yes, Name of Registered Lobbyist _____ | | <input type="radio"/> Client Lobbyist <input type="radio"/> Communicator Lobbyist <input type="radio"/> Both | |
| 33. IS COMMITTEE ESTABLISHED BY AN ELECTED STATEWIDE OFFICIAL, GENERAL ASSEMBLY MEMBER OR AGENT THEREOF? | | | |
| <input checked="" type="radio"/> No <input type="radio"/> Yes If Yes, Name of Official Member _____ | | | <input type="checkbox"/> See Addendum |
| 34. IS COMMITTEE ESTABLISHED FOR A SENATORIAL DISTRICT ? | | 35. IS COMMITTEE ESTABLISHED FOR AN ASSEMBLY DISTRICT? | |
| <input type="radio"/> No <input checked="" type="radio"/> Yes If Yes, District Number <u>25</u> | | <input type="radio"/> No <input type="radio"/> Yes If Yes, District Number _____ | |

