



# SEEC FORM 3

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

Received by SEEC

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**REGISTRATION TYPE**

- Original
- Amendment/  
Biennial with Changes

<b>1. NAME OF COMMITTEE</b>				<b>2. ACRONYM</b>			
Connecticut Education Association Political Action Committee				CEA PAC			
<b>3. COMMITTEE ADDRESS</b>				<b>4. COMMITTEE E-MAIL / 5. COMMITTEE WEBSITE</b>			
Address 21 Oak St Ste 500				Email gusm@cea.org			
City Hartford		State CT	Zip Code 06106	Website			
<b>6. CHAIRPERSON NAME</b>							
First Name Robert		MI	Last Name Brown			Suffix	
<b>7. CHAIRPERSON RESIDENCE ADDRESS</b>				<b>8. CHAIRPERSON MAILING ADDRESS (If different)</b>			
Street Address 587 Burritt St				Address 21 Oak St Ste 500			
City Plantsville		State CT	Zip Code 06479	City Hartford		State CT	Zip Code 06106
<b>9. CHAIRPERSON TELEPHONE</b>				<b>10. CHAIRPERSON E-MAIL ADDRESS</b>			
(Include Area Code) 860 621 0416				chopin7777@aol.com			
<b>11. TREASURER NAME</b>							
First Name Nadia		MI	Last Name Wentzell			Suffix	
<b>12. TREASURER RESIDENCE ADDRESS</b>				<b>13. TREASURER MAILING ADDRESS (If different)</b>			
Street Address 1102 Twin Circle Dr				Address 21 Oak St Ste 500			
City South Windsor		State CT	Zip Code 06074	City Hartford		State CT	Zip Code 06106
<b>14. TREASURER TELEPHONE</b>				<b>15. TREASURER E-MAIL ADDRESS</b>			
(Include Area Code) 860 990 3731				nadwentzell@gmail.com			
<b>16. DEPUTY TREASURER NAME</b>							
First Name		MI	Last Name			Suffix	
<b>17. DEPUTY TREASURER RESIDENCE ADDRESS</b>				<b>18. DEPUTY TREASURER MAILING ADDRESS (If different)</b>			
Street Address				Address			
City		State	Zip Code	City		State	Zip Code
<b>19. DEPUTY TREASURER TELEPHONE</b>				<b>20. DEPUTY TREASURER E-MAIL ADDRESS</b>			
(Include Area Code)							
<b>21. DEPOSITORY INSTITUTION NAME</b>							
Wells Fargo							
<b>22. DEPOSITORY INSTITUTION ADDRESS</b>							
Address 10 State House Square, Hartford, CT 06103				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	
Connecticut Education Association Political Action 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)			
<b>A.</b> <input type="radio"/> Two or More Individuals <input checked="" 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>B.</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)			
<b>A.</b> <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>B.</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 <span style="float: right;"><input type="checkbox"/> See Addendum</span>			
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
Connecticut Education Associatio	21 Oak St Ste 500	Hartford	CT    06106
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	
Committees formed by a Labor Union or Other Organization ONLY <input checked="" type="radio"/> Treasury <input type="radio"/> Voluntary Member Contributions		(i.e. AFL-CIO, AFSCME, CBIA, etc.) <input type="radio"/> No <input checked="" type="radio"/> Yes (Name & Address) <u>Connecticut Education /</u> <u>21 Oak St Ste 500, Hartford, CT, 06106</u>	
32. IS COMMITTEE ESTABLISHED OR CONTROLLED BY A REGISTERED LOBBYIST? <span style="float: right;"><input type="checkbox"/> See Addendum</span>			
<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? <span style="float: right;"><input type="checkbox"/> See Addendum</span>			
<input checked="" type="radio"/> No <input type="radio"/> Yes If Yes, Name of Official Member _____			
34. IS COMMITTEE ESTABLISHED FOR A SENATORIAL DISTRICT ?		35. IS COMMITTEE ESTABLISHED FOR AN ASSEMBLY DISTRICT?	
<input type="radio"/> No <input type="radio"/> Yes If Yes, District Number _____		<input type="radio"/> No <input type="radio"/> Yes If Yes, District Number _____	



NAME OF COMMITTEE	REGISTRATION TYPE
Connecticut Education Association Political Action Committee	<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. Neither I, nor any person (including any human being, business, other legal entity or association) that established or controls this committee, is a foreign national.

**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. Neither I, nor any person (including any human being, business, other legal entity or association) that established or controls this committee, is a foreign national.

**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. Neither I, nor any person (including any human being, business, other legal entity or association) that established or controls this committee, is a foreign national.

\_\_\_\_\_  
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.