

SEEC Registration and Disclosure Forms



available @ portal.ct.gov/seec

10 DAY RULE

A candidate must file SEEC Form 1 and Form 1A or 1B with the Town Clerk within 10 days of becoming a candidate

The 10 days begins when the Town Clerk **receives** party endorsement or other notice of qualification for ballot or when the candidate spends or receives money for the purpose of bringing about his election.

Failure to file SEEC Form 1 and Form 1A or Form 1B will result in the imposition of a **MANDATORY \$100 penalty** by the Town Clerk. If candidate still fails to file, Town Clerk refers matter to the Commission.

SEEC FORM 1 and Form 1A/1B

Registration by Candidate

SEEC FORM 1

STATE ELECTIONS ENFORCEMENT COMMISSION

Registration by Candidate

Revised September 2016




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REGISTRATION TYPE		1. ELECTION DATE (mm/dd/yyyy)		2. MUNICIPALITY	
<input type="checkbox"/> Initial <input type="checkbox"/> Amendment				(If applicable)	
3. OFFICE OR POSITION SOUGHT				4. DISTRICT NUMBER	
				(If applicable)	
5. PARTY AFFILIATION					
<input type="checkbox"/> Republican <input type="checkbox"/> Democratic <input type="checkbox"/> Other (Specify) _____					
6. CANDIDATE NAME					
First Name		MI	Last Name		Suffix
7. CANDIDATE RESIDENCE ADDRESS			8. CANDIDATE MAILING ADDRESS (If different)		
Street Address			Address		
City	State	Zip Code	City	State	Zip Code
9. CANDIDATE TELEPHONE			10. CANDIDATE EMAIL ADDRESS		
(Include Area Code)					
11. DESIGNATION OF CAMPAIGN FUNDING SOURCE					
(Check one)					
<input type="checkbox"/> A. I am forming a candidate committee and I am required to file a Candidate Committee Registration Statement. <i>Go to Form 1A and complete pages 2 and 3 — Candidate Registration Statement.</i>					
<input type="checkbox"/> B. I am exempt from forming a candidate committee and I am filing a Certification of Exemption from Forming a Candidate Committee. <i>Go to Form 1B and complete page 4 — Certification of Exemption from Forming a Candidate Committee.</i>					
<p>Important Notice: Failure of a candidate to complete this page <i>together with</i> either Form 1A, "Registration of Candidate Committee," or Form 1B "Exemption from Forming a Candidate Committee," within 10 days of becoming a candidate will subject the candidate to a mandatory \$100 late filing fee. See Section 9-623(b), Connecticut General Statutes.</p>					
<p><i>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.</i></p>					

SEEC FORM 1 and Form 1A/1B

Candidate Committee Registration


SEEC FORM 1A
STATE ELECTIONS ENFORCEMENT COMMISSION
Candidate Committee Registration Statement
Revised September 2016



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REGISTRATION TYPE		CANDIDATE NAME	
<input type="checkbox"/> Initial <input type="checkbox"/> Amendment			
12. COMMITTEE NAME			
13. COMMITTEE ADDRESS		14. & 15. COMMITTEE EMAIL ADDRESS & WEBSITE	
Address		Email Address	
City	State	Zip Code	Website
16. TREASURER NAME			
First Name	MI	Last Name	Suffix
17. TREASURER RESIDENCE ADDRESS		18. TREASURER MAILING ADDRESS (if different)	
Street Address		Address	
City	State	Zip Code	City
			State
			Zip Code
19. TREASURER TELEPHONE		20. TREASURER EMAIL ADDRESS	
(Include Area Code)			
21. DEPUTY TREASURER NAME			
First Name	MI	Last Name	Suffix
22. DEPUTY TREASURER RESIDENCE ADDRESS		23. DEPUTY TREASURER MAILING ADDRESS (if different)	
Street Address		Address	
City	State	Zip Code	City
			State
			Zip Code
24. DEPUTY TREASURER TELEPHONE		25. DEPUTY TREASURER EMAIL ADDRESS	
(Include Area Code)			
26. DEPOSITORY INSTITUTION NAME			
27. DEPOSITORY INSTITUTION ADDRESS			
Address		City	State
			Zip Code

SEEC FORM 1B
STATE ELECTIONS ENFORCEMENT COMMISSION
Certification of Exemption From Forming a Candidate Committee
Revised September 2016



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REGISTRATION TYPE	CANDIDATE NAME
<input type="checkbox"/> Initial <input type="checkbox"/> Amendment	
12. REASON FOR EXEMPTION FROM FORMING A CANDIDATE COMMITTEE	
I hereby certify that I am exempt from forming a candidate committee because: (CHECK ONE)	
<input type="checkbox"/> A. I am one of a slate of candidates whose campaigns are being funded solely by a town committee or a political committee formed for a single election or primary and expenditures made on my behalf will be reported by the committee sponsoring my candidacy. The name of this sponsoring committee is: <div style="text-align: center;">OR</div>	
<input type="checkbox"/> B. I am funding my campaign entirely from my own personal funds and will not request or receive contributions from other individuals or committees and I understand that if I make expenditures exceeding one thousand dollars (\$1,000) that I shall be responsible for filing financial disclosure statements (SEEC Form 23) according to the same schedule and in the same manner as required of treasurers of candidate committees. <div style="text-align: center;">OR</div>	
<input type="checkbox"/> C. I do not intend to receive or expend funds in excess of one thousand dollars (\$1,000). <div style="text-align: center;">OR</div>	
<input type="checkbox"/> D. I do not intend to receive or expend any funds, including personal funds, for this campaign. 	
13. CERTIFICATION	
I hereby certify and state, under penalties of false statement, that this statement of exemption from forming a candidate committee, for the reason checked above, is true, accurate and complete to the best of my knowledge and belief. <div style="display: flex; justify-content: space-between;"> CANDIDATE SIGNATURE _____ DATE (mm/dd/yyyy) _____ </div>	

Exemption from Forming a Candidate Committee



SEEC FORM 3

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

REGISTRATION TYPE
<input type="checkbox"/> Original
<input type="checkbox"/> Amendment/ Biennial with Changes

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1. NAME OF COMMITTEE				2. ACRONYM			
3. COMMITTEE ADDRESS				4. COMMITTEE E-MAIL / 5. COMMITTEE WEBSITE			
Address				Email			
City		State	Zip Code	Website			
6. CHAIRPERSON NAME							
First Name		MI	Last Name		Suffix		
7. CHAIRPERSON RESIDENCE ADDRESS				8. CHAIRPERSON MAILING ADDRESS (if different)			
Street Address				Address			
City		State	Zip Code	City		State	Zip Code
9. CHAIRPERSON TELEPHONE (include Area Code)				10. CHAIRPERSON E-MAIL ADDRESS			
11. TREASURER NAME							
First Name		MI	Last Name		Suffix		
12. TREASURER RESIDENCE ADDRESS				13. TREASURER MAILING ADDRESS (if different)			
Street Address				Address			
City		State	Zip Code	City		State	Zip Code
14. TREASURER TELEPHONE (include Area Code)				15. TREASURER E-MAIL ADDRESS			
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 (include Area Code)				20. DEPUTY TREASURER E-MAIL ADDRESS			
21. DEPOSITORY INSTITUTION NAME							
22. DEPOSITORY INSTITUTION ADDRESS							
Address				City		State	Zip Code

SEEC FORM 3

Political Committee (PAC) Registration


Slate Committees,
Durational Traditional
Political Committees,
and Ongoing
Traditional
Political Committees

SEEC FORM 20

Itemized Campaign Finance Disclosure Statement


Exploratory and Candidate Committees for Elected Offices in Municipal Elections and Judge of Probate in State Elections


Political Committees and Party Committees in all Elections

SEEC FORM 20			Page 1 of 17		
Itemized Campaign Finance Disclosure Statement					
CONNECTICUT STATE ELECTIONS ENFORCEMENT COMMISSION					
Revised January 2015					
			Do Not Mark in This Space For Official Use Only		
COVER PAGE					
1. NAME OF COMMITTEE					
2. TREASURER NAME					
First	MI	Last	Suffix		
3. TREASURER ADDRESS					
Street Address			City	State	Zip Code
4. ELECTION/REFERENDUM DATE		5. OFFICE SOUGHT <i>(Complete only if Candidate Committee)</i>		6. DISTRICT NUMBER	
(mm/dd/yyyy)				<i>(if applicable)</i>	
7. CANDIDATE NAME <i>(Complete only if Candidate or Exploratory Committee)</i>					
First	MI	Last	Suffix		
8. TYPE OF REPORT <i>(Check One Box)</i>					
<input type="checkbox"/> January 10 filing	<input type="checkbox"/> 7th day preceding primary	<input type="checkbox"/> 7th day preceding referendum	<input type="checkbox"/> Initial Contribution or Disbursement <i>(PACs ONLY)</i>		
<input type="checkbox"/> April 10 filing	<input type="checkbox"/> 30 days following primary	<input type="checkbox"/> 45 days following referendum	<input type="checkbox"/> Amendment to		
<input type="checkbox"/> July 10 filing	<input type="checkbox"/> 7th day preceding election	<input type="checkbox"/> Deficit	Type of Report:		
<input type="checkbox"/> October 10 filing	<input type="checkbox"/> 12th day preceding election <i>(State Central Committees Only)</i>	<input type="checkbox"/> Termination	_____		
<input type="checkbox"/> 24 Hour Independent Expenditure <input type="radio"/> Primary <input type="radio"/> Election	<input type="checkbox"/> 45 days following election not held in November				
9. PERIOD COVERED					
Beginning Date		Ending Date			
_____		thru	_____		
10. CERTIFICATION					
I hereby certify and state, under penalties of false statement, that all of the information set forth on this Itemized Campaign Finance Disclosure Statement for the period covered is true, accurate and complete.					
_____ TREASURER OR DEPUTY TREASURER (SIGNATURE)		_____ PRINT NAME OF SIGNER		_____ DATE (mm/dd/yyyy)	
<i>A person who is found to have knowingly and willfully violated any provisions of the campaign finance statutes faces a civil penalty or imprisonment or both.</i>					

SEEC FORM 8 and SEEC Form 40

Independent Expenditure Political Committees

SEEC FORM 8		Page 1 of 5	
 Independent Expenditure Only Political Committees STATE ELECTIONS ENFORCEMENT COMMISSION Revised July 2014		REGISTRATION TYPE <input type="checkbox"/> Original <input type="checkbox"/> Amendment/ Biennial with Changes	
1. NAME OF COMMITTEE		2. ACRONYM	
<input type="checkbox"/> Previously Registered <small>Name of previous committee (if different from above)</small> <input type="checkbox"/> as Different Committee			
3. COMMITTEE ADDRESS		4. COMMITTEE E-MAIL / 5. COMMITTEE WEBSITE	
Address		Email	
City	State Zip Code	Website	
6. CHAIRPERSON NAME			
First Name	MI	Last Name	Suffix
7. CHAIRPERSON RESIDENCE ADDRESS		8. CHAIRPERSON MAILING ADDRESS (if different)	
Street Address		Address	
City	State Zip Code	City	State Zip Code
9. CHAIRPERSON TELEPHONE		10. CHAIRPERSON E-MAIL ADDRESS	
<small>(Include Area Code)</small>			
11. TREASURER NAME			
First Name	MI	Last Name	Suffix
12. TREASURER RESIDENCE ADDRESS		13. TREASURER MAILING ADDRESS (if different)	
Street Address		Address	
City	State Zip Code	City	State Zip Code
14. TREASURER TELEPHONE		15. TREASURER E-MAIL ADDRESS	
<small>(Include Area Code)</small>			
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	
<small>(Include Area Code)</small>			
21. DEPOSITORY INSTITUTION NAME			
22. DEPOSITORY INSTITUTION ADDRESS			
Address		City State Zip Code	
<small>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.</small>			

SEEC FORM 40		Page 1 of 12	
 Itemized Campaign Finance Disclosure Statement For Independent Expenditure Political Committees CONNECTICUT STATE ELECTIONS ENFORCEMENT COMMISSION Revised May 2016		REVISED 05/09/2016 8:30 AM <small>Do Not Mark in This Space For Official Use Only</small>	
COVER PAGE			
1. NAME OF COMMITTEE		2. ELECTION/REFERENDUM DATE	
3. TREASURER NAME			
First	MI	Last	Suffix
4. TREASURER ADDRESS			
Street Address		City	State Zip Code
5. TYPE OF REPORT (Check One Box)			
<input type="checkbox"/> January 10 filing <input type="checkbox"/> April 10 filing <input type="checkbox"/> July 10 filing <input type="checkbox"/> October 10 filing <input type="checkbox"/> 24 Hour Independent Expenditure ○ Primary ○ Election		<input type="checkbox"/> 7th day preceding primary <input type="checkbox"/> 7th day preceding election <input type="checkbox"/> 45 days following election not held in November <input type="checkbox"/> 7th day preceding referendum <input type="checkbox"/> 45 days following referendum <input type="checkbox"/> Termination <input type="checkbox"/> Initial Contribution or Disbursement <input type="checkbox"/> Amendment to Type of Report: _____	
6. PERIOD COVERED			
Beginning Date		Ending Date	
_____		_____	
thru			
7. CERTIFICATION			
I hereby certify and state, under penalties of false statement, that all of the information set forth on this Itemized Campaign Finance Disclosure Statement for the period covered is true, accurate and complete, and further that any expenditures and obligations disclosed were made independent of any other individual, political committee, party committee, or candidate committee, or agent thereof.			
TREASURER OR DEPUTY TREASURER (SIGNATURE)		PRINT NAME OF SIGNER	DATE (mm/dd/yyyy)
_____		_____	_____
<i>A person who is found to have knowingly and willfully violated any provisions of the campaign finance statutes faces a civil penalty or imprisonment or both.</i>			



STATE OF CONNECTICUT
STATE ELECTIONS ENFORCEMENT COMMISSION
55 Farmington Avenue, Hartford, Connecticut 06105



2021 Filing Calendar

Candidate Committees
Organized for the November 2, 2021 Municipal Election
(September 14, 2021 Primary)
General Statutes § 9-608

Type of Report	Period Covered	Filing Deadline
January 10 Filing	10/01/20 through 12/31/20	01/11/21
April 10 Filing	01/01/21 through 03/31/21	04/12/21
July 10 Filing	04/01/21 through 06/30/21	07/12/21
7 th Day Preceding Primary Filing Committees of candidates in a primary	07/01/21 through 09/05/21	09/07/21 ¹
October 10 Filing Committees of candidates in general election	09/06/21 through 09/30/21 Committees of candidates in general election who were in a primary 07/01/21 through 09/30/21 Committees of candidates in general election who were not in a primary	10/12/21 ²
30 Days Following Primary Filing Committees of candidates unsuccessful in a primary	09/06/21 through 09/30/21	10/12/21 ³
7 th Day Preceding Election Filing Committees of candidates in general election	10/01/21 through 10/24/21	10/26/21 ⁴
Deficit Filing Committees of candidates unsuccessful in a primary	10/01/21 through 12/06/21	12/13/21 ⁴
Termination Filing Committees of candidates unsuccessful in a primary	10/01/21 through 12/13/21	12/20/21 ⁵
January 10 Filing	10/25/21 through 12/31/21	01/10/22 ⁶
Deficit Filing General Election candidate committees	01/01/22 through 01/31/22	02/07/22 ⁷
Termination Filing General Election candidate committees	01/01/22 through 03/31/22	04/07/22 ⁸

2021 Filing Calendars

What Determines “Timeliness”?



Hand delivered by due date

Postmarked by midnight of due date

SEEC Contact Information

- Address:
55 Farmington Avenue, Hartford, CT 06105
- Email:
seec@ct.gov
- Telephone:
(860) 256-2940
- Fax:
(860) 256-2981
- Website:
portal.ct.gov/seec

