

CONNECTICUT STATE ELECTIONS ENFORCEMENT COMMISSION



INSTRUCTIONS FOR SEEC FORM 4 EXPLORATORY COMMITTEE REGISTRATION

Rev. 3/07

SEEC MAILING ADDRESS:

CONNECTICUT ELECTIONS ENFORCEMENT COMMISSION
CAMPAIGN FINANCE DISCLOSURE UNIT—3RD FLOOR
20 TRINITY STREET
HARTFORD, CONNECTICUT 06106-1628

SEEC TELEPHONE NUMBER:

MAIN NUMBER: 860-256-2940
TOLL FREE WITHIN CT: 1-866-SEEC-INFO
FAX NUMBER : 860-256-2981
SEEC WEBSITE ADDRESS: www.ct.gov/seec



GENERAL TERMS

WHO IS A CANDIDATE?

A candidate is an individual who seeks nomination or election to public office, whether or not such individual is successful. An individual is deemed to be a candidate if he or she: personally, or through another person, has solicited or received funds or other resources, or made expenditures, including expenditures from personal funds, for the purpose of bringing about such individual's nomination or election to any office; or has been endorsed or nominated by a political party and is thus entitled to a position on the ballot at an election or primary (whether or not funds or resources have been solicited, received or expended); or is otherwise qualified for placement on the ballot pursuant to the election laws (whether or not funds or resources have been solicited, received or expended).

[Sections 9-601(11), 9-400, 9-406, 9-418, and Subchapter C of Chapter 153, General Statutes]

WHAT IS AN EXPLORATORY COMMITTEE?

An exploratory committee is a committee formed by a candidate who has not yet determined which particular public office to seek, yet desires to raise and spend funds to "test the waters." An exploratory committee may only be established for an office or offices to be elected at the same election (raising or spending funds will trigger candidacy). The sole purpose of such a committee is to decide whether to seek office in a particular election. [Sections 9-601(5), 9-604(c) and 9-608(f), General Statutes]

PURPOSE OF DESIGNATION and WHEN TO FILE?

An individual must give public notice of the manner in which the individual's campaign will be funded within 10 days after becoming a candidate. Generally, each candidate must register a single candidate committee to fund his or her campaign except for a candidate who has not determined whether to seek a particular elective public office may establish an exploratory committee. Failure of the candidate to file an exploratory committee registration form with the proper filing repository within 10 days of becoming a candidate for an undetermined office in the same election will result in the imposition of a mandatory \$100 fine; which must be paid by personal funds of the candidate.

The candidate's designation of a treasurer or a deputy treasurer must be co-signed by such individuals, signifying their acceptance of the appointment. No candidate may form more than one Exploratory Committee in connection with the same election, nor can a candidate maintain an exploratory committee and a candidate committee at the same time for the same election. A candidate *must* designate a Campaign Treasurer to be responsible for receiving contributions, making expenditures and filing the financial disclosure statements required by Sec. 9-608. A Deputy Campaign Treasurer *may* also be appointed. The Campaign Treasurer and Deputy Campaign Treasurer must be electors (registered voters) of this state. A candidate may not serve as his/her own Campaign Treasurer or Deputy Treasurer. For other restrictions on eligibility to serve in these positions, see **TREASURER INFORMATION**. A single checking account must be established with a depository institution situated in this state, and the name of such institution must be designated on this form. This registration must be on file with the proper authority before any contributions are made, solicited or received and before any expenditures is made.

[Sections 9-604(a), (b) General Statutes]

WHERE TO FILE THIS FORM?

If you are considering to run for the office of Governor, Lieutenant Governor, Secretary of the State, Treasurer, Comptroller, Attorney General, Judge of Probate, State Senator or State Representative, you must file this form with the State Elections Enforcement Commission at: State Elections Enforcement Commission, Campaign Finance Disclosure Unit--3rd Floor, 20 Trinity St., Hartford, CT 06106-1628. If you are considering to run for an elective office in a municipal election, you must file this form with the Town Clerk in the municipality in which you are a candidate.

ADDITIONAL INFORMATIONAL RESOURCES

For complete rules and definitions relating to the financing of a candidate's campaign, you are urged to read either "A Guide for Candidates for State Office, General Assembly and Judge of Probate" or "A Guide for Municipal Candidates," depending upon the type of office you are seeking. These publications are available at the Commission's offices or on its webpage located at www.ct.gov/seec after clicking on the "Publications" link.

QUESTIONS?

If you have any questions concerning filing dates, need additional forms, or if you need guidance in proper campaign finance reporting or have questions pertaining to the interpretation of the campaign finance laws, please call the State Elections Enforcement Commission in Hartford at 860-256-2940 or toll free within Connecticut at 866-733-2463 (outside of the Hartford area).



EXPLORATORY COMMITTEE REGISTRATION

REGISTRATION TYPE?

Initial: Check this box if the candidate is filing his/her first SEEC FORM 4 for the election indicated in the first category below.

Amended: Check this box if changes are being made to information on a previously filed SEEC FORM 4. You may amend by adding only the new or updated information that has changed since the candidate's previously filed SEEC FORM 4. Please note that whenever any information contained on this SEEC FORM 4 changes, the candidate must file an amended SEEC FORM 4 within ten (10) days of the date of the change.

ELECTION AND EXPLORATORY COMMITTEE INFORMATION?

- 1. Election Date:** In *mm/dd/yyyy* format, provide the election date for which the candidate is considering whether to seek election to a public office.
- 2. Subtype of Exploratory Committee (Office Being Considered):** Please indicate offices candidate is considering in the same election. (*Check either Box 2a or 2b, or 2c, or 2d*):

Box 2a. General Assembly and Statewide Office: Check this box if candidate is considering running for one or more of the following elective offices in the same election: Governor, Lieutenant Governor, Secretary of the State, Treasurer, Comptroller, Attorney General, State Senator or State Representative. Special donor restrictions apply.*

- **Including State Treasurer:** In addition, if box 2a is checked; candidate must indicate, by checking yes or no, if State Treasurer is one of the offices candidate is considering. Special donor restrictions apply to principals of investment services firms.

and

- **Including State Representative:** In addition, if box 2a is checked; candidate must indicate, by checking yes or no, if State Representative is one of the offices candidate is considering. Special donor restrictions apply.*

Box 2b. Statewide Offices only: Check this box if candidate is only considering running for one or more of the following Statewide elective offices in the same election: Governor, Lieutenant Governor, Secretary of the State, Treasurer, Comptroller or Attorney General. Special donor restrictions apply.*

- **Including State Treasurer:** In addition, if box 2b is checked; candidate must indicate, by checking yes or no, if State Treasurer is one of the offices candidate is considering. Special donor restrictions apply to principals of investment services firms.

Box 2c. General Assembly Offices only: Check this box if candidate is only considering running for General Assembly office. Special donor restrictions apply.*

- **Including State Representative:** In addition, if box 2c is checked; candidate must indicate, by checking yes or no, if State Representative is one of the General Assembly offices candidate is considering. Special donor restrictions apply.*

Box 2d. Municipal and Other Offices: Check this box if candidate has not checked boxes 2a, 2b or 2c and is considering running for one or more municipal offices in the same municipal election or for the office of Judge of Probate or Registrar of Voters in a state election.

*[See Sections 9-610(h), 9-612(g), 9-612(f)(1)(2), 9-613(f) and 9-611(b)(1) of the General Statutes for special contribution prohibitions and reduced individual contribution limits applicable to communicator lobbyists, their immediate families and principals of state contractors and prospective state contractors making contributions to candidates checking boxes 2a through 2c.]



CANDIDATE INFORMATION

3. **Candidate Name:** Provide the full name of the candidate; prefix, first name, middle initial, last name and suffix if any.
4. **Candidate Residence Address:** Provide the full and complete residence address of the candidate; which must contain street number, street name, town and zip code. P.O. Boxes are *not* acceptable as a residence address.
5. **Candidate Mailing Address:** Provide candidate's mailing address, if different from residence address. P.O. Boxes *are* acceptable as a mailing address.
6. **Candidate Telephone:** Provide candidate's phone number, including area code.
7. **Candidate E-Mail Address:** Provide e-mail address, if any, of the candidate. Completion of this information is encouraged in order to disseminate important communications in the most efficient and timely manner.
8. **Party Affiliation:** Check appropriate box to indicate the candidate's political party affiliation. If the candidate checks the *other* box, on the line provided, the candidate must state name of the other party affiliation, which may be either a minor party, party designation indicated on a nominating petition circulated by or on behalf of the candidate, or "none". The term "none" signifies that the candidate has not affiliated with a party or party designation on a nominating petition.

COMMITTEE INFORMATION

9. **Committee Name:** Provide the full name of the committee.
10. **Committee Address:** Provide the full and complete address of the committee, if any, which must contain street number, street name, town, state, and zip code. P.O. boxes *are* acceptable as a committee address.
11. **Committee E-Mail Address:** Provide the committee's e-mail address, if any. Completion of this information is encouraged in order to disseminate important communications in the most efficient and timely manner.
12. **Committee Web Site Address:** Provide the committee's web site address, if any.

TREASURER INFORMATION

The campaign treasurer is solely responsible for receiving, depositing, and expending funds, for filing financial disclosure statements with the proper filing repository, and for keeping internal records of all transactions. This SEEC FORM 4 must be co-signed by the treasurer signifying the treasurer's acceptance of the appointment. Commissioners and deputy commissioners of state agencies are prohibited from serving as committee treasurer or deputy.

Communicator Lobbyists are prohibited from serving as committee treasurer or deputy treasurer for exploratory committees of candidates for statewide office and the General Assembly. Principals of State Contractors and Prospective State Contractors are prohibited from serving as committee treasurer or deputy treasurer for exploratory committees of candidates for statewide office and the General Assembly, dependent upon the branch of state government that the contractor does business with. For more information, see SEEC website and link <http://www.c.gov/seec> "State Contractor Contribution Ban." A candidate may not serve as his/her own campaign treasurer or deputy treasurer. Only one individual may serve as treasurer at any one time. (Section 9-601(26), 9-606(a) & (d) and 9-622(11) of the C.G.S.)

13. **Treasurer Name:** Provide the full name of the treasurer; prefix, first name, middle initial, last name and suffix, if any.
14. **Treasurer Residence Address:** Provide the full and complete residence address of the treasurer; which must contain street number, street name, town, state and zip code. P.O. Boxes are *not* acceptable as a residence address.
15. **Treasurer Mailing Address:** Provide treasurer's mailing address if different from residence address. P.O. Boxes *are* acceptable as an alternate mailing address.
16. **Treasurer Telephone:** Provide the treasurer's phone number, including area code.
17. **Treasurer E-Mail Address:** Provide the e-mail address, if any, of the treasurer. Completion of this information is encouraged in order to disseminate important communications in the most efficient and timely manner.

DEPUTY TREASURER INFORMATION (optional)

A deputy treasurer must have the same qualifications and be appointed in the same manner as the campaign treasurer. See restrictions above. The purpose of appointing a deputy treasurer is to have an individual on hand who may function as the treasurer in the event that the treasurer is unable to perform the required duties of the treasurer for any reason (e.g absence, illness). The appointment of a deputy treasurer is optional for all committees.

18. **Deputy Treasurer: (Optional):** Provide the full name of the deputy treasurer; prefix, first name, middle initial, last name and suffix, if any.
19. **Deputy Treasurer Residence Address:** Provide the full and complete residence address of the deputy treasurer, which must contain street number, street name, town, state and zip code. P.O. Boxes are *not* acceptable as a residence address.
20. **Deputy Treasurer Mailing Address:** Provide deputy treasurer's mailing address, if different from the residence address. P.O. Boxes *are* acceptable as an alternate mailing address.
21. **Deputy Treasurer Telephone Number:** Provide the deputy treasurer's phone number, including area code.
22. **Deputy Treasurer E-Mail Address:** Provide the deputy treasurer's e-mail address, if any.



CANDIDATE NAME

Provide the candidate's name for reference purposes in order that the filing repository can re-connect these pages with the previous page of this SEEC FORM 4 should the two become separated.

DEPOSITORY INSTITUTION INFORMATION

A depository institution may be any financial institution situated in or having an office in Connecticut, including but not limited to a bank, savings and loan association, or credit union. It is the treasurer's obligation to establish a single checking account for the deposit of all funds received by the committee. Further, all committee expenditures must be made from this account.

23. **Depository Institution Name:** Provide the complete name of the financial institution located in this state which serves as the depository of the committee's funds.
24. **Depository Institution Address:** Provide the complete address of the committee's depository institution. P.O. Boxes *are* acceptable.
25. **Certification:** The certifications, which are made under penalties of false statement, must be signed and dated by the candidate, campaign treasurer and deputy treasurer, if the candidate has designated an individual to serve as deputy treasurer.

