



*STATE OF CONNECTICUT  
OFFICE OF THE TREASURER*

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**CAMPAIGN CONTRIBUTION DISCLOSURE**

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**COMPANY (“Respondent”)** \_\_\_\_\_

I \_\_\_\_\_(name and title) duly authorized, after diligent inquiry, hereby certify that since January 1, 2014, none of the following have

(1) made a contribution to (a) an exploratory committee or candidate committee established by a candidate for nomination or election to the office of Governor, Lieutenant Governor, Attorney General, State Comptroller, Secretary of the State or State Treasurer, (b) a political committee authorized to make contributions or expenditures to or for the benefit of such candidates, or (c) a party committee; or

(2) knowingly solicited contributions from Respondent’s employees, subcontractors, or principals of subcontractors on behalf of (a) an exploratory committee or candidate committee established by a candidate for nomination or election to the office of Governor, Lieutenant Governor, Attorney General, State Comptroller, Secretary of the State or State Treasurer, (b) a political committee authorized to make contributions or expenditures to or for the benefit of such candidates, or (c) a party committee:

- a. Director of or person having an ownership interest in the Respondent of 5% or greater;
- b. The President, Treasurer, or Executive Vice President (or similar positions) of the Respondent;
- c. An officer or employee of the Respondent having managerial or discretionary responsibilities with respect to services provided to the Office of the Connecticut State Treasurer;
- d. The spouse or dependent child aged 18 or older of any individuals described in subsections a-c; or
- e. A political committee established or controlled by the Respondent or an individual identified in subsections a-d.

Sworn to as true, accurate and complete to the best of my knowledge and belief, under penalty of false statement.

Signed: \_\_\_\_\_

Print name: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_

Sworn and subscribed to before me on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
**Commissioner of the Superior Court/  
Notary Public**

\_\_\_\_\_  
**Commission Expiration Date**