

AFFIDAVIT OF COMPLAINT

STATE ELECTIONS ENFORCEMENT COMMISSION

Revised July 2012



Please complete this form to the fullest extent possible.

The following sections are required and must be completed in full:

I. Identity of Complainant(s)—page 1 | III. Violation(s) Alleged—page 3 | VI. Certification—page 6

I. IDENTITY OF COMPLAINANT(S)

COMPLAINANT'S NAME

First Name Rand	MI	Last Name Stanley	Suffix
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COMPLAINANT'S STREET ADDRESS

Address 87 Rye Street

City Broad Brook	State ct	Zip Code 06016
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COMPLAINANT'S TELEPHONE NUMBER

Home 860	Work	Cell 860-840-8749
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COMPLAINANT'S EMAIL ADDRESS

mainemaritime2021@gmail.com

COMPLAINANT'S NAME

First Name	MI	Last Name	Suffix
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COMPLAINANT'S STREET ADDRESS

Address

City	State	Zip Code
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COMPLAINANT'S TELEPHONE NUMBER

Home	Work	Cell
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COMPLAINANT'S EMAIL ADDRESS

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COMPLAINANT'S NAME

First Name	MI	Last Name	Suffix
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COMPLAINANT'S STREET ADDRESS

Address

City	State	Zip Code
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COMPLAINANT'S TELEPHONE NUMBER

Home	Work	Cell
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COMPLAINANT'S EMAIL ADDRESS

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II. IDENTITY OF RESPONDENT(S)

RESPONDENT'S NAME *(If known; otherwise write "unknown")*

First Name Denise	MI	Last Name Menard	Suffix
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RESPONDENT'S STREET ADDRESS *(If known)*

Address 73 Miller Road		
City Broad Brook	State CT	Zip Code 06016

RESPONDENT'S TELEPHONE NUMBER *(If known)*

Home	Work	Cell 860-558-4797
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RESPONDENT'S EMAIL ADDRESS *(If known)*

dmenard51@gmail.com	STATUTE(S) VIOLATED <i>(If known)</i> §
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RESPONDENT'S NAME *(If known; otherwise write "unknown")*

First Name Angelo	MI	Last Name Sevarino	Suffix
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RESPONDENT'S STREET ADDRESS *(If known)*

Address 26 Barber Hill Road		
City Broad Brook	State ct	Zip Code 06016

RESPONDENT'S TELEPHONE NUMBER *(If known)*

Home	Work	Cell 860-716-0320
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RESPONDENT'S EMAIL ADDRESS *(If known)*

	STATUTE(S) VIOLATED <i>(If known)</i> §
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RESPONDENT'S NAME *(If known; otherwise write "unknown")*

First Name	MI	Last Name	Suffix
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RESPONDENT'S STREET ADDRESS *(If known)*

Address		
City	State	Zip Code

RESPONDENT'S TELEPHONE NUMBER *(If known)*

Home	Work	Cell
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RESPONDENT'S EMAIL ADDRESS *(If known)*

	STATUTE(S) VIOLATED <i>(If known)</i> §
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*Copy and attach page(s) for additional respondents if necessary.
 Please check "See attached Additional Respondent List" and list the number of pages.*

See attached 2 Additional Respondent List pages
Number of Pages



III. VIOLATION(S) ALLEGED

DATE(S) OF ALLEGED VIOLATION(S) *(If known)*

CONCISE STATEMENT OF FACTS

Please be as specific as possible with regard to time, place, and the individual(s) taking actions or failing to act, and in describing their actions as well as other witnesses or persons involved. If applicable, please clearly refer to the names of identified respondents, witnesses, and attached evidence (e.g., See Evidentiary Attachment B.). If you have identified more than one respondent, please identify which respondent is alleged to have committed which action and which specific alleged violation of the statutes.

If you are unable to provide the specific identity of any witnesses in the following **“Witnesses”** section, please provide as much identifying information as possible in the below **“Concise Statement of Facts.”**

The respondent(s) allegedly violated the law as follows:

I have attached my statement.

*Use attached page(s) for additional statement of facts if necessary.
Please check “See attached Additional Statement of Facts” and list the number of pages.*

See attached _____ Additional Statement of Facts pages
Number of Pages



IV. WITNESSES

WITNESS'S NAME (If known)

First Name	MI	Last Name	Suffix
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WITNESS'S STREET ADDRESS (If known)

Address

City	State	Zip Code
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WITNESS'S TELEPHONE NUMBER (If known)

Home	Work	Cell
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WITNESS'S EMAIL ADDRESS (If known)

WITNESS'S NAME (If known)

First Name	MI	Last Name	Suffix
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WITNESS'S STREET ADDRESS (If known)

Address

City	State	Zip Code
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WITNESS'S TELEPHONE NUMBER (If known)

Home	Work	Cell
------	------	------

WITNESS'S EMAIL ADDRESS (If known)

WITNESS'S NAME (If known)

First Name	MI	Last Name	Suffix
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WITNESS'S STREET ADDRESS (If known)

Address

City	State	Zip Code
------	-------	----------

WITNESS'S TELEPHONE NUMBER (If known)

Home	Work	Cell
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WITNESS'S EMAIL ADDRESS (If known)

*Copy and attach page(s) for additional witnesses if necessary.
 Please check "See attached Additional Witness List" and list the number of pages.*

See attached _____ Additional Witness List pages
Number of Pages



V. EVIDENCE

ATTACHED DOCUMENTARY OR REAL EVIDENCE

Please identify each attachment by **number of pages, title, author** and **date** if applicable. Records not identified as attachments shall not be considered a part of the complaint. Please do not provide a website listing as evidence, as this information is subject to change. If you wish to provide Internet or other video or audio communications as evidence, please provide a printed or electronic copy, as appropriate, and list it as an exhibit.

Under "**How Acquired**" please identify your source for the evidence (e.g., delivery from an individual, Internet website, public flyer location). If the source is an individual, please identify the individual in the witness list. If the source is a publication, such as a newspaper, please identify the publication's name and date of the publication.

EVIDENTIARY ATTACHMENT

Title eCRIS search result showing no registration for Better Days Ahead		Number of Pages 1
Author		Date of Publication
How Acquired		Date Acquired

EVIDENTIARY ATTACHMENT

Title 2021 Form 20 for East Windsor Democratic Town Committee (page showing \$ 907.39 dollar deposit)		Number of Pages 14
Author Angelo Sevarino		Date of Publication 1-10-2024
How Acquired eCRIS Search		Date Acquired 6-2-2025

EVIDENTIARY ATTACHMENT

Title Friends of Jason 2023 Campaign receipt sheet (page showing \$849.39 and \$ 1974.39 total)		Number of Pages 12
Author Angelo Sevarino		Date of Publication 1-10-2024
How Acquired East Windsor Town Clerk		Date Acquired 6-2-2025

EVIDENTIARY ATTACHMENT

Title Political Committee Registration Form		Number of Pages 1
Author Carol Muska Chair Person Denise Menard		Date of Publication 5-19-2025
How Acquired East Windsor Town Clerk Treasurer		Date Acquired 6-2-2025

Copy and attach page(s) for additional evidence if necessary.
 Please check "See attached Additional Evidence List" and list the number of pages.

See attached _____ Additional Evidence List pages
Number of Pages



VI. CERTIFICATION

- 1) Each Complainant must sign a separate page and each signature must be separately certified. This complaint will not be considered filed without the name, address, and original **certified** signature of at least one Complainant. Mail or hand-deliver this complaint to:

State Elections Enforcement Commission
55 Farmington Ave
Hartford, CT 06105

- 2) Once filed, this complaint may not be withdrawn by the Complainant(s) except by a vote of the State Elections Enforcement Commission.
- 3) I am aware that criminal penalties may be imposed upon any Complainant who, under penalty of false statement, knowingly files a false complaint.
- 4) The State Elections Enforcement Commission's investigation of a complaint is confidential unless and until the State Elections Enforcement Commission votes to authorize an investigation of a complaint. Until such a vote, neither the Commission nor its staff will release or confirm any information about the complaint except upon written request of a treasurer, deputy treasurer, chairperson or candidate affiliated with a committee that is the subject of the complaint or preliminary investigation.

Guides to the elections laws are available at <http://www.ct.gov/seec>
Connecticut General Statutes are available at <http://www.cga.ct.gov>

CERTIFICATION

I solemnly swear (or affirm) that the above statement is true and accurate to the best of my knowledge and belief.

COMPLAINANT'S SIGNATURE

DATE (mm/dd/yyyy)

Sworn and subscribed before me on this _____ day of _____, 20____

Seal

SIGNATURE OF PERSON ADMINISTERING THE OATH

NAME OF PERSON ADMINISTERING THE OATH (Please Print)

TITLE OF PERSON ADMINISTERING THE OATH

Note: This oath may be administered by anyone authorized by Section 1-24 of the Connecticut General Statutes, which includes: notaries public; justices of the peace; town clerks and assistant town clerks; judges and clerks of any court; and attorneys who are Commissioners of the Superior Court of Connecticut.

STATE OF CONNECTICUT – STATE ELECTIONS ENFORCEMENT
COMMISSION

Complainant

Rand Stanley (Registered voter, East Windsor)

Respondents

1. Angelo P. Severino – was Treasurer of the East Windsor Democratic Town Committee (EWDTC) and of the Friends of Jason 2023 candidate committee. Mr. Severino is a licensed Connecticut attorney and served as Democratic Registrar of Voters, East Windsor.
2. Denise Menard – Democratic Registrar of Voters, East Windsor; former East Windsor First Selectman and former Town Manager of East Longmeadow, MA; long-time campaign treasurer (e.g., for State Representative Jaime S. Foster). Ms. Menard identifies herself as treasurer of “Better Days Ahead PAC.”

Two local committees accepted checks from “Better Days Ahead PAC” well before that PAC ever registered or filed a single disclosure. On May 19, 2025, after years of activity, the group finally submitted its first registration form, but only with the East Windsor Town Clerk and not with the State, even though its paperwork says it will participate in both state and municipal elections. No Form 20 disclosure statements have ever been filed. Given Respondents’ legal training and election experience, these lapses appear knowing and willful.

Timeline

1. Jan 1, 2021 – EWDTC reports a check for 907.39 dollars from “Better Days Ahead PAC.” The report lists Ms. Menard as treasurer but leaves the committee ID blank.
2. Jan 19, 2023 – Friends of Jason 2023 deposits 849.39 dollars from the same PAC; again, no committee ID or check number. Treasurer Severino records the receipt.
3. May 29, 2025 – SEEC releases Final Decision FD-2024-028, fining Mr. Severino for knowingly omitting contributor data in 2023 filings. Mr. Severino signed the consent order and stipulated agreement on May 15, 2025.
4. May 19, 2025 – Four days after the consent order and stipulated agreement was signed, “Better Days Ahead” files its first Political Committee Registration (Form 3) with the Town Clerk. The form is marked “Original,” lists M&T Bank as depository, and

checks the box for an ongoing purpose covering both state and municipal elections. No concurrent Form 3 or Form 20 has been filed with SEEC, and the PAC remains absent from the eCRIS database.

5. The East Windsor Town Clerk confirmed that no prior Form 3, Form 20, or any disclosure statements had ever been filed by Better Days Ahead PAC, before May 19, 2025..

6. SEEC Form 20 Instructions state that a political committee active in more than one election year, or one that supports state-level candidates, must file all Form 20 disclosure statements with the State Elections Enforcement Commission. A Form 20 is due within 48 hours of the committee's first contribution. Better Days Ahead issued checks in 2021 and 2023 yet has never filed any Form 20 with the town clerk or with the state.

Connecticut elections laws require a PAC to register before raising or spending money. Better Days Ahead waited years.

The law requires timely Form 20 filings; none have been filed.

By declaring it will participate in state elections, the PAC must register and file with SEEC, not solely the Town Clerk.

Committees may not accept money from an unregistered PAC. The law bars the deposits that EWDTC and Friends of Jason accepted.

All contributor reports of contributions from a PAC must include full contributor identification. These donations lacked that ID confirmation.

The treasurer for the PAC certified on May 19, 2025 that a Form 20 would be filed within 48 hours of the PAC's first contribution, a statement already false when signed, because the PAC had made contributions over several years prior.

Specific Violations

A. Late registration of a PAC. First Form 3 filed May 19, 2025, years after money was raised and spent.

B. Failure to register with SEEC despite state-election intent. The PAC's own paperwork says it will support state elections, yet it never registered with SEEC.

C. Failure to file any Form 20 disclosure statements. No quarterly or 48-hour statements have ever been filed.

D. Acceptance of illegal contributions by the EWDTC (2021) and Friends of Jason 2023 (2023) which cashed checks from an unregistered PAC.

E. Treasurer Severino left out committee ID, check number, and address, violating while acting as treasurer of the EWDTC and Friends of Jason 2023.

F. False statement on Form 3. The 48-hour Form 20 statement was untrue.

Requested Relief

1. Investigate the total funds raised and spent by Better Days Ahead PAC since inception.
2. Order Ms. Menard to produce full bank records and ledgers from 2021 to present.
3. Order Ms. Menard and Mr. Severino to supply copies of the checks written to EWDTC and Friends of Jason 2023.
4. Require EWDTC and Friends of Jason 2023 to refund or forfeit the unlawful contributions.
5. Impose civil penalties at the “knowing and wilful” level on both Respondents.
6. Require additional treasurer training before either may handle campaign finances again.

I believe these steps are necessary to protect transparency and fairness in local and state elections.

Date: _____ Signature: _____

Exhibits

1. eCRIS search result showing no SEEC registration for Better Days Ahead PAC.
2. 2021 Form 20 page – EWDTC receipt of \$907.39 from Better Days Ahead.
3. Friends of Jason 2023 receipt sheet – \$849.39 deposit.
4. Political Committee Registration Form 3 (stamp-received May 19, 2025).

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Exhibit 1



- SEARCH TYPE
- DOCUMENT/FILING
- COMMITTEE REGISTRATION HISTORY
- DISBURSEMENT
- RECEIPT
- INDEPENDENT EXPENDITURE
- ORGANIZATION EXPENDITURE
- SUMMARY TOTALS

Committee Search

* Please give at least one of the required (*) values to get results.

*Committee Name :

Committee Type : Candidate Exploratory Party Political All

*Chairperson / Candidate Last Name :

*Treasurer / Dpty. Treasurer Last Name :

*City :

State :

*Office Sought :

District Number: District Type:

Party Affiliation :

Committee Status : Terminated Active All

No. Of Records : Per Page

<-- For more information about the search click [HELP](#) -->

Exhibit J



State of Connecticut
State Elections Enforcement Commission

eCRIS Search

- SEARCH TYPE
- DOCUMENT/FILING
- COMMITTEE REGISTRATION HISTORY
- DISBURSEMENT
- RECEIPT
- INDEPENDENT EXPENDITURE
- ORGANIZATION EXPENDITURE
- SUMMARY TOTALS
-

[NEW SEARCH](#) [MODIFY SEARCH](#)

[PREVIOUS](#) [NEXT](#)

No committee found matching selected criteria!

SEEC FORM 20

Itemized Campaign Finance Disclosure Statement
 CONNECTICUT STATE ELECTIONS ENFORCEMENT COMMISSION
 Revised January 2015



Electronic Filing
Do Not Mark in This Space For Official Use Only

COVER PAGE

1. NAME OF COMMITTEE			
East Windsor Democratic Town Committee			
2. TREASURER NAME			
First Angelo	MI P	Last Sevarino	Suffix
3. TREASURER ADDRESS			
Street Address 26 Barber Hill Rd	City Broad Brook	State CT	Zip Code 06016
4. ELECTION/REFERENDUM DATE	5. OFFICE SOUGHT <i>(Complete only if Candidate Committee)</i>	6. DISTRICT NUMBER <i>(if applicable)</i>	
7. CANDIDATE NAME (Complete only if Candidate or Exploratory Committee)			
First	MI	Last	Suffix
8. TYPE OF REPORT			
April 10 Filing - Original			
9. PERIOD COVERED			
	Beginning Date	thru	Ending Date
	01/01/2021		03/31/2021
10. CERTIFICATION			
<input checked="" type="checkbox"/> 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.			
Electronic Filing	Angelo Sevarino	04/07/2021 11:59:25AM	
SIGNATURE	PRINT NAME OF THE SIGNER	DATE CERTIFIED	
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. MONETARY RECEIPTS (Section A-K)					
NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)				TYPE OF REPORT	
East Windsor Democratic Town Committee				April 10 Filing - Original	
A. Total Contributions from Small Contributors-Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>					\$125.00
Subtotal Section A					
B. Itemized Contributions from Individuals					
Last Name		First Name		MI	
Residential Street Address			City	State	Zip Code
Principal Occupation			Name of Employer		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000? <input type="checkbox"/> Yes <input type="checkbox"/> No			Amount of Contribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # <input type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			
Method of Contribution <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			Date Received	Aggregate Contributions	
Total of Section B					\$0.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) <i>(Total on Line 13 of Summary Page)</i>					\$125.00

I. MONETARY RECEIPTS (Section A-K)					
NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)				TYPE OF REPORT	
East Windsor Democratic Town Committee				April 10 Filing - Original	
C1. Contributions from Other Committees					
Name of Committee			Name of Treasurer		
Better Days Ahead PAC			Dennise Menard		
Address		Is this contribution associated with an event reported in Section L1? If yes, list Event #			Amount of Contribution
73 Miller Rd		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
City	State	Zip Code	Date Received	Aggregate Contributions	
Broad Brook	CT	06016	01/01/2021	\$907.39	\$907.39
Total of Section C1					\$907.39

Exhibit 2



SEARCH TYPE



DOCUMENT/FILING



COMMITTEE REGISTRATION HISTORY



DISBURSEMENT



RECEIPT



INDEPENDENT EXPENDITURE



ORGANIZATION EXPENDITURE



SUMMARY TOTALS



EXPORT DATA

NEW SEARCH

MODIFY SEARCH

PREVIOUS

NEXT

Show/Hide Search Criteria

Disbursement Search Results

Committee	Committee Type	Payee Name	Purpose of Expenditure	Description	City	State	Method of Payment	Date of Payment	Amount	File to State	Election Year	Status	DS	R-FE	Committee Party Affiliation
East Windsor Democratic Town Committee (SEEC20)	Party Committee	Better Days Ahead	CNTRB(Contributions to another committee)	Better Days Ahead PAC	Broad Brook	CT	Check	03/12/2021	907.39	04/07/2021		Original eFILE		NO	Democrat

Total Amount: \$907.39

Go to Page 1 of 1

exhibit 3
Section B
1-2-3

Friends of Jason 2023

Updated 4/26/24

Name	One-Time Donat Method	Gross	Date
Bowsza, Jason	100 bank transfer	100	1/6/23
Bowsza, Jason	25 anedot	125	1/17/23
Burnham, John	1000 cash	1125	1/22/23
→ Better Days Ahe	849.39 check	1974.39	1/19/23 ←
O'Connell, Rick	200 anedot	2174.39	1/21/23
King, Donald	250 anedot	2424.39	1/21/23
Lockett, Dorian	200 anedot	2624.39	1/27/23
Grossi, Theodor	125 anedot	2749.39	1/30/23
King, David	200 anedot	2949.39	2/3/23
Wilson, Nathan	50 anedot	2999.39	2/3/23
Macsata, Nichol	300 anedot	3299.39	2/3/23
Finch, William	100 anedot	3399.39	2/6/23
Burnham, Thom	200 anedot	3599.39	2/6/23
Fournier, Christir	200 anedot	3799.39	2/6/23
Krivda, George	200 anedot	3999.39	2/7/23
Lebeau, Gary	100 anedot	4099.39	2/11/23
Hocutt, Ronald	200 anedot	4299.39	2/10/23
Hannaford, Mich	200 anedot	4499.39	2/10/23
Hurlburt, Bryan	50 anedot	4549.39	2/17/23
Gowdy, Frank	100 cash	4649.39	2/8/23
Gowdy, Diane	100 cash	4749.39	2/8/23
Larese, Peter	200 check	4949.39	2/9/23
McCarthy, Thom	200 anedot	5149.39	2/9/23
LeBeaux, John	100 anedot	5249.39	2/18/23
Harris, Jonathan	100 anedot	5349.39	2/18/23
Mednick, Steven	100 anedot	5449.39	3/2/23
Capitol City Pac	1000 check	6449.39	3/29/23
Power of Womei	1500 check	7949.39	4/29/23
Stengel, Jomath	50 anedot	7999.39	4/29/23
Bass, Caroline	50 anedot	8049.39	4/29/23
Appleton, Tim	100 anedot	8149.39	4/29/23
Duclos, Maureer	100 anedot	8249.39	5/5/23
abbe, Jennifer	50 anedot	8299.39	5/12/23
Clynch, TJ	50 anedot	8349.39	5/12/23
Weidner, Larry a	50 anedot	8399.39	5/12/23
Anwar, Saud	200 anedot	8599.39	5/20/23
McGuire, Elizabe	100 anedot	8699.39	6/10/23
Cimini, Peter	500 anedot	9199.39	6/11/23



SEEC FORM 3

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

RECEIVED

Town of East Windsor
Town Clerks Office

MAY 19 2025

By: *Amey Dhami, CTC*
Town Clerk

REGISTRATION TYPE

- Original
- Amendment/
Biennial with Changes

1. NAME OF COMMITTEE				2. ACRONYM			
Better Days Ahead							
3. COMMITTEE ADDRESS				4. COMMITTEE E-MAIL / 5. COMMITTEE WEBSITE			
Address 73 Miller Road				Email dmenard51@gmail.com			
City Broad Brook		State CT	Zip Code 06016	Website n/a			
6. CHAIRPERSON NAME							
First Name Carol		MI	Last Name Muska			Suffix	
7. CHAIRPERSON RESIDENCE ADDRESS				8. CHAIRPERSON MAILING ADDRESS (if different)			
Street Address 12 Church Street				Address same			
City Broad Brook		State CT	Zip Code 06016	City		State	Zip Code
9. CHAIRPERSON TELEPHONE				10. CHAIRPERSON E-MAIL ADDRESS			
(Include Area Code) 203 788 8640				carolamuska@gmail.com			
11. TREASURER NAME							
First Name Denise		MI	Last Name Menard			Suffix	
12. TREASURER RESIDENCE ADDRESS				13. TREASURER MAILING ADDRESS (if different)			
Street Address 73 Miller Road				Address same			
City Broad Brook		State CT	Zip Code 06016	City		State	Zip Code
14. TREASURER TELEPHONE				15. TREASURER E-MAIL ADDRESS			
(Include Area Code) 860 558 4797				dmenard51@gmail.com			
16. DEPUTY TREASURER NAME							
First Name Christina		MI	Last Name Cresenzi			Suffix	
17. DEPUTY TREASURER RESIDENCE ADDRESS				18. DEPUTY TREASURER MAILING ADDRESS (if different)			
Street Address 6B Reggie Way				Address same			
City Broad Brook		State CT	Zip Code 06016	City		State	Zip Code
19. DEPUTY TREASURER TELEPHONE				20. DEPUTY TREASURER E-MAIL ADDRESS			
(Include Area Code) 860 752 0634				chriscrenzeni@hotmail.com			
21. DEPOSITORY INSTITUTION NAME							
M&T Bank							
22. DEPOSITORY INSTITUTION ADDRESS							
Address 350 Buckland Road				City South Windsor		State CT	Zip Code 06016
<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>							