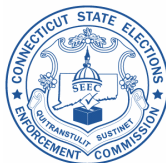


# SEEC FORM 1

STATE ELECTIONS ENFORCEMENT COMMISSION

## Registration by Candidate

Revised January 2014



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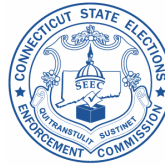
REGISTRATION TYPE	1. ELECTION DATE (mm/dd/yyyy)	2. OFFICE OR POSITION SOUGHT	3. DISTRICT NUMBER (If applicable)
<input checked="" type="checkbox"/> Initial <input type="checkbox"/> Amendment	Nov 2016	State Representative	030
<b>4. PARTY AFFILIATION</b>			
<input checked="" type="checkbox"/> Republican <input type="checkbox"/> Democratic <input type="checkbox"/> Other (Specify) _____			
<b>5. CANDIDATE NAME</b>			
First Name	MI	Last Name	Suffix
Christopher	D	Morelli	
<b>6. CANDIDATE RESIDENCE ADDRESS</b>		<b>7. CANDIDATE MAILING ADDRESS (If different)</b>	
Street Address		Address	
435 Wigwam Rd			
City	State	Zip Code	City
Berlin	CT	06037	
<b>8. CANDIDATE TELEPHONE</b>		<b>9. CANDIDATE EMAIL ADDRESS</b>	
(Include Area Code)			
860      839      3755		chrisdmor@gmail.com	
<b>10. DESIGNATION OF CAMPAIGN FUNDING SOURCE</b>			
<b>(Check one)</b>			
<input checked="" type="checkbox"/> <b>A.</b> I am forming a candidate committee and I am required to file a Candidate Committee Registration Statement.  Go to <b>Form 1A</b> and complete <b>pages 2 and 3</b> — <i>Candidate Registration Statement</i> .			
<input type="checkbox"/> <b>B.</b> I am exempt from forming a candidate committee and I am filing a Certification of Exemption from Forming a Candidate Committee.  Go to <b>Form 1B</b> and complete <b>page 4</b> — <i>Certification of Exemption from Forming a Candidate Committee</i> .			
<b>Important Notice: Failure of a candidate to complete this page together with 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.</b>			
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.			

# SEEC FORM 1A

STATE ELECTIONS ENFORCEMENT COMMISSION

## Candidate Committee Registration Statement

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REGISTRATION TYPE		CANDIDATE NAME			
<input checked="" type="checkbox"/> Initial	<input type="checkbox"/> Amendment	Christopher D Morelli			
11. COMMITTEE NAME					
The Committee To Elect Chris Morelli					
12. COMMITTEE ADDRESS			13. & 14. COMMITTEE EMAIL ADDRESS & WEBSITE		
Address 435 Wigwam Rd			Email Address chrismorelli2016@gmail.com		
City Berlin	State CT	Zip Code 06037	Website		
15. TREASURER NAME					
First Name Steven		MI A	Last Name Massuci		Suffix
16. TREASURER RESIDENCE ADDRESS			17. TREASURER MAILING ADDRESS (If different)		
Street Address 165 Royal Oak Dr			Address		
City Southington	State CT	Zip Code 06489	City	State	Zip Code
18. TREASURER TELEPHONE		19. TREASURER EMAIL ADDRESS			
(Include Area Code) 860 919 8301		massoc876@hotmail.com			
20. DEPUTY TREASURER NAME					
First Name David		MI M	Last Name Morelli		Suffix
21. DEPUTY TREASURER RESIDENCE ADDRESS			22. DEPUTY TREASURER MAILING ADDRESS (If different)		
Street Address 435 Wigwam Rd			Address		
City Berlin	State CT	Zip Code 06037	City	State	Zip Code
23. DEPUTY TREASURER TELEPHONE		24. DEPUTY TREASURER EMAIL ADDRESS			
(Include Area Code) 860 987 3757		dmwigwam@comcast.net			
25. DEPOSITORY INSTITUTION NAME					
Webster Bank					
26. DEPOSITORY INSTITUTION ADDRESS					
Address 132 Main Street, Southington, CT 06489					



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**STATE ELECTIONS ENFORCEMENT COMMISSION**  
**Certification of Exemption From Forming a**  
**Candidate Committee**