SEEC FORM 1

STATE ELECTIONS ENFORCEMENT COMMISSION

Registration by Candidate

Revised September 2016



REGISTRATION TYPE 1. ELECTION DATE (mm/dd/yyyy)			2. MUNICIPALITY					
Initial V Amendment Nov 2016			(If applicable)					
3. OFFICE OR POSITION S	OUGHT				4. DISTRICT NUMBER			
					(If applicable	e)		
State Senator					006			
5. PARTY AFFILIATION								
✓ Republican	Democratic		Other (Spece	ify) 				
6. CANDIDATE NAME								
First Name			MI	Last Name			Suffix	
Charles			R	Paonessa				
7. CANDIDATE RESIDENC	E ADDRESS			8. CANDIDATE MAILING ADDRESS	(If different)			
Street Address				Address				
1906 Chamberlain Hwy								
City		State	Zip Code	City		State	Zip Code	
Berlin		СТ	06037- 3905					
9. CANDIDATE TELEPHON	1E	10. CAN	DIDATE EN	IAIL ADDRESS				
(Include Area Code)								
860 828	3271	Paone	essa1906@	gmail.com				
11. DESIGNATION OF CAM	IPAIGN FUNDING	SOURCE	2					
(Check one)								
✓ A. I am forming a candidate committee and I am required to file a Candidate Committee Registration Statement.								
Go to Form	1A and complete	pages 2	and 3 — Co	andidate Registration Statement.				
B. I am exempt from forming a candidate committee and I am filing a Certification of Exemption from Forming a Candidate Committee.								
Go to Form 1B and complete page 4 — Certification of Exemption from Forming a Candidate Committee.					tee.			
Important Notice	: Failure of a car	didate	to complete	e this page <i>together with</i> either Fo	rm 1A. '	'Registrs	ation	

Important Notice: Failure of a candidate to complete this page *together with* either Form IA, "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.

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



Revised September 2016

REGISTRATION TYPE	CANDIDATE NA	AME							
Initial 🖌 Amendment	Charles R Paonessa								
12. COMMITTEE NAME									
The Committee To Elect C	harles R. Paone	essa							
13. COMMITTEE ADDRESS 14. & 15. COMMITTEE EMAIL ADDRESS & WEBSITE									
Address				Email Address					
1906 Chamberlain Hwy				info@charlespaonessa.com					
City		State Zip Code		Website					
Berlin		СТ	06037- 3905	charlespaonessa.com					
16. TREASURER NAME									
First Name			MI	Last Name		Suffix			
Lecia			J	Paonessa					
17. TREASURER RESIDENC	E ADDRESS			18. TREASURER MAILING ADDRESS (If different)				
Street Address				Address					
1906 Chamberlin Hwy									
City		State	Zip Code	City	State	Zip Code			
Berlin		СТ	06037						
19. TREASURER TELEPHON	(E	20. TRF	EASURER EN	IAIL ADDRESS					
(Include Area Code)									
860 828 3271 leciajp@comcast.net									
21. DEPUTY TREASURER NA	AME			1					
First Name			MI	Last Name		Suffix			
Chad				Thompson					
22. DEPUTY TREASURER RESIDENCE ADDRESS			23. DEPUTY TREASURER MAILING ADDRESS (If different)						
Street Address				Address					
30 Ahern St									
City		State	Zip Code	City	State	Zip Code			
West Hartford		СТ	06110						
24. DEPUTY TREASURER TE	ELEPHONE		UTY TREAS	URER EMAIL ADDRESS					
(Include Area Code)									
860 523 505									
26. DEPOSITORY INSTITUT	ION NAME								
Farmington Bank									
27. DEPOSITORY INSTITUTION ADDRESS									
Address									
1191 Farmington Avenue, Berlin, CT 06037									

SEEC FORM 1A

Revised September 2016

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REGISTRATION TYPE	CANDIDATE NAME		
Initial 🖌 Amendment	Charles R Paonessa		

28. CERTIFICATION

Candidate

I hereby certify and state, under penalties of false statement, that all of the designations set forth in this candidate committee registration statement are true and accurate to the best of my knowledge and belief, and further, that this statement includes my certification to the fact that any individual designated herein to serve as my treasurer or deputy treasurer have indicated to me their acceptance of my appointment of them to those positions.

Charles R Paonessa	06/22/2016
CANDIDATE SIGNATURE	DATE (mm/dd/yyyy)

Treasurer

I hereby certify and state, under penalties of false statement, that I have accepted my appointment by the candidate to serve as the candidate's designated treasurer of this candidate committee. I certify that I am an elector in the State of Connecticut. I intend to comply with all the campaign finance registration and disclosure requirements as contained in Chapter 155 through 157 of the General Statutes, and to abide by any prohibitions, limitations or restrictions concerning campaign contributions and expenditures.

I certify that I have paid any civil penalties or forfeitures assessed pursuant to Chapters 155 to 157, inclusive.

I certify that I have not been convicted of or pled guilty or nolo contendere to, in a court of competent jurisdiction, any (A) felony involving fraud, forgery, larceny, embezzlement or bribery, or (B) criminal offense under Title 9 of the General Statues, or that at least eight years have elapsed from the date of the conviction or plea or the completion of any sentence, whichever date is later, without a subsequent conviction of or plea to another such felony or offense.

I certify that I am not otherwise barred from serving as a treasurer by order of the State Elections Enforcement Commission.

Lecia J Paonessa	06/22/2016
TREASURER SIGNATURE	DATE (mm/dd/yyyy)

Deputy Treasurer

I hereby certify and state, under penalties of false statement, that I have accepted my appointment by the candidate to serve as the candidate's designated deputy treasurer of this candidate committee, and I understand and accept that, in the event of a vacancy caused by the treasurer's death, incapacity or resignation, I shall automatically become responsible for discharging all of the duties required of the vacating treasurer. I certify that I am an elector in the State of Connecticut. I intend to comply with all the campaign finance registration and disclosure requirements as contained in Chapter 155 through 157 of the General Statutes, and to abide by any prohibitions, limitations or restrictions concerning campaign contributions and expenditures.

I certify that I have paid any civil penalties or forfeitures assessed pursuant to Chapters 155 to 157, inclusive.

I certify that I have not been convicted of or pled guilty or nolo contendere to, in a court of competent jurisdiction, any (A) felony involving fraud, forgery, larceny, embezzlement or bribery, or (B) criminal offense under Title 9 of the General Statues, or that at least eight years have elapsed from the date of the conviction or plea or the completion of any sentence, whichever date is later, without a subsequent conviction of or plea to another such felony or offense.

I certify that I am not otherwise barred from serving as a deputy treasurer by order of the State Elections Enforcement Commission.

Chad Thompson	06/22/2016
DEPUTY TREASURER SIGNATURE	DATE (mm/dd/yyyy)

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



DECICED ATION TYPE	CANDIDATE NAME				
REGISTRATION TYPE					
Initial Amendment					
12. REASON FOR EXEMPTION FROM FORMING A CANDIDATE COMMITTEE					
I hereby cer	I hereby certify that I am exempt from forming a candidate committee becaus (CPECK ONE)				
□ 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 expendit and the tamp behavioral be reported by the committee sponsoring my candidacy. The name of this spinsor eraco unit ons:					
	OR				
B. I am funding my campaign entirely from my ownerse of funds and will not request or receive contributions from other individuals or committees and I to tersus the tif I make expenditures exceeding one thousand dollars (\$1,000) that I shall be recensed of relative for filing financial disclosure statements (SEEC Form 23) according to the same schedule and in the annumative as received of treasurers of candidate committees.					
C. I do not inte					
	OR				
D. I do	nd to receive or expend any funds, including personal funds, for this campaign.				
13. CER					
	nd state, under penalties of false statement, that this statement of exemption from forming a ttee, for the reason checked above, is true, accurate and complete to the best of my elief.				
CANDIDATE SIGNATUR	DATE (mm/dd/yyyy)				