SEEC FORM 1

STATE ELECTIONS ENFORCEMENT COMMISSION

Registration by Candidate

Revised September 2016



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REGISTRATION TYPE	E 1. ELECTION DATE (mm/dd/yyyy)				2. MUNICIPALITY			
✓ Initial Amendment	Nov 2016				(If applicable)			
3. OFFICE OR POSITION SOUGHT					4. DISTRICT NUMBER			
State Representative						(If applicable) 126		
5. PARTY AFFILIATION								
Republican V Democratic Other (Specify)								
6. CANDIDATE NAME								
First Name MI			MI		Last Name Suffix			Suffix
Maria H				Pereira				
7. CANDIDATE RESIDENCE ADDRESS					8. CANDIDATE MAILING ADDRESS (If different)			
Street Address				Address				
85 Nutmeg Rd								
City		State	Zip Code		City		State	Zip Code
Bridgeport		СТ	06610			ļ		
9. CANDIDATE TELEPHON	10. CANDIDATE EMAIL ADDRESS							
Include Area Code)								

11. DESIGNATION OF CAMPAIGN FUNDING SOURCE

9668

540

(Check one)

203

✓ A. I am forming a candidate committee and I am required to file a Candidate Committee Registration Statement.

mpereira0667@yahoo.com

Go to Form 1A and complete pages 2 and 3 — Candidate 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.

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.

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 NAME						
✓ Initial I Amendment Maria H Pereira						
12. COMMITTEE NAME						
Pereira For Progress						
13. COMMITTEE ADDRESS	3. COMMITTEE ADDRESS 4. Land 14. & 15. COMMITTEE EMAIL ADDRESS & WEBSITE					
Address			Email Address			
85 Nutmeg Rd		pereiraforprogress@gmail.com				
City	State	Zip Code 06610	Website			
Bridgeport	CT	00010				
16. TREASURER NAME	•					
First Name		MI	Last Name Suffix			
Eric		D	Stewart-Alicea			
17. TREASURER RESIDENCE ADDRESS			18. TREASURER MAILING ADDRESS (If different)			
Street Address			Address			
186 Livingston PI						
City	State	Zip Code	City	State	Zip Code	
Bridgeport	СТ	06610				
19. TREASURER TELEPHONE	AAIL ADDRESS					
(Include Area Code) 203 543 3234 ericdsalicea@gma			ail.com			
21. DEPUTY TREASURER NAME						
First Name		MI	Last Name Suffix			
22. DEPUTY TREASURER RESIDENCE ADDRESS			23. DEPUTY TREASURER MAILING ADDRESS (If different)			
Street Address			Address			
City	State	Zip Code	City	State	Zip Code	
24. DEPUTY TREASURER TELEPHONE 25. DEPUTY TREAS			URER EMAIL ADDRESS			
(Include Area Code)						
26. DEPOSITORY INSTITUTION NAME						
TD Bank						
27. DEPOSITORY INSTITUTION ADDRESS						
Address						
1000 Lafayette Boulevard., Bridgeport, CT	06604					

REGISTRATIO	N TYPE	CANDIDATE NAME	
✓ Initial	Amendment	Maria H Pereira	
28. CERTIFICA	TION		
committee this state	ee registration ment include	on statement are true and accur es my certification to the fact t	tatement, that all of the designations set forth in this candidate rate to the best of my knowledge and belief, and further, that that any individual designated herein to serve as my treasurer plance of my appointment of them to those positions.
Maria H	l Pereira		04/06/2016
CANDIDAT	E SIGNATURE		DATE (mm/dd/yyyy)
candidate elector in requirem limitation I certify to a certify to jurisdiction under Tit plea or the another s	that I have ron, any (A) the completic such felony	the candidate's designated treat Connecticut. I intend to comained in Chapter 155 through a ions concerning campaign contaid any civil penalties or forfer of been convicted of or pled gradient for involving fraud, forger General Statues, or that at least on of any sentence, whichever our offense.	itures assessed pursuant to Chapters 155 to 157, inclusive. uilty or nolo contendere to, in a court of competent y, larceny, embezzlement or bribery, or (B) criminal offense eight years have elapsed from the date of the conviction or date is later, without a subsequent conviction of or plea to
Commiss		t otherwise barred from serving	g as a treasurer by order of the State Elections Enforcement
Eric D S	tewart-Alice	a	04/06/2016
TREASURE	R SIGNATURE		DATE (mm/dd/yyyy)
candidate and accep automation that I am disclosur	e to serve as pt that, in th cally becom an elector in re requirement	the candidate's designated dep e event of a vacancy caused by e responsible for discharging a n the State of Connecticut. I in nts as contained in Chapter 15	tatement, that I have accepted my appointment by the puty treasurer of this candidate committee, and I understand the treasurer's death, incapacity or resignation, I shall all of the duties required of the vacating treasurer. I certify need to comply with all the campaign finance registration and 5 through 157 of the General Statutes, and to abide by any campaign contributions and expenditures.
I certify t	that I have p	aid any civil penalties or forfe	itures assessed pursuant to Chapters 155 to 157, inclusive.
jurisdicti under Tit plea or th	on, any (A) tle 9 of the 0	felony involving fraud, forgery General Statues, or that at least on of any sentence, whichever	uilty or nolo contendere to, in a court of competent y, larceny, embezzlement or bribery, or (B) criminal offense eight years have elapsed from the date of the conviction or date is later, without a subsequent conviction of or plea to
	that I am no nent Comm		g as a deputy treasurer by order of the State Elections
DEPLITY TR	REASURER SIGNA	ATURE	DATE (mm/dd/yyyy)



SEEC FORM 1B

STATE ELECTIONS ENFORCEMENT COMMISSION **Certification of Exemption From Forming**





REGISTR	ATION TYPE	CANDIDATE NAME				
☐ Initial	☐ Amendment					
12. REASO	N FOR EXEMPTION	ON FROM FORMING A CANDIDATE COMMITTEE				
	I hereby certify that I am exempt from forming a candidate committee because (CHECK ONE)					
A. I am one of a slate of candidates whose campaigns are being funded soler, y a toy committee or a political committee formed for a single election or primary and expendit to the description of the reported by the committee sponsoring my candidacy. The name of this space of committee is:						
		OR				
con thou	tributions from cusand dollars (\$	ny campaign entirely from my own erstand funds and will not request or receive other individuals or committees and I to derstand a if I make expenditures exceeding one 1,000) that I shall be reconstant for filing francial disclosure statements (SEEC Form 23) me schedule and in the tank manner as record of treasurers of candidate committees.				
C.	I do not intend	to receive experience funds in excess of one thousand dollars (\$1,000). OR				
□ D.	I do nd	to sceive or expend any funds, including personal funds, for this campaign.				
13. CER						
can		state, under penalties of false statement, that this statement of exemption from forming a se, for the reason checked above, is true, accurate and complete to the best of my ef.				
CAN	DIDATE SIGNATURE	DATE (mm/dd/yyyy)				