SEEC FORM 1

STATE ELECTIONS ENFORCEMENT COMMISSION

Registration by Candidate

Revised September 2016



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REGISTRATION TYPE	1. ELECTION DATE (mm/dd/yyyy)				2. MUNICIPALITY			
✓ Initial Amendment	Nov 2016				(If applicable)			
3. OFFICE OR POSITION SOUGHT				4. DISTRICT NUMBER				
						(If applicable	?)	
State Senator					022			
5. PARTY AFFILIATION								
Republican • Democratic Other (Specify)								
6. CANDIDATE NAME	5. CANDIDATE NAME							
First Name			MI		Last Name			Suffix
Thomas				McCarthy				
7. CANDIDATE RESIDENCE ADDRESS				8. CANDIDATE MAILING ADDRESS (If different)				
Street Address					Address			
135 Harlem Ave								
City		State	Zip Coo		City		State	Zip Code
Bridgeport		СТ	0660)6				
O. CANDIDATE TELEPHON	10. CANDIDATE EMAIL ADDRESS							
Include Area Code)								

11. DESIGNATION OF CAMPAIGN FUNDING SOURCE

4843

218

(Check one)

203

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

McCarthyBpt@gmail.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 Thomas C McC	Thomas C McCarthy					
12. COMMITTEE NAME						
McCarthy For Senate						
13. COMMITTEE ADDRESS			14. & 15. COMMITTEE EMAIL ADDRESS & WEBSITE			
Address			Email Address			
955 Main St # 507	,	_				
City	State	Zip Code 06604	Website			
Bridgeport	CT	00004				
16. TREASURER NAME	•					
First Name		MI	Last Name Suffix			
Maria		J	Heller			
17. TREASURER RESIDENCE ADDRESS			18. TREASURER MAILING ADDRESS (If different)			
Street Address			Address			
20 Emerald Ridge Ct						
City	State	Zip Code	City	State	Zip Code	
Shelton	СТ	06484				
19. TREASURER TELEPHONE	ASURER EM	IAIL ADDRESS				
(Include Area Code)						
203 260 7281 mariajoao042			mail.com			
21. DEPUTY TREASURER NAME						
First Name		MI	Last Name		Suffix	
Erin			McDonough			
22. DEPUTY TREASURER RESIDENCE ADDRESS			23. DEPUTY TREASURER MAILING ADDRESS (If different) Address			
Street Address Address						
955 Main St # 507						
City	State	Zip Code 06604	City	State	Zip Code	
Bridgeport	CT	00004				
24. DEPUTY TREASURER TELEPHONE 25. DEPUTY TREAS			URER EMAIL ADDRESS			
(Include Area Code)						
203 803 7045	erin.in.ct@gmail.com					
26. DEPOSITORY INSTITUTION NAME						
People's Bank						
27. DEPOSITORY INSTITUTION ADDRESS						
Address						
1237 Stratfield Road, Fairfield, CT 06825						

SEEC FORM 1A Revised September 2016

Enforcement Commission.

DEPUTY TREASURER SIGNATURE

Erin McDonough

Part Company	Revised September 2016					
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. Thomas C McCarthy CANDIDATE SMINATURE DATE (monoid/yzyy) Treasurer 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 Statuces, 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. Maria J Heller DATE (municidate) DATE (municidate) TREASTERT SIGNATURE: DATE (municidate) DATE (municidate) DATE (municidate) Treasurer 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	REGISTRA	TION TYPE	CANDIDATE NAME			
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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	I certification of the control of th	date to serve as or in the State or ements as contitions or restrict fy that I have put fy that I have noticion, any (A). Title 9 of the Corthe completion of the that I am noticion fy that I am noticion.	the candidate's designated treat Connecticut. I intend to compained in Chapter 155 through 1 ions concerning campaign contaid any civil penalties or forfeit of been convicted of or pled guffelony involving fraud, forgery General Statues, or that at least of n of any sentence, whichever dor offense.	I certify that I am an oly with all the campaign finance registration and disclosure 57 of the General Statutes, and to abide by any prohibitions, cributions and expenditures. Itures assessed pursuant to Chapters 155 to 157, inclusive. Itality or nolo contendere to, in a court of competent registration, largely, embezzlement or bribery, or (B) criminal offense eight years have elapsed from the date of the conviction or late is later, without a subsequent conviction of or plea to		
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I certify that I am not otherwise harred from serving as a deputy treasurer by order of the State Elections	under plea c anoth	Title 9 of the Cor the completion er such felony of	General Statues, or that at least on of any sentence, whichever dor offense.	eight years have elapsed from the date of the conviction or late is later, without a subsequent conviction of or plea to		

04/14/2016

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	ON FOR EXEMPTION	ON FROM FORMING A CANDIDATE COMMITTEE				
	I hereby certify that I am exempt from forming a candidate committee because (CHECK ONE)					
poli	itical committee	ate of candidates whose campaigns are being funded solely v a town committee or a formed for a single election or primary and expenditure and decomy behavioral be amittee sponsoring my candidacy. The name of this sponsor countries is:				
		OR				
con	tributions from cusand dollars (\$	by campaign entirely from my own, erscall fun is and will not request or receive other individuals or committees and I to derstate it if I make expenditures exceeding one 1,000) that I shall be reconsitive for filing financial disclosure statements (SEEC Form 23) me schedule and in the annumancer as record of treasurers of candidate committees. OR				
☐ C.	I do not intend	to receive experiences 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 e, for the reason checked above, is true, accurate and complete to the best of my ef.				
CAN	DIDATE SIGNATURE	DATE (mm/dd/yyyy)				