SEEC FORM 1

STATE ELECTIONS ENFORCEMENT COMMISSION

Registration by Candidate

Revised September 2016



	THE GREAT COMME				
EGISTRATION TYPE	1. ELECTION DATE (mm/dd/y	(איציע)	2. MUNICIPALITY		
			(If applicable)		
✓ Initial Amendment	Nov 2016	016			
OFFICE OR POSITION SOUGHT 4. DISTRICT NUMBER					
				(If applicable)	
tate Senator				025	
PARTY AFFILIATION					
✓ Republican	Democratic	Other (Speci	(fy)		
CANDIDATE NAME					
st Name		MI	Last Name		Suffix

Т Gregory **Ehlers** 7. CANDIDATE RESIDENCE ADDRESS 8. CANDIDATE MAILING ADDRESS (If different) Address 38 Pembroke Rd City City Zip Code State Zip Code State 06820 Darien CT 9. CANDIDATE TELEPHONE 10. CANDIDATE EMAIL ADDRESS (Include Area Code)

11. DESIGNATION OF CAMPAIGN FUNDING SOURCE

8133

536

(Check one)

203

✓ 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 — Candidate Registration Statement.

greg@rvmacro.com

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.

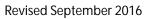
See Section 9-623(b), Connecticut General Statutes.

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





REGISTRATION TYPE CANDIDATE NAME						
✓ Initial I Amendment Gregory T Ehle	✓ Initial I Amendment Gregory T Ehlers					
12. COMMITTEE NAME						
EHLERS2016						
13. COMMITTEE ADDRESS	14. & 15. COMMITTEE EMAIL ADDRESS & WEBSITE					
Address Email Address						
PO Box 18	_					
City	State	Zip Code 06820	Website			
Darien CT Of						
16. TREASURER NAME						
First Name		MI	Last Name		Suffix	
Jenny			Wellenius			
17. TREASURER RESIDENCE ADDRESS			18. TREASURER MAILING ADDRESS (If different)			
Street Address			Address			
837 Hollow Tree Ridge Rd						
City	State	Zip Code 06820	City	State	Zip Code	
Darien	CT	00020				
19. TREASURER TELEPHONE 20. TREASURER EN			AAIL ADDRESS			
(Include Area Code)						
203 919 2017 Fitz2004@gmail.d			om			
21. DEPUTY TREASURER NAME						
First Name		MI	Last Name		Suffix	
Michele			Berardo			
22. DEPUTY TREASURER RESIDENCE ADDRESS			23. DEPUTY TREASURER MAILING ADDRESS (If different)			
Street Address			Address			
1436 N Benson Rd						
City	State	Zip Code 06824	City	State	Zip Code	
Fairfield	CT	00024				
24. DEPUTY TREASURER TELEPHONE 25. DEPUTY TREAS			URER EMAIL ADDRESS			
(Include Area Code)						
203 856 3079	mlfb67@hotmail.com					
26. DEPOSITORY INSTITUTION NAME						
J.P. Morgan Chase Bank						
27. DEPOSITORY INSTITUTION ADDRESS						
Address						
Post Road, Darien, CT 06820						
				·		

SEEC FORM 1A
Payisad Soptomber 2016

Michele Berardo

DEPUTY TREASURER SIGNATURE

kevisea sep	itember 2016				
REGISTRA	TION TYPE	CANDIDATE NAME			
Initial	Amendment	Gregory T Ehlers			
28. CERTIF	ICATION				
comn this so or de	nittee registration tatement includ	on statement are true and access my certification to the fac	e statement, that all of the designations set forth in this candidate curate to the best of my knowledge and belief, and further, that ct that any individual designated herein to serve as my treasurer ceptance of my appointment of them to those positions. 04/27/2016		
CAND	IDATE SIGNATURE		DATE (mm/dd/yyyy)		
candi electo requii	date to serve as or in the State or rements as cont	the candidate's designated f Connecticut. I intend to coained in Chapter 155 through	e statement, that I have accepted my appointment by the treasurer of this candidate committee. I certify that I am an emply with all the campaign finance registration and disclosure the 157 of the General Statutes, and to abide by any prohibitions, contributions and expenditures.		
I certi	ify that I have p	aid any civil penalties or for	rfeitures assessed pursuant to Chapters 155 to 157, inclusive.		
jurisd under plea c anoth I certi	liction, any (A) Title 9 of the Cor the completion er such felony of the I am no	felony involving fraud, forg General Statues, or that at least on of any sentence, whichever or offense.	d guilty or nolo contendere to, in a court of competent gery, larceny, embezzlement or bribery, or (B) criminal offense ast eight years have elapsed from the date of the conviction or er date is later, without a subsequent conviction of or plea to ving as a treasurer by order of the State Elections Enforcement		
	mission.				
Jenn	y Wellenius		04/27/2016		
TREAS	SURER SIGNATURE		DATE (mm/dd/yyyy)		
candi and a auton that I disclo	eby certify and so date to serve as eccept that, in the natically become am an elector in osure requireme	the candidate's designated e event of a vacancy caused e responsible for dischargin n the State of Connecticut. nts as contained in Chapter	e statement, that I have accepted my appointment by the deputy treasurer of this candidate committee, and I understand by the treasurer's death, incapacity or resignation, I shall ag all of the duties required of the vacating treasurer. I certify I intend to comply with all the campaign finance registration and 155 through 157 of the General Statutes, and to abide by any ng campaign contributions and expenditures.		
I certi	I certify that I have paid any civil penalties or forfeitures assessed pursuant to Chapters 155 to 157, inclusive.				
jurisd under plea o	liction, any (A) Title 9 of the (felony involving fraud, forg General Statues, or that at lead on of any sentence, whichever	d guilty or nolo contendere to, in a court of competent gery, larceny, embezzlement or bribery, or (B) criminal offense ast eight years have elapsed from the date of the conviction or er date is later, without a subsequent conviction of or plea to		
	ify that I am no cement Commi		ring as a deputy treasurer by order of the State Elections		
Mich	nele Berardo		04/27/2016		

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	12. REASON FOR EXEMPTION 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 reconstructed for filing francial 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)				