SEEC FORM 1

STATE ELECTIONS ENFORCEMENT COMMISSION

Registration by Candidate

Revised September 2016



REGISTRATION TYPE 1. ELECTION DATE (mm/dd/yyyy)			2. MUNICIPALITY				
✓ Initial Amendment	Initial Amendment Nov 2016			(If applicable)			
3. OFFICE OR POSITION S	OUGHT				4. DISTRICT NUMBER		
				(If applicable)			
State Representative					065		
5. PARTY AFFILIATION							
✓ Republican	Democratic		Other (Spec	ify)			
6. CANDIDATE NAME							
First Name			MI	Last Name			Suffix
Christopher			R	Diorio			
7. CANDIDATE RESIDENC	E ADDRESS			8. CANDIDATE MAILING ADDRESS (If different)			
Street Address				Address			
195 Beechwood Ave							
City		State	Zip Code	City		State	Zip Code
Torrington		СТ	06790				
9. CANDIDATE TELEPHONE 10.			10. CANDIDATE EMAIL ADDRESS				
(Include Area Code)							
860 387	2123	chrisdiorio65@gmail.com					
11. DESIGNATION OF CAMPAIGN FUNDING SOURCE							
(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 — 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							

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 NA	AME					
✓ Initial Amendment	Initial I Amendment Christopher R Diorio						
12. COMMITTEE NAME							
Chris Diorio for State Repr	esentative						
13. COMMITTEE ADDRESS				14. & 15. COMMITTEE EMAIL ADDRESS & W	EBSITE		
Address				Email Address			
195 Beechwood Ave				chrisdiorio65@gmail.com			
City		State	Zip Code	Website			
Torrington		СТ	06790				
16. TREASURER NAME							
First Name			MI	Last Name		Suffix	
Molly				Spino			
17. TREASURER RESIDENC	E ADDRESS			18. TREASURER MAILING ADDRESS (If different)			
Street Address				Address			
171 Torrington Heights Rd							
City		State	Zip Code	City	State	Zip Code	
Torrington		СТ	06790				
19. TREASURER TELEPHON	ΙE	20. TRF	ASURER EN	IAIL ADDRESS			
(Include Area Code)							
860 309 1499		mollyspino@yahoo.com					
21. DEPUTY TREASURER NA	ME		1				
First Name			MI	Last Name		Suffix	
Wendy				Traub			
22. DEPUTY TREASURER RE	ESIDENCE ADDR	ESS		23. DEPUTY TREASURER MAILING ADDRESS (If different)			
Street Address				Address			
211 Chamberlain St							
City		State	Zip Code	City	State	Zip Code	
Torrington		СТ	06790				
					iI		
24. DEPUTY TREASURER TE (Include Area Code)	LEFHONE	25. DEP	ULY IKEAS	UKER EMAIL ADDRESS			
860 601 8911 wtraub3811@gmail.com			ail.com				
26. DEPOSITORY INSTITUT			-				
20. DEI OSITORI INSTITUTI							
TD Bank							
27. DEPOSITORY INSTITUTION ADDRESS							
Address							
215 High Street, Torrington	n, CT 06790				<u> </u>		

SEEC FORM 1A

Revised September 2016

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REGISTRATION TYPE		CANDIDATE NAME				
🖌 Initial	Amendment	Christopher R Diorio				
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						

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.

Christopher R Diorio	05/17/2016
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.

Molly Spino	05/17/2016
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.

Wendy Traub	05/17/2016
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 EXEMP	TION FROM FORMING A CANDIDATE COMMITTEE			
I hereby cer	ify 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 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 space of the committee is:				
	OR			
■ B. I am funding my campaign entirely from my own personal funds and will not request or receive contributions from other individuals or committees and I to tersulations if I make expenditures exceeding one thousand dollars (\$1,000) that I shall be received 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)			