## **SEEC FORM 1**

#### STATE ELECTIONS ENFORCEMENT COMMISSION

### Registration by Candidate

Revised September 2016



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REGISTRATION TYPE 1. ELECTION DATE		ΓE (mm/dd/yyyy)		2. MUNICIPALITY			
				(If applicable)			
✓ Initial   Amendment	Nov 2016						
3. OFFICE OR POSITION S	OUGHT				4. DISTRICT NUMBER		
			(If applicable)				
State Representative				146			
5. PARTY AFFILIATION							
Republican • Democratic Other (Specify)							
			o unon (open,				
6. CANDIDATE NAME							
First Name			MI	Last Name			Suffix
David				Michel			
7. CANDIDATE RESIDENC	E ADDRESS		8. CANDIDATE MAILING ADDRESS (If different)				
Street Address				Address			
46 Nelson St							
City		State	Zip Code	City		State	Zip Code
Stamford		СТ	06902				
9. CANDIDATE TELEPHON	10. CANDIDATE EMAIL ADDRESS						
(Include Area Code)							
203 340	2279	davidn	nichel74@g	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 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 I Amendment David Michel	Initial   Amendment   David Michel					
12. COMMITTEE NAME						
David Michel 2016						
13. COMMITTEE ADDRESS			14. & 15. COMMITTEE EMAIL ADDRESS & W	EBSITE		
Address			Email Address	Email Address		
46 Nelson St			davidmichel74@gmail.com			
City	State	Zip Code 06902	Website			
Stamford	СТ	00902				
16. TREASURER NAME						
First Name		MI	Last Name	Last Name Suffix		
Daniel		ТВ	Honan			
17. TREASURER RESIDENCE ADDRESS			18. TREASURER MAILING ADDRESS (If different)			
Street Address			Address			
61 Seaview Ave # 24						
City	State	Zip Code	City	State	Zip Code	
Stamford	СТ	06902				
19. TREASURER TELEPHONE	20. TRE	EASURER EN	MAIL ADDRESS			
(Include Area Code)						
508 333 8717 dtbhonan@gm			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			SURER EMAIL ADDRESS			
(Include Area Code)						
26. DEPOSITORY INSTITUTION NAME						
Bank of America						
27. DEPOSITORY INSTITUTION ADDRESS						
Address						
Shippan Avenue, Stamford, CT 06902						
<u> </u>						

SEEC FORM 1A Revised September 2016

EGISTRA	TION TYPE	CANDIDATE NAME	
Initial	Amendment	David Michel	
B. CERTIF	ICATION		
comn this st	nittee registration tatement includ	on statement are true and accurate my certification to the fact	statement, that all of the designations set forth in this candidate urate to the best of my knowledge and belief, and further, that a that any individual designated herein to serve as my treasurer eptance of my appointment of them to those positions.
Dav	id Michel		05/27/2016
CANDI	DATE SIGNATURE		DATE (mm/dd/yyyy)
I certi jurisd under plea c	date to serve as or in the State of the State of the State of the sements as contitions or restrict fy that I have put fy that I have notiction, any (A). Title 9 of the Corr the completion of the such felony of the such felony of the service of t	the candidate's designated trace. Connecticut. I intend to consider in Chapter 155 through ions concerning campaign contaid any civil penalties or forfat been convicted of or pled a felony involving fraud, forge deneral Statues, or that at least nof any sentence, whichever or offense.	statement, that I have accepted my appointment by the reasurer of this candidate committee. I certify that I am an imply with all the campaign finance registration and disclosure a 157 of the General Statutes, and to abide by any prohibitions, ontributions and expenditures.  Geitures assessed pursuant to Chapters 155 to 157, inclusive. Inclusive guilty or nolo contendere to, in a court of competent arry, larceny, embezzlement or bribery, or (B) criminal offense ast eight years have elapsed from the date of the conviction or redate is later, without a subsequent conviction of or plea to the gas a treasurer by order of the State Elections Enforcement
Comr	nission.	otherwise barred from serving	
	el TB Honan		05/27/2016
TREAS	URER SIGNATURE		DATE (mm/dd/yyyy)
candic and ac autom that I disclo	by certify and s date to serve as ecept that, in the natically become am an elector in soure requireme	the candidate's designated de e event of a vacancy caused be responsible for discharging the State of Connecticut. I ents as contained in Chapter 1.	statement, that I have accepted my appointment by the eputy treasurer of this candidate committee, and I understand by the treasurer's death, incapacity or resignation, I shall gall of the duties required of the vacating treasurer. I certify intend to comply with all the campaign finance registration and 55 through 157 of the General Statutes, and to abide by any grampaign contributions and expenditures.
I certi	fy that I have p	aid any civil penalties or forf	feitures assessed pursuant to Chapters 155 to 157, inclusive.
jurisd under plea c	iction, any (A) Title 9 of the (	felony involving fraud, forge General Statues, or that at leas n of any sentence, whichever	guilty or nolo contendere to, in a court of competent ery, larceny, embezzlement or bribery, or (B) criminal offense st eight years have elapsed from the date of the conviction or r date is later, without a subsequent conviction of or plea to
	fy that I am no cement Commi		ng as a deputy treasurer by order of the State Elections



# **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 becaus (CHECK ONE)						
poli	A. I am one of a slate of candidates whose campaigns are being funded solely v a toval committee or a political committee formed for a single election or primary and expendit and design being all be reported by the committee sponsoring my candidacy. The name of this spaces 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.	C. I do not intend to receive experiments in excess of one thousand dollars (\$1,000).						
□ 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)					