### **SEEC FORM 1**

#### STATE ELECTIONS ENFORCEMENT COMMISSION

## Registration by Candidate

Revised September 2016



	THEN .	COM						
REGISTRATION TYPE	1. ELECTION DATE (mm/dd/yyyy)			2. MUNICIPALITY				
✓ Initial   Amendment	Nov 2018			(If applicable)				
3. OFFICE OR POSITION S	OUGHT				4. DISTRI	CT NUM	BER	
Governor					(If applicable)			
5. PARTY AFFILIATION								
✓ Republican	Democratic		Other (Spe	rcify)				
6. CANDIDATE NAME								
First Name			MI	Last Name			Suffix	
Prasad				Srinivasan				
7. CANDIDATE RESIDENCE ADDRESS				8. CANDIDATE MAILING ADDRESS (If different)				
Street Address				Address				
268 Grandview Dr								
City			Zip Code	City		State	Zip Code	
Glastonbury		СТ	06033					
9. CANDIDATE TELEPHONE 10. CAND				MAIL ADDRESS				
(Include Area Code)								
860 416	7356	prasads268@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 NAME						
✓ Initial I Amendment Prasad Srinivasan						
12. COMMITTEE NAME						
Srinivasan For Governor						
13. COMMITTEE ADDRESS	14. & 15. COMMITTEE EMAIL ADDRESS & WEBSITE					
Address			Email Address			
10-3 Arthur Dr	<b>.</b>					
City	State	Zip Code 06074	Website			
South Windsor	CT					
16. TREASURER NAME						
First Name		MI	Last Name		Suffix	
Madhu			Reddy			
17. TREASURER RESIDENCE ADDRESS			18. TREASURER MAILING ADDRESS (If different)			
Street Address			Address			
10-3 Arthur Dr						
City	State	Zip Code	City	State	Zip Code	
South Windsor	CT	06074				
19. TREASURER TELEPHONE 20. TREASURER E			IAIL ADDRESS			
(Include Area Code)						
860 918 2921 realtormadhu@			hoo.com			
21. DEPUTY TREASURER NAME						
First Name		MI	Last Name		Suffix	
Vicki			Spencer			
22. DEPUTY TREASURER RESIDENCE ADDRESS			23. DEPUTY TREASURER MAILING ADDRESS (If different)			
Street Address Address						
235 Metacomet Dr				_		
City	State	Zip Code <b>06450</b>	City	State	Zip Code	
Meriden	CT	00400				
			URER EMAIL ADDRESS			
(Include Area Code)	70446					
860 682 0318	spencer7214@gmail.com					
26. DEPOSITORY INSTITUTION NAME						
TD Bank						
27. DEPOSITORY INSTITUTION ADDRESS						
Address						
2451 Main Street, Glastonbury, CT 06033	2451 Main Street, Glastonbury, CT 06033					
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DEPUTY TREASURER SIGNATURE

<b>PECISTRA</b>	ATION TYPE	CANDIDATE NAME	
✓ Initial	Amendment		
		Prasad Srinivasan	
28. CERTIF Candidate	ICATION		
I here comments this s or de	nittee registration tatement includ	on statement are true and access my certification to the fa	se statement, that all of the designations set forth in this candidate ccurate to the best of my knowledge and belief, and further, that act that any individual designated herein to serve as my treasurer cceptance of my appointment of them to those positions.  12/16/2016
CAND	IDATE SIGNATURE		DATE (mm/dd/yyyy)
candi electo requi	date to serve as or in the State or rements as cont	the candidate's designated f Connecticut. I intend to cained in Chapter 155 throu	se statement, that I have accepted my appointment by the I treasurer of this candidate committee. I certify that I am an comply with all the campaign finance registration and disclosure 157 of the General Statutes, and to abide by any prohibitions, contributions and expenditures.
I cert	ify that I have p	oaid any civil penalties or fo	orfeitures assessed pursuant to Chapters 155 to 157, inclusive.
jurisd under plea c anoth	diction, any (A) or Title 9 of the Corr the completion are such felony	felony involving fraud, for General Statues, or that at le on of any sentence, whicher or offense.	ed guilty or nolo contendere to, in a court of competent regery, larceny, embezzlement or bribery, or (B) criminal offense east eight years have elapsed from the date of the conviction or ver date is later, without a subsequent conviction of or plea to
	ify that I am no mission.	t otherwise barred from ser	rving as a treasurer by order of the State Elections Enforcement
Mad	hu Reddy		12/16/2016
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 requirements	the candidate's designated e event of a vacancy cause e responsible for dischargi n the State of Connecticut. ents as contained in Chapter	se statement, that I have accepted my appointment by the I deputy treasurer of this candidate committee, and I understand d by the treasurer's death, incapacity or resignation, I shall ng all of the duties required of the vacating treasurer. I certify I intend to comply with all the campaign finance registration and r 155 through 157 of the General Statutes, and to abide by any ing campaign contributions and expenditures.
I cert	ify that I have p	oaid any civil penalties or fo	forfeitures assessed pursuant to Chapters 155 to 157, inclusive.
jurisd under plea d	liction, any (A) r Title 9 of the (	felony involving fraud, for General Statues, or that at le on of any sentence, whicher	ed guilty or nolo contendere to, in a court of competent regery, larceny, embezzlement or bribery, or (B) criminal offense east eight years have elapsed from the date of the conviction or ver date is later, without a subsequent conviction of or plea to
	ify that I am no reement Comm		rving as a deputy treasurer by order of the State Elections
Vick	i Spencer		02/16/2016

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 becaus (CHECK ONE)					
A. I am one of a slate of candidates whose campaigns are being funded solely was tow committee or a political committee formed for a single election or primary and expendit to the decomposition of the properties of the committee sponsoring my candidacy. The name of this spaces committee 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)				