SEEC FORM 1

STATE ELECTIONS ENFORCEMENT COMMISSION

Registration by Candidate



Revised September 2016	TO SEE COMMENT COMMENT		
REGISTRATION TYPE	1. ELECTION DATE (mm/dd/yyyy)	2. MUNICIPALITY	
		(If applicable)	
Initial	Apr 2017 - Sp. Elec - H68		
3. OFFICE OR POSITION SOUGHT			4. DISTRICT NUMBER
			(If applicable)
State Representative			068

5. PARTY AFFILIATION					
Republican • Democratic		Other (Specify)			
6. CANDIDATE NAME					
First Name		MI	Last Name		Suffix
Louis			Esposito		Jr
7. CANDIDATE RESIDENCE ADDRESS			8. CANDIDATE MAILING ADDRESS (If different)		
Street Address			Address		
1346 Litchfield Rd					
City	State	Zip Code	City	State	Zip Code
Watertown	CT 06795				
9. CANDIDATE TELEPHONE 10. CAN		DIDATE EM	IAIL ADDRESS		
(Include Area Code)					
860 274 2775					

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 Louis Esposito Jr					
12. COMMITTEE NAME					
Esposito for Rep.					
13. COMMITTEE ADDRESS			14. & 15. COMMITTEE EMAIL ADDRESS & W	EBSITE	
Address			Email Address		
1346 Litchfield Rd			louespo468@gmail.com		
City	State Zip Code 06795		Website		
Watertown					
16. TREASURER NAME	•	_			
First Name		MI	Last Name Suffi		Suffix
Edward			Corey		
17. TREASURER RESIDENCE ADDRESS			18. TREASURER MAILING ADDRESS (If different)		
Street Address			Address		
52 Sharon Ave					
City	State	Zip Code	City	State	Zip Code
Torrington	CT 06790				
19. TREASURER TELEPHONE 20. TREASURER EN			MAIL ADDRESS		
(Include Area Code)					
860 484 1795					
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	1		
(Include Area Code)					
26. DEPOSITORY INSTITUTION NAME					
Webster Bank					
27. DEPOSITORY INSTITUTION ADDRESS					
Address					
1041 Main Street, Manchester, CT 06040					

DEPUTY TREASURER SIGNATURE

Revised Septembe	Revised September 2016					
REGISTRATION	TYPE	CANDIDATE NAME				
Initial 🗸 A	mendment	Louis Esposito Jr				
28. CERTIFICATI	ON					
committee this statem	registration ent includereasurer hoosito Jr	tate, under penalties of false statement, that all of the designations set forth in this candidate in statement are true and accurate to the best of my knowledge and belief, and further, that its my certification to the fact that any individual designated herein to serve as my treasurer are indicated to me their acceptance of my appointment of them to those positions. O4/07/2017 DATE (mm/dd/yyyy)				
Тиологиясы						
candidate t elector in t requiremer	to serve as the State of the st	tate, under penalties of false statement, that I have accepted my appointment by the the candidate's designated treasurer of this candidate committee. I certify that I am an Connecticut. I intend to comply with all the campaign finance registration and disclosure ined in Chapter 155 through 157 of the General Statutes, and to abide by any prohibitions, ons concerning campaign contributions and expenditures.				
I certify that	at I have p	aid any civil penalties or forfeitures assessed pursuant to Chapters 155 to 157, inclusive.				
jurisdiction under Title plea or the another suc	n, any (A) e 9 of the (completion) ch felony (
Commission		otherwise barred from serving as a treasurer by order of the State Elections Enforcement				
Edward Co	orey	04/07/2017				
TREASURER S	SIGNATURE	DATE (mm/dd/yyyy)				
candidate t and accept automatica that I am a disclosure prohibition	o serve as that, in the lly become n elector in requirements, limitation	tate, under penalties of false statement, that I have accepted my appointment by the the candidate's designated deputy treasurer of this candidate committee, and I understand event of a vacancy caused by the treasurer's death, incapacity or resignation, I shall responsible for discharging all of the duties required of the vacating treasurer. I certify the State of Connecticut. I intend to comply with all the campaign finance registration and ats as contained in Chapter 155 through 157 of the General Statutes, and to abide by any one or restrictions concerning campaign contributions and expenditures.				
I certify the	at I have p	aid any civil penalties or forfeitures assessed pursuant to Chapters 155 to 157, inclusive.				
jurisdictior under Title	n, any (A) 9 of the C completion	of been convicted of or pled guilty or nolo contendere to, in a court of competent felony involving fraud, forgery, larceny, embezzlement or bribery, or (B) criminal offense eneral Statues, or that at least eight years have elapsed from the date of the conviction or nof any sentence, whichever date is later, without a subsequent conviction of or plea to r offense.				
I certify the Enforceme		otherwise barred from serving as a deputy treasurer by order of the State Elections ssion.				

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	N FOR EXEMPTION	ON 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 was town 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 countries:				
		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)			