### **SEEC FORM 1**

#### STATE ELECTIONS ENFORCEMENT COMMISSION

### **Registration by Candidate**

Revised September 2016



REGISTRATION TYPE	ION TYPE 1. ELECTION DATE (mm/dd/yyyy)			2. MUNICIPALITY			
✓ Initial   Amendment	Nov 2018			(If applicable)			
3. OFFICE OR POSITION SOUGHT				4. DISTRICT NUMBER			
Governor					(If applicable	2)	
5. PARTY AFFILIATION							
Republican • Democratic Other (Specify)							
6. CANDIDATE NAME							
First Name			MI	Last Name			Suffix
Daniel			Drew				
7. CANDIDATE RESIDENCE ADDRESS			8. CANDIDATE MAILING ADDRESS (If different)				
Street Address			Address				
500 Long Hill Rd							
City		State	Zip Code	City		State	Zip Code
Middletown		СТ	06457				
9. CANDIDATE TELEPHONE		10. CANDIDATE EMAIL ADDRESS					
(Include Area Code)							
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 Daniel T Drew						
12. COMMITTEE NAME						
Drew for CT						
13. COMMITTEE ADDRESS 14.			14. & 15. COMMITTEE EMAIL ADDRESS & WEBSITE			
Address			Email Address			
PO Box 90			campaign@dandrew.com			
City	State   Zip Code   06033   CT		Website			
East Glastonbury						
16. TREASURER NAME	<u>.</u>					
First Name		MI	Last Name		Suffix	
Dianna		J	Kulmacz			
17. TREASURER RESIDENCE ADDRESS			18. TREASURER MAILING ADDRESS (If different)			
Street Address			Address			
134 Brault Hill Rd						
City	State	Zip Code	City	State	Zip Code	
Higganum	CT 06441					
19. TREASURER TELEPHONE 20. TREASURER E			MAIL ADDRESS			
(Include Area Code)						
860 301 2492 Pacs.ct@comcast		t.net				
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 TREASURER EMAIL ADDRESS					
(Include Area Code)						
26. DEPOSITORY INSTITUTION NAME						
TD Bank						
27. DEPOSITORY INSTITUTION ADDRESS						
Address						
Washington Street, Middletown, CT 06457						

SEEC FORM 1A Revised September 2016

REGISTRATION TYPE	CANDIDATE NAME	
/ Initial   Amendment	Daniel T Drew	
3. CERTIFICATION		
committee registration this statement include	on statement are true and accurate les my certification to the fact that	rement, that all of the designations set forth in this candidate to the best of my knowledge and belief, and further, that at any individual designated herein to serve as my treasurer time of my appointment of them to those positions.
Daniel T Drew		07/12/2017
CANDIDATE SIGNATURE		DATE (mm/dd/yyyy)
candidate to serve as elector in the State or requirements as cont limitations or restrict I certify that I have pure I certify that I have pure jurisdiction, any (A) under Title 9 of the Control of th	the candidate's designated treasured f Connecticut. I intend to complyained in Chapter 155 through 15' tions concerning campaign contributions concerning campaign contributions are convicted of or pled guil felony involving fraud, forgery, General Statues, or that at least eight of any sentence, whichever date	ement, that I have accepted my appointment by the urer of this candidate committee. I certify that I am an y with all the campaign finance registration and disclosure 7 of the General Statutes, and to abide by any prohibitions, abutions and expenditures.  The assessed pursuant to Chapters 155 to 157, inclusive.  The ty or nolo contendere to, in a court of competent conviction or the islater, without a subsequent conviction of or plea to
I certify that I am no Commission.		as a treasurer by order of the State Elections Enforcement
Dianna J Kulmacz		07/12/2017
		DATE (mm/dd/yyyy)
candidate to serve as and accept that, in th automatically become that I am an elector in disclosure requirement	the candidate's designated deput the event of a vacancy caused by the the responsible for discharging all the state of Connecticut. I inte- tents as contained in Chapter 155 t	ement, that I have accepted my appointment by the ty treasurer of this candidate committee, and I understand he treasurer's death, incapacity or resignation, I shall of the duties required of the vacating treasurer. I certify end to comply with all the campaign finance registration and through 157 of the General Statutes, and to abide by any impaign contributions and expenditures.
I certify that I have p	paid any civil penalties or forfeitu	ares assessed pursuant to Chapters 155 to 157, inclusive.
jurisdiction, any (A) under Title 9 of the (	felony involving fraud, forgery, General Statues, or that at least eigen of any sentence, whichever date	ty or nolo contendere to, in a court of competent larceny, embezzlement or bribery, or (B) criminal offense ght years have elapsed from the date of the conviction or te is later, without a subsequent conviction of or plea to
I certify that I am no	t otherwise barred from serving a	as a deputy treasurer by order of the State Elections
Enforcement Comm	ission.	



# **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	itical committee	late of candidates whose campaigns are being funded solely v a town committee or a formed for a single election or primary and expendit to the decomposition of the special beautiful as a special property of the special property of the second property o				
		OR				
con thou	tributions from cusand dollars (\$	ny campaign entirely from my own erstand funds and will not request or receive other individuals or committees and I to derstand at if I make expenditures exceeding one 1,000) that I shall be reconstant for filing francial disclosure statements (SEEC Form 23) me schedule and in the tank manner as record of treasurers of candidate committees.				
C.	I do not intend	to receive experience 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 se, for the reason checked above, is true, accurate and complete to the best of my ef.				
CAN	DIDATE SIGNATURE	DATE (mm/dd/yyyy)				