SEEC FORM 1

STATE ELECTIONS ENFORCEMENT COMMISSION

Registration by Candidate

Revised September 2016



	SEMEN	COMM						
REGISTRATION TYPE 1. ELECTION DATE (mm/dd/yyyy)				2. MUNICIPALI	2. MUNICIPALITY			
✓ Initial Amendment	Nov 2018			(If applicable)				
3. OFFICE OR POSITION SOUGHT					4. DISTRICT NUMBER			
State Representative					(If applicable) 121			
5. PARTY AFFILIATION								
Republican V Democratic Other (Specify)								
6. CANDIDATE NAME								
First Name	MI			Last Name Su			Suffix	
Joseph	seph			Gresko				
7. CANDIDATE RESIDENCE ADDRESS				8. CANDIDATE MAILING ADDRESS (If different)				
Street Address			Address					
284 Mary Ave								
City		State	Zip Code	City			State	Zip Code
Stratford		СТ	06614					
9. CANDIDATE TELEPHON	10. CANDIDATE EMAIL ADDRESS							
(Include Area Code)								

11. DESIGNATION OF CAMPAIGN FUNDING SOURCE

9835

788

(Check one)

203

✓ A. I am forming a candidate committee and I am required to file a Candidate Committee Registration Statement.

JoePGresk@aol.com

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 Joseph P Gres	Joseph P Gresko					
12. COMMITTEE NAME						
Gresko 2018						
13. COMMITTEE ADDRESS			14. & 15. COMMITTEE EMAIL ADDRESS & W	EBSITE		
Address	Email Address					
284 Mary Ave			joepgresk@aol.com			
City	State	Zip Code 06614	Website			
Stratford	CT					
16. TREASURER NAME						
First Name		MI	Last Name Suffix			
Alexander		J	Florek			
17. TREASURER RESIDENCE ADDRESS			18. TREASURER MAILING ADDRESS (If different	")		
Street Address			Address			
264 Victoria Lawn			2885 Main St			
City	State Zip Code		City	State	Zip Code	
Stratford	СТ	06615	Stratford	СТ	06614	
19. TREASURER TELEPHONE 20. TREASURER EM			MAIL ADDRESS			
(Include Area Code)						
203 260 2378 Alexander.Florek@			@gmail.com			
21. DEPUTY TREASURER NAME		1.0	I		T a ar	
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			URER EMAIL ADDRESS			
(Include Area Code)						
26. DEPOSITORY INSTITUTION NAME						
People's United Bank						
27. DEPOSITORY INSTITUTION ADDRESS						
Address						
2772 Main Street, Stratford, CT 06615						

DEPUTY TREASURER SIGNATURE

REGISTRATION TYPE	CANDIDATE NAME	
✓ Initial Amendment		
	Joseph P Gresko	
28. CERTIFICATION Candidate		
I hereby certify and s committee registratio this statement include	cate, under penalties of false statement, that all of the dens tatement are true and accurate to the best of my knows my certification to the fact that any individual designate indicated to me their acceptance of my appointment	wledge and belief, and further, that nated herein to serve as my treasurer
Joseph P Gresko	30	3/21/2017
CANDIDATE SIGNATURE	DA	TE (mm/dd/yyyy)
candidate to serve as elector in the State of requirements as conta limitations or restricti	ate, under penalties of false statement, that I have accepted the candidate's designated treasurer of this candidate of Connecticut. I intend to comply with all the campaign ined in Chapter 155 through 157 of the General Statutions concerning campaign contributions and expenditured any civil penalties or forfeitures assessed pursuant to	committee. I certify that I am an in finance registration and disclosure es, and to abide by any prohibitions, res.
jurisdiction, any (A) to under Title 9 of the G plea or the completion another such felony of	ot been convicted of or pled guilty or nolo contendere to belony involving fraud, forgery, larceny, embezzlement eneral Statues, or that at least eight years have elapsed in of any sentence, whichever date is later, without a sur offense. otherwise barred from serving as a treasurer by order of the serving as a treasurer by ord	t or bribery, or (B) criminal offense from the date of the conviction or bsequent conviction of or plea to
Alexander J Florek	08	/21/2017
TREASURER SIGNATURE		TE (mm/dd/yyyy)
Deputy Treasurer		
I hereby certify and s candidate to serve as and accept that, in the automatically become that I am an elector in disclosure requirement	ate, under penalties of false statement, that I have accepted the candidate's designated deputy treasurer of this candidate's designated by the treasurer's death, in responsible for discharging all of the duties required the State of Connecticut. I intend to comply with all its as contained in Chapter 155 through 157 of the Gerns or restrictions concerning campaign contributions a	didate committee, and I understand capacity or resignation, I shall of the vacating treasurer. I certify the campaign finance registration and neral Statutes, and to abide by any
I certify that I have pa	aid any civil penalties or forfeitures assessed pursuant	to Chapters 155 to 157, inclusive.
jurisdiction, any (A) tunder Title 9 of the G	of been convicted of or pled guilty or nolo contendere to belony involving fraud, forgery, larceny, embezzlement eneral Statues, or that at least eight years have elapsed in of any sentence, whichever date is later, without a sur offense.	t or bribery, or (B) criminal offense from the date of the conviction or
I certify that I am not Enforcement Commis	otherwise barred from serving as a deputy treasurer by sion.	y order of the State Elections

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)					
A. I am one of a slate of candidates whose campaigns are being funded soler, y a toy committee or a political committee formed for a single election or primary and expendit to the determy behand be reported by the committee sponsoring my candidacy. The name of this spaces of committee is:						
		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 a 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)				