SEEC FORM 1

STATE ELECTIONS ENFORCEMENT COMMISSION

Registration by Candidate

Revised September 2016



2. MUNICIPALITY		

REGISTRATION TYPE	E (mm/dd/yyyy) 2. MUNICIPALITY										
✓ Initial Amendment	Nov 2018			(If applicable	2)						
3. OFFICE OR POSITION SOUGHT							4. DISTRICT NUMBER				
State Senator							(If applicable) 024				
5. PARTY AFFILIATION											
Republican • Democratic Other (Specify)											
6. CANDIDATE NAME											
First Name			MI	Last Name						Suffix	
Kenneth			М	Gucker							
7. CANDIDATE RESIDENCE ADDRESS				8. CAND	8. CANDIDATE MAILING ADDRESS (If different)						
Street Address Ad											
89 Padanaram Rd											
City		State	Zip Code	City					State	Zip Code	
Danbury		СТ	06811								
9. CANDIDATE TELEPHONE			10. CANDIDATE EMAIL ADDRESS								
(Include Area Code)											
203 733	4400	mercurycat21@hotmail.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.

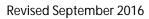
Important Notice: Failure of a candidate to complete this page together with either Form 1A, "Registration of Candidate Committee," or Form 1B "Exemption from Forming a Candidate Committee," within 10 days of becoming a candidate will subject the candidate to a mandatory \$100 late filing fee. See Section 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





REGISTRATION TYPE CANDIDATE NAME							
✓ Initial I Amendment Kenneth M Gucker							
12. COMMITTEE NAME							
Gucker 2018							
13. COMMITTEE ADDRESS			14. & 15. COMMITTEE EMAIL ADDRESS & W	EBSITE			
Address			Email Address				
89 Padanaram Rd		ken@gucker2018.com					
City State Zip Code 06811			Website				
Danbury CT 0			gucker2018.com				
16. TREASURER NAME							
First Name		MI	Last Name Suffix				
Lynn		Н	Taborsak				
17. TREASURER RESIDENCE ADDRESS			18. TREASURER MAILING ADDRESS (If different	t)			
Street Address			Address				
110 Hayestown Rd							
City	State	Zip Code	City	State	Zip Code		
Danbury	СТ	06811- 4873					
19. TREASURER TELEPHONE 20. TREASURER EM			MAIL ADDRESS				
(Include Area Code)							
203 748 0822 LTaborsak@gmail.			l.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	(0.00)	,		
		_		_			
City	State	Zip Code	City	State	Zip Code		
24. DEPUTY TREASURER TELEPHONE 25. DEPUTY TREAS			URER EMAIL ADDRESS				
(Include Area Code)							
26. DEPOSITORY INSTITUTION NAME							
Savings Bank of Danbury							
27. DEPOSITORY INSTITUTION ADDRESS							
Address							
12 Hayestown Avenue, Danbury, CT 06811							

DEPUTY TREASURER SIGNATURE

REGISTRATION TYPE Value Initial Amendment Kenneth M Gucker 28. CERTIFICATION Candidate I hereby certify and state, under penalties of false statement committee registration statement are true and accurate to this statement includes my certification to the fact that any or deputy treasurer have indicated to me their acceptance Kenneth M Gucker CANDIDATE SIGNATURE Treasurer I hereby certify and state, under penalties of false statement candidate to serve as the candidate's designated treasurer elector in the State of Connecticut. I intend to comply with requirements as contained in Chapter 155 through 157 of limitations or restrictions concerning campaign contributions.	the best of my knowledge and belief, and further, that by individual designated herein to serve as my treasurer of my appointment of them to those positions. 11/13/2017 DATE (mm/dd/yyyy) ent, that I have accepted my appointment by the of this candidate committee. I certify that I am an ith all the campaign finance registration and disclosure the General Statutes, and to abide by any prohibitions, ions and expenditures.					
Z8. CERTIFICATION Candidate I hereby certify and state, under penalties of false stateme committee registration statement are true and accurate to this statement includes my certification to the fact that any or deputy treasurer have indicated to me their acceptance Kenneth M Gucker CANDIDATE SIGNATURE Treasurer I hereby certify and state, under penalties of false statement candidate to serve as the candidate's designated treasurer elector in the State of Connecticut. I intend to comply with requirements as contained in Chapter 155 through 157 of the state of Connecticut.	the best of my knowledge and belief, and further, that by individual designated herein to serve as my treasurer of my appointment of them to those positions. 11/13/2017 DATE (mm/dd/yyyy) ent, that I have accepted my appointment by the of this candidate committee. I certify that I am an ith all the campaign finance registration and disclosure the General Statutes, and to abide by any prohibitions, ions and expenditures.					
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I hereby certify and state, under penalties of false statemer candidate to serve as the candidate's designated treasurer elector in the State of Connecticut. I intend to comply with requirements as contained in Chapter 155 through 157 of	of this candidate committee. I certify that I am an ith all the campaign finance registration and disclosure the General Statutes, and to abide by any prohibitions, ions and expenditures.					
I certify that I have paid any civil penalties or forfeitures a	The property of the property o					
I certify that I have not been convicted of or pled guilty or jurisdiction, any (A) felony involving fraud, forgery, larce under Title 9 of the General Statues, or that at least eight y plea or the completion of any sentence, whichever date is another such felony or offense. I certify that I am not otherwise barred from serving as a t Commission.	eny, embezzlement or bribery, or (B) criminal offense years have elapsed from the date of the conviction or later, without a subsequent conviction of or plea to					
Lynn H Taborsak	11/13/2017					
TREASURER SIGNATURE	DATE (mm/dd/yyyy)					
Deputy Treasurer						
I hereby certify and state, under penalties of false statement candidate to serve as the candidate's designated deputy treated accept that, in the event of a vacancy caused by the treated automatically become responsible for discharging all of the that I am an elector in the State of Connecticut. I intend to disclosure requirements as contained in Chapter 155 through prohibitions, limitations or restrictions concerning campain	reasurer of this candidate committee, and I understand reasurer's death, incapacity or resignation, I shall he duties required of the vacating treasurer. I certify to comply with all the campaign finance registration and ugh 157 of the General Statutes, and to abide by any					
I certify that I have paid any civil penalties or forfeitures assessed pursuant to Chapters 155 to 157, inclusive.						
I certify that I have not been convicted of or pled guilty or nolo contendere to, in a court of competent jurisdiction, any (A) felony involving fraud, forgery, larceny, embezzlement or bribery, or (B) criminal offense under Title 9 of the General Statues, or that at least eight years have elapsed from the date of the conviction or plea or the completion of any sentence, whichever date is later, without a subsequent conviction of or plea to another such felony or offense.						
I certify that I am not otherwise barred from serving as a c Enforcement Commission.	deputy treasurer by 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	12. REASON FOR EXEMPTION FROM FORMING A CANDIDATE COMMITTEE						
	I hereby certify that I am exempt from forming a candidate committee because (CHECK ONE)						
A. I am one of a slate of candidates whose campaigns are being funded solely y a tow committee or a political committee formed for a single election or primary and expendit to the decomposition of the reported by the committee sponsoring my candidacy. The name of this space of 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 experiments in excess of one thousand dollars (\$1,000).							
D. I do to receive 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)					