SEEC FORM 1

STATE ELECTIONS ENFORCEMENT COMMISSION

Registration by Candidate

Revised September 2016



		VT~COM							
REGISTRATION TYPE	TYPE 1. ELECTION DATE (mm/dd/yyyy)				2. MUNICIPALITY				
✓ Initial Amendment	Nov 2018				(If applicable)				
3. OFFICE OR POSITION SOUGHT					4. DISTRICT NUMBER				
State Representative						(If applicable) 040			
5. PARTY AFFILIATION									
✓ Republican Democratic Other (Specify)									
6. CANDIDATE NAME									
First Name			MI		Last Name			Suffix	
John F				Scott			IV		
7. CANDIDATE RESIDENCE ADDRESS					8. CANDIDATE MAILING ADDRESS (If different)				
Street Address					Address				
674 Cow Hill Rd									
City		State	Zip Code		City		State	Zip Code	
Mystic		СТ	06355						
9. CANDIDATE TELEPHONE 10.			10. CANDIDATE EMAIL ADDRESS						
Include Area Code)									

11. DESIGNATION OF CAMPAIGN FUNDING SOURCE

4580

561

(Check one)

860

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

john@johnfscott.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 John F Scott I\	✓ Initial I Amendment John F Scott IV					
12. COMMITTEE NAME						
John Scott 2018	John Scott 2018					
13. COMMITTEE ADDRESS 14. & 15. COMMITTEE EMAIL ADD				EBSITE		
Address	Email Address					
674 Cow Hill Rd			john@johnfscott.com			
City	State	Zip Code 06355	Website			
Mystic	СТ		www.johnfscott.com			
16. TREASURER NAME						
First Name		MI	Last Name Suffi.			
Matthew		J	Morton Jr			
17. TREASURER RESIDENCE ADDRESS			18. TREASURER MAILING ADDRESS (If different)			
Street Address			Address			
67 Mariners Ln						
City	State	Zip Code	City	State	Zip Code	
Mystic	CT 06355					
19. TREASURER TELEPHONE 20. TREASURER EN			MAIL ADDRESS			
(Include Area Code)						
860 572 7562 mjmorton@snet.ne			et			
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			
(Include Area Code)						
26. DEPOSITORY INSTITUTION NAME						
Chelsea Groton Bank						
27. DEPOSITORY INSTITUTION ADDRESS						
Address						
904 Poquonnock Road, Groton, CT 06340)					
<u> </u>						

DEPUTY TREASURER SIGNATURE

Revised Sep	tember 2016		
REGISTRA	TION TYPE	CANDIDATE NAME	
✓ Initial	Amendment	John F Scott IV	
28. CERTIFI	ICATION		
comn this st or dep	nittee registration tatement includ	on statement are true and accurate my certification to the fact	statement, that all of the designations set forth in this candidate trate to the best of my knowledge and belief, and further, that that any individual designated herein to serve as my treasurer eptance of my appointment of them to those positions. 11/28/2017 DATE (mm/dd/yyyy)
candio electo requir	date to serve as or in the State of rements as cont	the candidate's designated tro f Connecticut. I intend to con	statement, that I have accepted my appointment by the easurer of this candidate committee. I certify that I am an apply with all the campaign finance registration and disclosure 157 of the General Statutes, and to abide by any prohibitions, ntributions and expenditures.
I certi	fy that I have p	aid any civil penalties or forfe	eitures assessed pursuant to Chapters 155 to 157, inclusive.
jurisd under plea c	iction, any (A) Title 9 of the (felony involving fraud, forger General Statues, or that at leas on of any sentence, whichever	guilty or nolo contendere to, in a court of competent ry, larceny, embezzlement or bribery, or (B) criminal offense t eight years have elapsed from the date of the conviction or date is later, without a subsequent conviction of or plea to
	fy that I am no	t otherwise barred from servir	ng as a treasurer by order of the State Elections Enforcement
Mattl	new J Morton Jr		11/30/2017
TREAS	URER SIGNATURE		DATE (mm/dd/yyyy)
candicand ad autom that I discloprohil I certifurisd under plea canoth	by certify and so date to serve as except that, in the natically become am an elector in sure requirementations, limitation fy that I have pure five that I have noticition, any (A). Title 9 of the Correct the completion of the c	the candidate's designated designated designated of event of a vacancy caused be responsible for discharging in the State of Connecticut. It is as contained in Chapter 15 cons or restrictions concerning and any civil penalties or forfattot been convicted of or pled a felony involving fraud, forger General Statues, or that at leas on of any sentence, whichever or offense.	statement, that I have accepted my appointment by the eputy treasurer of this candidate committee, and I understand by the treasurer's death, incapacity or resignation, I shall all of the duties required of the vacating treasurer. I certify intend to comply with all the campaign finance registration and 55 through 157 of the General Statutes, and to abide by any campaign contributions and expenditures. Bettures assessed pursuant to Chapters 155 to 157, inclusive. Beguilty or nolo contendere to, in a court of competent ry, larceny, embezzlement or bribery, or (B) criminal offense to eight years have elapsed from the date of the conviction or date is later, without a subsequent conviction of or plea to 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 solely v a tow committee or a political committee formed for a single election or primary and expendit to the committee sponsoring my candidacy. The name of this sponsoring my candidacy.						
		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)				