### **SEEC FORM 1**

#### STATE ELECTIONS ENFORCEMENT COMMISSION

## Registration by Candidate

Revised September 2016



		WT~CO.							
REGISTRATION TYPE	1. ELECTION DAT	ΓE (mm/dd/	(עעעע		2. MUNICIPALITY				
✓ Initial   Amendment	Nov 2018				(If applicable)				
3. OFFICE OR POSITION SOUGHT					4. DISTRICT NUMBER				
Lieutenant Governor						(If applicable	2)		
5. PARTY AFFILIATION	5. PARTY AFFILIATION								
Republican Democratic • Other (Specify) Unaffiliated									
6. CANDIDATE NAME									
First Name			MI		Last Name			Suffix	
Monte				Frank					
7. CANDIDATE RESIDENCE ADDRESS				8. CANDIDATE MAILING ADDRESS (If different)					
Street Address				Address					
10 Mountain Mnr									
City		State	Zip Coo		City		State	Zip Code	
Sandy Hook		СТ	0648	32					
9. CANDIDATE TELEPHONE 10.			10. CANDIDATE EMAIL ADDRESS						
(Include Area Code)									

### 11. DESIGNATION OF CAMPAIGN FUNDING SOURCE

1317

512

#### (Check one)

203

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

monte@griebelfrankforct.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**





REGISTRATION TYPE CANDIDATE NAME						
✓ Initial   Amendment   Monte Frank						
12. COMMITTEE NAME						
Frank For LG						
13. COMMITTEE ADDRESS	13. COMMITTEE ADDRESS 4 WEBSITE					
Address			Email Address			
266 Pearl St # 210		monte@greibelfrankforct.com				
City	State	Zip Code 06103	Website			
Hartford C			www.greibelfrankforct.com			
16. TREASURER NAME						
First Name		MI	Last Name Suffix			
Thomas		J	Filomeno			
17. TREASURER RESIDENCE ADDRESS			18. TREASURER MAILING ADDRESS (If different)			
Street Address			Address			
31 Bonny View Rd						
City	State	Zip Code	City	State	Zip Code	
West Hartford	СТ	06107				
19. TREASURER TELEPHONE 20. TREASURER EM			MAIL ADDRESS			
(Include Area Code)						
860 521 5458 tjfilomeno@comcas			ast.net			
21. DEPUTY TREASURER NAME		1				
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			URER EMAIL ADDRESS			
(Include Area Code)						
26. DEPOSITORY INSTITUTION NAME						
Bank of America						
27. DEPOSITORY INSTITUTION ADDRESS						
Address						
North Main Street, West Hartford, CT						
<u> </u>						

SEEC FORM 1A Revised September 2016

EGISTRATION TYPE	CANDIDATE NAME	
/ Initial   Amendment	Monte Frank	
B. CERTIFICATION		
committee registrati	on statement are true and accurate t des my certification to the fact that	ment, that all of the designations set forth in this candidate to the best of my knowledge and belief, and further, that any individual designated herein to serve as my treasurer ce of my appointment of them to those positions.
Monte Frank		12/20/2017
CANDIDATE SIGNATURE		DATE (mm/dd/yyyy)
candidate to serve as elector in the State of requirements as confimitations or restrict I certify that I have purisdiction, any (A) under Title 9 of the plea or the completion another such felony	s the candidate's designated treasure of Connecticut. I intend to comply tained in Chapter 155 through 157 of the tions concerning campaign contributions concerning campaign contributions are convicted of or pled guilty of felony involving fraud, forgery, large General Statues, or that at least eight on of any sentence, whichever date or offense.	es assessed pursuant to Chapters 155 to 157, inclusive.  or nolo contendere to, in a court of competent reeny, embezzlement or bribery, or (B) criminal offense ht years have elapsed from the date of the conviction or is later, without a subsequent conviction of or plea to
Commission.		a treasurer by order of the State Elections Enforcement
Thomas J Filomeno		12/20/2017
TREASURER SIGNATURE		DATE (mm/dd/yyyy)
candidate to serve as and accept that, in the automatically become that I am an elector disclosure requirement	s the candidate's designated deputy ne event of a vacancy caused by the ne responsible for discharging all of in the State of Connecticut. I intendents as contained in Chapter 155 the	ment, that I have accepted my appointment by the treasurer of this candidate committee, and I understand treasurer's death, incapacity or resignation, I shall f the duties required of the vacating treasurer. I certify d to comply with all the campaign finance registration and rough 157 of the General Statutes, and to abide by any paign contributions and expenditures.
I certify that I have	paid any civil penalties or forfeiture	es assessed pursuant to Chapters 155 to 157, inclusive.
jurisdiction, any (A) under Title 9 of the	felony involving fraud, forgery, land General Statues, or that at least eight on of any sentence, whichever date	or nolo contendere to, in a court of competent reeny, embezzlement or bribery, or (B) criminal offense ht years have elapsed from the date of the conviction or is later, without a subsequent conviction of or plea to
I certify that I am no	ot otherwise barred from serving as	a deputy treasurer by order of the State Elections
Enforcement Comm		a deputy freasurer by order of the State Dicertons



# **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 tow committee or a political committee formed for a single election or primary and expendit to the description of the reported by the committee sponsoring my candidacy. The name of this space 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)				