State

Zip Code

SEEC FORM 1

STATE ELECTIONS ENFORCEMENT COMMISSION

Registration by Candidate

Revised September 2016



	A STANSTUL SUSTINI SO				
REGISTRATION TYPE	1. ELECTION DATE (mm/dd/y	(עעע	2. MUNICIPALITY		
✓ Initial Amendment	Nov 2018		(If applicable)		
OFFICE OR POSITION SOUGHT 4. DISTRICT NUMBER					BER
				(If applicable)	
State Representative				126	
PARTY AFFILIATION					
Republican	✓ Democratic	Other (Speci	(b)		
. CANDIDATE NAME					
rst Name		MI	Last Name		Suffix
Charlie		L	Stallworth		
CANDIDATE RESIDENCE ADDRESS			8. CANDIDATE MAILING ADDRESS (If different)		
reet Address			Address		

City

11. DESIGNATION OF CAMPAIGN FUNDING SOURCE

8301

(Check one)

35 Wickliffe Cir

9. CANDIDATE TELEPHONE

449

Bridgeport

(Include Area Code)

203

City

✓ 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.

Zip Code

06606

Drcls02@gmail.com

10. CANDIDATE EMAIL ADDRESS

State

CT

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	ON TYPE CANDIDATE NAME					
✓ Initial Amendment	Charlie L Stallworth					
12. COMMITTEE NAME						
Re-elect Stallworth 2018						
13. COMMITTEE ADDRESS	13. COMMITTEE ADDRESS 4. & 15. COMMITTEE EMAIL ADDRESS & WEBSITE					
Address Email Address						
31 Charter Oak PI # 8			stallworth2018@gmail.com			
			Zip Code 06106	Zip Code Website		
Hartford CT			00100			
16. TREASURER NAME						
First Name			MI	Last Name Suffix		
Luwannia				Johnson-Martin		
17. TREASURER RESIDENCE	E ADDRESS			18. TREASURER MAILING ADDRESS (If different)		
Street Address				Address		
31 Charter Oak PI # 8						
City		State	Zip Code 06106	City	State	Zip Code
Hartford	Hartford CT					
19. TREASURER TELEPHONE 20. TREASURER EN			MAIL ADDRESS			
(Include Area Code)						
860 983 8915 LouMartin2007@yah			yahoo.com			
21. DEPUTY TREASURER NA	ME		_			
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 INSTITUTI	ON NAME					
Webster Bank						
27. DEPOSITORY INSTITUTION ADDRESS						
Address						
3546 Main Street, Bridgeport, CT 06606						
L				<u> </u>	•	

SEEC FORM 1A Revised September 2016

REGISTRATION TYPE CANI		CANDIDATE NAME	
✓ Initial	Amendment	Charlie L Stallworth	
28. CERTIFI	CATION		
comm this st	ittee registration atement includ	on statement are true and accurates my certification to the fact	tatement, that all of the designations set forth in this candidate rate to the best of my knowledge and belief, and further, that that any individual designated herein to serve as my treasurer ptance of my appointment of them to those positions.
Charlie L Stallworth			12/27/2017
CANDIDATE SIGNATURE			DATE (mm/dd/yyyy)
candide electorequire limita I certical limita I certical jurisdical under plea o	late to serve as r in the State or ements as contitions or restrict fy that I have p fy that I have n fection, any (A) Title 9 of the C	the candidate's designated tree Connecticut. I intend to commined in Chapter 155 through ions concerning campaign coraid any civil penalties or forfer ot been convicted of or pled g felony involving fraud, forger General Statues, or that at least n of any sentence, whichever	tatement, that I have accepted my appointment by the asurer of this candidate committee. I certify that I am an ply with all the campaign finance registration and disclosure 157 of the General Statutes, and to abide by any prohibitions, atributions and expenditures. itures assessed pursuant to Chapters 155 to 157, inclusive. uilty or nolo contendere to, in a court of competent y, larceny, embezzlement or bribery, or (B) criminal offense 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 not nission.	otherwise barred from serving	g as a treasurer by order of the State Elections Enforcement
Luwannia Johnson-Martin 1		lartin (12/27/2017
TREASURER SIGNATURE			DATE (mm/dd/yyyy)
candidand account and account account that I disclored prohibility I certification in the control of the contro	date to serve as ecept that, in the latically become am an elector in sure requirementations, limitation fy that I have pure for that I have noted and the lation, any (A). Title 9 of the Corresponding to the completion of the co	the candidate's designated dependence of a vacancy caused by a responsible for discharging and the State of Connecticut. I into the	tatement, that I have accepted my appointment by the puty treasurer of this candidate committee, and I understand 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 5 through 157 of the General Statutes, and to abide by any campaign contributions and expenditures. Itures assessed pursuant to Chapters 155 to 157, inclusive. Builty or nolo contendere to, in a court of competent y, larceny, embezzlement or bribery, or (B) criminal offense eight years have elapsed from the date of the conviction or date is later, without a subsequent conviction of or plea to
DEPUT	Y TREASURER SIGNA	TURE	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)			
poli	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 decomposition of the properties of the committee sponsoring my candidacy. The name of this space of the committee 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 reconstructed for filing francial 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)		