SEEC FORM 1

STATE ELECTIONS ENFORCEMENT COMMISSION

Registration by Candidate

Revised September 2016



REGISTRATION TYPE 1. ELECTION DATE (mm/dd/yyyy)		2. MUNICIPALITY					
✓ Initial Amendment	nitial Amendment Nov 2018			(lf applicable)			
3. OFFICE OR POSITION S	OUGHT				4. DISTR	RICT NUM	IBER
Governor					(If applicable	2)	
5. PARTY AFFILIATION							
Republican	✓ Democratic		Other (Spec	įfy)			
6. CANDIDATE NAME							
First Name			MI	Last Name			Suffix
Sean			М	Connolly			
7. CANDIDATE RESIDENC	E ADDRESS			8. CANDIDATE MAILING ADDRESS	(If different)		
Street Address				Address			
15 Wildflower Dr							
City		State	Zip Code	City		State	Zip Code
Hebron		СТ	06248				
9. CANDIDATE TELEPHON	NE	10. CAN	NDIDATE EN	AIL ADDRESS			
(Include Area Code)							
202 374	3240	sean.o	connolly@c	onnolly4ct.com			
11. DESIGNATION OF CAN	IPAIGN FUNDING	SOURCE	E				
(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 Lam evenu	nt from forming	r a cand	lidate corr	mittee and Lam filing a Certifi	cation c	fEven	ntion
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 <i>together with</i> either Form 1A, "Registration of Candidate Committee," <i>or</i> 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 NA	ME							
Initial I Amendment Sean M Connolly									
12. COMMITTEE NAME									
Connolly for Connecticut									
13. COMMITTEE ADDRESS				14. & 15. COMMITTEE EMAIL ADDRESS & W	EBSITE				
Address				Email Address					
PO Box 752				treasurer@connolly4ct.com					
City		State	Zip Code	Website					
Rocky Hill		СТ	06067	connolly4ct.com					
16. TREASURER NAME									
First Name			MI	Last Name		Suffix			
Natalie				Cummings					
17. TREASURER RESIDENCE	E ADDRESS			18. TREASURER MAILING ADDRESS (If different)				
Street Address				Address					
236 Rambler St									
City		State	Zip Code	City	State	Zip Code			
Bristol		СТ	06010						
19. TREASURER TELEPHON	1E	20. TRE	CASURER EN	IAIL ADDRESS					
(Include Area Code)									
860 280 6813		treasu	rer@connol	ly4ct.com					
21. DEPUTY TREASURER NA	AME			1					
First Name			MI	Last Name		Suffix			
Joseph			D	Geremia					
22. DEPUTY TREASURER RE	ESIDENCE ADDR	ESS		23. DEPUTY TREASURER MAILING ADDRESS	${f S}$ (If different)			
Street Address				Address					
70 Ridgewood Dr									
City		State	Zip Code	City	State	Zip Code			
Rocky Hill		СТ	06067						
24. DEPUTY TREASURER TE									
(Include Area Code)		23, DEI	UTTTKEAS	UNER EMAIL ADDRESS					
860 921 858									
26. DEPOSITORY INSTITUT	ION NAME								
Webster Bank									
27. DEPOSITORY INSTITUTION ADDRESS									
Address									
377 Cromwell Avenue, Ro	cky Hill, CT 060	67							

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REGISTRAT	TION TYPE	CANDIDATE NAME
✓ Initial	Amendment	Sean M Connolly

28. CERTIFICATION

Candidate

I hereby certify and state, under penalties of false statement, that all of the designations set forth in this candidate committee registration statement are true and accurate to the best of my knowledge and belief, and further, that this statement includes my certification to the fact that any individual designated herein to serve as my treasurer or deputy treasurer have indicated to me their acceptance of my appointment of them to those positions.

Sean M Connolly	01/09/2018
CANDIDATE SIGNATURE	DATE (mm/dd/yyyy)

Treasurer

I hereby certify and state, under penalties of false statement, that I have accepted my appointment by the candidate to serve as the candidate's designated treasurer of this candidate committee. I certify that I am an elector in the State of Connecticut. I intend to comply with all the campaign finance registration and disclosure requirements as contained in Chapter 155 through 157 of the General Statutes, and to abide by any prohibitions, limitations or restrictions concerning campaign contributions and expenditures.

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 treasurer by order of the State Elections Enforcement Commission.

Natalie Cummings	01/09/2018
TREASURER SIGNATURE	DATE (mm/dd/yyyy)

Deputy Treasurer

I hereby certify and state, under penalties of false statement, that I have accepted my appointment by the candidate to serve as the candidate's designated deputy treasurer of this candidate committee, and I understand and accept that, in the event of a vacancy caused by the treasurer's death, incapacity or resignation, I shall automatically become responsible for discharging all of the duties required of the vacating treasurer. I certify that I am an elector in the State of Connecticut. I intend to comply with all the campaign finance registration and disclosure requirements as contained in Chapter 155 through 157 of the General Statutes, and to abide by any prohibitions, limitations or restrictions concerning campaign contributions and expenditures.

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 deputy treasurer by order of the State Elections Enforcement Commission.

Joseph D Geremia	01/09/2018	
DEPUTY TREASURER SIGNATURE	DATE (mm/dd/yyyy)	

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SEEC FORM 1B STATE ELECTIONS ENFORCEMENT COMMISSION Certification of Exemption From Forming a Candidate Committee Revised September 2016



DECICED ATION TYPE	CANDIDATE NAME			
REGISTRATION TYPE				
□ Initial □ Amendmen				
12. REASON FOR EXEMP	12. REASON FOR EXEMPTION FROM FORMING A CANDIDATE COMMITTEE			
I hereby cer	ify 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 by a town committee or a political committee formed for a single election or primary and expenditude to the total be reported by the committee sponsoring my candidacy. The name of this space of the committee is:				
	OR			
contributions fro thousand dollars	g my campaign entirely from my own verse al fun is and will not request or receive in other individuals or committees and I to terstation of if I make expenditures exceeding one (\$1,000) that I shall be reconstant for filing financial disclosure statements (SEEC Form 23) same schedule and in the campaigneer as received of treasurers of candidate committees.			
C. I do not inte				
	OR			
D. I do	nd to receive or expend any funds, including personal funds, for this campaign.			
13. CER				
I here certify and state, under penalties of false statement, that this statement of exemption from forming a candidat committee, for the reason checked above, is true, accurate and complete to the best of my knowledge and belief.				
CANDIDATE SIGNATUR	DATE (mm/dd/yyyy)			