SEEC FORM 1

STATE ELECTIONS ENFORCEMENT COMMISSION

Registration by Candidate

Revised September 2016



REGISTRATION TYPE 1. ELECTION DATE (mm/dd/yyyy)			2. MUNICIPALITY				
Initial V Amendment Nov 2018			(If applicable)				
3. OFFICE OR POSITION SOUGHT				4. DISTRICT NUMBER			
State Treasurer					(If applicable	e)	
5. PARTY AFFILIATION							
Republican	✓ Democratic		Other (Spece	ify)			
6. CANDIDATE NAME							
First Name			MI	Last Name			Suffix
Shawn			Т	Wooden			
7. CANDIDATE RESIDENC	E ADDRESS			8. CANDIDATE MAILING ADDRESS	(If different)		
Street Address				Address			
115 Scarborough St							
City		State	Zip Code	City		State	Zip Code
Hartford		СТ	06105				
9. CANDIDATE TELEPHON	NE	10. CAN	DIDATE EN	IAIL ADDRESS			
(Include Area Code) ShawnWoodenF			nWoodenFo	orTreasurer@gmail.com			
11. DESIGNATION OF CAN	IPAIGN FUNDING	SOURCE	2				
(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 <i>together with</i> either Form 1A, "Registration					rm 1A. '	ation	

Important Notice: Failure of a candidate to complete this page *together with* either Form IA, "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 NA	ME						
Initial VI Amendment Shawn T Wooden								
12. COMMITTEE NAME								
Wooden For Treasurer								
13. COMMITTEE ADDRESS				14. & 15. COMMITTEE EMAIL ADDRESS & W	EBSITE			
Address				Email Address				
115 Scarborough St				shawnwoodenfortreasurer@gmail.com				
City		State	Zip Code	Website				
Hartford		СТ	06105	shawnwooden.com				
16. TREASURER NAME								
First Name			MI	Last Name		Suffix		
Sabino				Rodriguez				
17. TREASURER RESIDENC	E ADDRESS			18. TREASURER MAILING ADDRESS (If different	.)			
Street Address				Address				
12 Norwalk Ave								
City		State	Zip Code	City	State	Zip Code		
Westport		СТ	06880					
19. TREASURER TELEPHONE20. TREASUR			CASURER EN	MAIL ADDRESS				
(Include Area Code)	lude Area Code) ShawnWoodenForTreasurer@gmail.com							
21. DEPUTY TREASURER NA	AME							
First Name			MI	Last Name		Suffix		
Robert			н	Ficeto				
22. DEPUTY TREASURER RESIDENCE ADDRESS 23. DE				23. DEPUTY TREASURER MAILING ADDRES	${f S}$ (If different)		
Street Address				Address				
13 Diamond Rock Rd								
City		State	Zip Code	City	State	Zip Code		
Wolcott		СТ	06716					
24. DEPUTY TREASURER TH	DEPUTY TREASURER TELEPHONE 25. DEPUTY TREASURER EMAIL ADDRESS							
(Include Area Code)								
rficeto@aol.com								
26. DEPOSITORY INSTITUT	ION NAME							
Webster Bank								
27. DEPOSITORY INSTITUTION ADDRESS								
Address								
665 West Main Street, Nev	665 West Main Street, New Britain, CT 06053							

SEEC FORM 1A

Revised September 2016

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REGISTRA	ATION TYPE	CANDIDATE NAME		
Initial	✔ Amendment	Shawn T Wooden		
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.

Shawn T Wooden	0	05/24/2018
CANDIDATE SIGNATURE	D	ATE (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.

Sabino Rodriguez	05/25/2018
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.

Robert H Ficeto	05/24/2018
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				
12. REASON FOR EXEMP	TION 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 expendit the order of the committee sponsoring my candidacy. The name of this sponsor committee is:				
	OR			
B. I am funding my campaign entirely from my own erscell funds and will not request or receive contributions from other individuals or committees and I to derstand out if I make expenditures exceeding one thousand dollars (\$1,000) that I shall be receipts of for filing financial disclosure statements (SEEC Form 23) according to the same schedule and in the family of the same schedule and the family of the same schedule and the same				
C. I do not inte				
	OR			
D. I do the 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)			