SEEC FORM 1

STATE ELECTIONS ENFORCEMENT COMMISSION

Registration by Candidate

Revised September 2016



	CEME	COMM					
REGISTRATION TYPE 1. ELECTION DATE (mm/dd/yyyy)			2. MUNICIPALITY				
Initial	Nov 2018			(If applicable)			
3. OFFICE OR POSITION SOUGHT				4. DISTRICT NUMBER			
					(If applicable	e)	
State Representative					037		
5. PARTY AFFILIATION							
✓ Republican Democratic Other (Specify)							
6. CANDIDATE NAME							
First Name			MI	Last Name			Suffix
Holly			Н	Cheeseman			
7. CANDIDATE RESIDENCE ADDRESS			8. CANDIDATE MAILING ADDRESS (If different)				
Street Address			Address				
16 Mitchell Dr							
City		State	Zip Code	City		State	Zip Code
Niantic		СТ	06357				
9. CANDIDATE TELEPHONE		10. CANDIDATE EMAIL ADDRESS					

11. DESIGNATION OF CAMPAIGN FUNDING SOURCE

5485

227

(Check one)

(Include Area Code)

860

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

holly.cheesemanxx@gmail.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 Holly H Cheeseman						
12. COMMITTEE NAME						
Cheeseman For The 37th						
13. COMMITTEE ADDRESS			14. & 15. COMMITTEE EMAIL ADDRESS & W	EBSITE		
Address			Email Address			
35 Plum Hill Rd						
City	State		Website			
East Lyme	CT	06333				
16. TREASURER NAME						
First Name		MI	Last Name		Suffix	
Lawrence			Fitzgerald			
17. TREASURER RESIDENCE ADDRESS			18. TREASURER MAILING ADDRESS (If different)			
Street Address			Address			
35 Plum Hill Rd						
City	State	Zip Code	City	State	Zip Code	
East Lyme	СТ	06357				
19. TREASURER TELEPHONE 20. TREASURER EM			IAIL ADDRESS			
(Include Area Code)						
860 691 1426 lwfitzge@gmail.co			m			
21. DEPUTY TREASURER NAME						
First Name		MI	Last Name		Suffix	
William			Weber			
			23. DEPUTY TREASURER MAILING ADDRESS (If different)			
Street Address Address						
19 Plants Dam Rd						
City	State	Zip Code 06333	City	State	Zip Code	
East Lyme	CT	00333				
24. DEPUTY TREASURER TELEPHONE 25. DEPUTY TREAS			URER EMAIL ADDRESS			
clude Area Code)						
860 575 3136	wweber2@aol.com					
26. DEPOSITORY INSTITUTION NAME						
Dime Bank						
27. DEPOSITORY INSTITUTION ADDRESS						
Address						
18 Chesterfield Road, East Lyme, CT 063	33					
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SEEC FORM 1A Revised September 2016

DEPUTY TREASURER SIGNATURE

Revised September 2016					
REGISTR	ATION TYPE	CANDIDATE NAME			
Initial	✓ Amendment	Holly H Cheeseman			
28. CERTII	FICATION				
com this or de	mittee registrationstatement includ	on statement are true and accurate es my certification to the fact that ave indicated to me their acceptant	ement, 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 nee of my appointment of them to those positions. O4/15/2018 DATE (mm/dd/yyyy)		
Treasurer					
I her cand elect requ	idate to serve as for in the State of irements as cont	the candidate's designated treasure f Connecticut. I intend to comply	ment, that I have accepted my appointment by the rer of this candidate committee. I certify that I am an with all the campaign finance registration and disclosure of the General Statutes, and to abide by any prohibitions, outions and expenditures.		
I cer	tify that I have p	aid any civil penalties or forfeitur	es assessed pursuant to Chapters 155 to 157, inclusive.		
juris unde plea anotl	diction, any (A) or Title 9 of the (or the completion her such felony of	felony involving fraud, forgery, la General Statues, or that at least eig on of any sentence, whichever date or offense.	y or nolo contendere to, in a court of competent arceny, embezzlement or bribery, or (B) criminal offense that years have elapsed from the date of the conviction or e is later, without a subsequent conviction of or plea to a treasurer by order of the State Elections Enforcement		
Law	rence Fitzgerald		04/15/2018		
	ASURER SIGNATURE		DATE (mm/dd/yyyy)		
cand and a autor that discl proh	reby certify and solidate to serve as accept that, in the matically become I am an elector is osure requirementations, limitation tify that I have putify that I have noticition, any (A) for Title 9 of the Corthe completion of the completion of the such felony of the such felony of the completion of the completion of the such felony of the completion of the such felony of the completion of the completion of the such felony of the completion	the candidate's designated deputy e event of a vacancy caused by the e responsible for discharging all on the State of Connecticut. I inter- ints as contained in Chapter 155 th ons or restrictions concerning cam- raid any civil penalties or forfeitur- not been convicted of or pled guilt- felony involving fraud, forgery, la General Statues, or that at least eight on of any sentence, whichever date for offense.	ment, that I have accepted my appointment by the y treasurer of this candidate committee, and I understand the treasurer's death, incapacity or resignation, I shall of the duties required of the vacating treasurer. I certify and to comply with all the campaign finance registration and arough 157 of the General Statutes, and to abide by any apaign contributions and expenditures. The estimate of the contribution of the state of the conviction or the islater, without a subsequent conviction of or plea to the capture of the State Elections.		
Wil	liam Weber		04/15/2018		

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 soler, y a toy committee or a political committee formed for a single election or primary and expendit to the determy behand be reported by the committee sponsoring my candidacy. The name of this spaces 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)				