SEEC FORM 1

STATE ELECTIONS ENFORCEMENT COMMISSION

Registration by Candidate

Revised September 2016



	EMENT	COMM]	
REGISTRATION TYPE	1. ELECTION DATE	E (mm/dd/yy)	vy)	2. MUNICIPALITY				
✓ Initial Amendment	Nov 2018			(If applicable)				
3. OFFICE OR POSITION SOUGHT					4. DISTRICT NUMBER			
State Senator					(If applicable	?)		
5. PARTY AFFILIATION	5. PARTY AFFILIATION							
Republican Democratic Other (Specify)								
6. CANDIDATE NAME								
First Name M.		MI	Last Name			Suffix		
Julie				Kushner				
7. CANDIDATE RESIDENCE ADDRESS				8. CANDIDATE MAILING ADDRESS (If different)				
Street Address				Address				
75 Old Ridgebury Rd								
City	S		Zip Code	City		State	Zip Code	
Danbury		СТ	06810					
9. CANDIDATE TELEPHONE 1			10. CANDIDATE EMAIL ADDRESS					
(Include Area Code)								

11. DESIGNATION OF CAMPAIGN FUNDING SOURCE

5253

870

(Check one)

203

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

jkushneruaw@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 Julie Kushner	endment Julie Kushner					
12. COMMITTEE NAME						
Julie 2018	Julie 2018					
13. COMMITTEE ADDRESS 4 WEBSITE						
Address			Email Address			
4 Topfield Rd			juliekushner2018@gmail.com			
ity State Zip Code 06811			Website			
Danbury	CT	00011	www.julie2018.com			
16. TREASURER NAME						
First Name		MI	Last Name Suffix			
Kate A			Conetta			
17. TREASURER RESIDENCE ADDRESS			18. TREASURER MAILING ADDRESS (If different)			
Street Address			Address			
4 Topfield Rd						
City	State	Zip Code	City	State	Zip Code	
Danbury	СТ	06811				
19. TREASURER TELEPHONE 20. TREASURER EN			IAIL ADDRESS			
(Include Area Code)						
203 313 3002 kate.conetta@			ail.com			
21. DEPUTY TREASURER NAME		I			T	
First Name		MI	Last Name		Suffix	
Sarah		K	Ganong			
22. DEPUTY TREASURER RESIDENCE ADDRESS			23. DEPUTY TREASURER MAILING ADDRESS (If different)			
Street Address Address						
80 Howe St # 303						
City	State	Zip Code 06511	City	State	Zip Code	
New Haven	CT	00311				
24. DEPUTY TREASURER TELEPHONE 25. DEPUTY TREAS			URER EMAIL ADDRESS			
(Include Area Code)	_	_				
860 861 5608	sarah.ganong@gmail.com					
26. DEPOSITORY INSTITUTION NAME						
People's United Bank						
27. DEPOSITORY INSTITUTION ADDRESS						
Address						
6 Queen Street, Newtown, CT 06470						

SEEC FORM 1A

Revised September 2016					
REGISTRATION TYPE	CANDIDATE NAME				
✓ Initial Amendment	Julie Kushner				
28. CERTIFICATION					
committee registration this statement include	n statement are true and accurate to the s my certification to the fact that any	at, that all of the designations set forth in this candidate he best of my knowledge and belief, and further, that individual designated herein to serve as my treasurer of my appointment of them to those positions.			
Julie Kushner		01/17/2018			
CANDIDATE SIGNATURE		DATE (mm/dd/yyyy)			
candidate to serve as the elector in the State of requirements as contable limitations or restriction. I certify that I have particularly that I have not jurisdiction, any (A) for under Title 9 of the Golphea or the completion another such felony or	the candidate's designated treasurer of Connecticut. I intend to comply with ined in Chapter 155 through 157 of the conscious concerning campaign contribution and any civil penalties or forfeitures and the been convicted of or pled guilty or relony involving fraud, forgery, larced eneral Statues, or that at least eight year of any sentence, whichever date is lar offense.	th, that I have accepted my appointment by the of this candidate committee. I certify that I am an all the campaign finance registration and disclosure the General Statutes, and to abide by any prohibitions, and expenditures. Seessed pursuant to Chapters 155 to 157, inclusive. Inclusive and court of competent the early of the conviction of the conviction of ater, without a subsequent conviction of or plea to 101/16/2018			
TREASURER SIGNATURE		DATE (mm/dd/yyyy)			
candidate to serve as tand accept that, in the automatically become that I am an elector in disclosure requirement prohibitions, limitation I certify that I have particularly that I have no jurisdiction, any (A) founder Title 9 of the Go	the candidate's designated deputy trees event of a vacancy caused by the trees responsible for discharging all of the the State of Connecticut. I intend to the state of Connecticut. I	t, that I have accepted my appointment by the asurer of this candidate committee, and I understand asurer's death, incapacity or resignation, I shall eduties required of the vacating treasurer. I certify comply with all the campaign finance registration and gh 157 of the General Statutes, and to abide by any gn contributions and expenditures. Seessed pursuant to Chapters 155 to 157, inclusive. Inolo contendere to, in a court of competent my, embezzlement or bribery, or (B) criminal offense ears have elapsed from the date of the conviction or ater, without a subsequent conviction of or plea to			

I certify that I am not otherwise barred from serving as a deputy treasurer by order of the State Elections Enforcement Commission.

DEPUTY TREASURER SIGNATURE

Sarah K Ganong

01/16/2018 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 tow committee or a political committee formed for a single election or primary and expendit to the committee sponsoring my candidacy. The name of this 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)				