SEEC FORM 1

STATE ELECTIONS ENFORCEMENT COMMISSION

Registration by Candidate

Revised September 2016



	EME	V7 COMM						
REGISTRATION TYPE 1. ELECTION DATE (mm/dd/yyyy)				2. MUNICIPALITY				
✓ Initial Amendment	Nov 2018			(!f applicable)				
3. OFFICE OR POSITION SOUGHT				4. DISTRICT NUMBER				
State Senator			(If applicable) 018					
5. PARTY AFFILIATION								
✓ Republican Democratic Other (Specify)								
6. CANDIDATE NAME								
First Name			MI	Last Name			Suffix	
Heather			Somers					
7. CANDIDATE RESIDENCE ADDRESS			8. CANDIDATE MAILING ADDRESS (If different)					
Street Address			Address					
67 Ramsdell St								
City		State	Zip Code	City		State	Zip Code	
Groton		СТ	06340					
9. CANDIDATE TELEPHONE 1			10. CANDIDATE EMAIL ADDRESS					
Include Area Code)								

11. DESIGNATION OF CAMPAIGN FUNDING SOURCE

4628

389

(Check one)

860

✓ 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 *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 C.	CANDIDATE NAME						
✓ Initial Amendment H	Heather Somers						
12. COMMITTEE NAME							
Somers for Senate							
13. COMMITTEE ADDRESS 14				14. & 15. COMMITTEE EMAIL ADDRESS & WEBSITE			
Address Email Address							
67 Ramsdell St							
		Zip Code 06340-	Website				
Groton CT		3622					
16. TREASURER NAME							
First Name			MI	Last Name Suffix			
Constantine			G	Antipas			
17. TREASURER RESIDENCE A	DDRESS			18. TREASURER MAILING ADDRESS (If different)			
Street Address			Address				
164 Payer Ln				28 Cottrell St			
City		State	Zip Code	City	State	Zip Code	
Mystic		CT	06355	Mystic	СТ	06355-20	
19. TREASURER TELEPHONE 20. TREASURER EN			MAIL ADDRESS				
(Include Area Code)							
860 536 2297 antipaslaw@aol.co			com				
21. DEPUTY TREASURER NAM	E						
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 INSTITUTION NAME							
Chelsea Groton Bank							
27. DEPOSITORY INSTITUTION ADDRESS							
Address							
904 Poquonnock Road, Groton, CT 06340							

REGISTRATION TYPE	CANDIDATE NAME	
✓ Initial Amendment	Heather Somers	
28. CERTIFICATION		
committee registrat this statement inclu	ion statement are true and accurate to the des my certification to the fact that any in	that all of the designations set forth in this candidate best of my knowledge and belief, and further, that dividual designated herein to serve as my treasurer my appointment of them to those positions.
Heather Somers		01/29/2018
CANDIDATE SIGNATURE		DATE (mm/dd/yyyy)
candidate to serve a elector in the State of requirements as condimitations or restrict I certify that I have I certify that I have jurisdiction, any (A under Title 9 of the	s the candidate's designated treasurer of to of Connecticut. I intend to comply with a tained in Chapter 155 through 157 of the ctions concerning campaign contributions paid any civil penalties or forfeitures assemble to been convicted of or pled guilty or not been convicted of or pled guilty or not been involving fraud, forgery, larceny General Statues, or that at least eight year on of any sentence, whichever date is later	essed pursuant to Chapters 155 to 157, inclusive.
I certify that I am no Commission.	ot otherwise barred from serving as a trea	surer by order of the State Elections Enforcement
Constantine G Antip	pas	01/29/2018
TREASURER SIGNATURE		DATE (mm/dd/yyyy)
candidate to serve a and accept that, in the automatically become that I am an elector disclosure requirem prohibitions, limitated I certify that I have Jurisdiction, any (Alunder Title 9 of the plea or the complete another such felony	s the candidate's designated deputy treasure the event of a vacancy caused by the treasure responsible for discharging all of the contents as contained in Chapter 155 through ions or restrictions concerning campaign paid any civil penalties or forfeitures assemble to the convicted of or pled guilty or not been convicted of or pled guilty or not be pleasured by the convicted of or pled guilty or not been convicted of or pled guilty or not be pleasured by the convicted of or pled guilty or not be pleasured by the convicted of or pled guilty or not be pleasured by the convicted of or pled guilty or not be pleasured by the convicted of or pled guilty or not be pleasured by the convicted of or pled guilty or not be pleasured by the convicted of the convicted of the convicted by the convicted of the convicted by the	essed pursuant to Chapters 155 to 157, inclusive.
DEPUTY TREASURER SIGN	NATURE	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)			