SEEC FORM 1

STATE ELECTIONS ENFORCEMENT COMMISSION

Registration by Candidate

Revised September 2016



	CEMEN	COMM					
REGISTRATION TYPE 1. ELECTION DATE (mm/dd/yyyy)			2. MUNICIPALITY				
✓ Initial Amendment	Nov 2018			(If applicable)			
3. OFFICE OR POSITION SOUGHT					4. DISTRICT NUMBER		
					(If applicable	2)	
State Representative				117			
5. PARTY AFFILIATION							
✓ Republican Democratic Other (Specify)							
6. CANDIDATE NAME							
First Name				Last Name			Suffix
Charles			Ferraro				
7. CANDIDATE RESIDENCE ADDRESS				8. CANDIDATE MAILING ADDRESS (If different)			
Street Address				Address			
13 Twin Circle Rd							
City		State	Zip Code	City		State	Zip Code
West Haven		СТ	06516				
O. CANDIDATE TELEPHONE 10			10. CANDIDATE EMAIL ADDRESS				

11. DESIGNATION OF CAMPAIGN FUNDING SOURCE

3207

410

(Check one)

(Include Area Code)

203

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

cferraro04@snet.net

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 N.	CANDIDATE NAME					
✓ Initial I Amendment Charles J Ferr	Charles J Ferraro					
12. COMMITTEE NAME						
Re-elect Charles Ferraro "18"						
13. COMMITTEE ADDRESS	13. COMMITTEE ADDRESS 4 WEBSITE					
Address	Email Address					
231 Daytona St			cferraro04@snet.net			
City	State	Zip Code 06516	Website			
West Haven	СТ	00310				
16. TREASURER NAME						
First Name		MI	Last Name Suffix			
Catherine		Α	Vergati			
17. TREASURER RESIDENCE ADDRESS			18. TREASURER MAILING ADDRESS (If different)			
Street Address			Address			
231 Daytona St						
City	State Zip Code O6516		City	State	Zip Code	
West Haven						
19. TREASURER TELEPHONE 20. TREASURER E			AAIL ADDRESS			
(Include Area Code)						
203 999 5075	cverga	ti@att.net				
21. DEPUTY TREASURER NAME						
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			URER EMAIL ADDRESS			
(Include Area Code)						
26. DEPOSITORY INSTITUTION NAME						
Citizens Bank						
27. DEPOSITORY INSTITUTION ADDRESS						
Address						
222 Boston Post Road, Orange, CT 06477						
<u> </u>						

REGISTRA	TION TYPE	CANDIDATE NAME	
✓ Initial	Amendment	Charles J Ferraro	
28. CERTIF	ICATION		
comn this s	nittee registration tatement includ	on statement are true and accurates my certification to the fact the	tement, that all of the designations set forth in this candidate te to the best of my knowledge and belief, and further, that at any individual designated herein to serve as my treasurer ance of my appointment of them to those positions.
Cha	rles J Ferraro		02/01/2018
CAND	DATE SIGNATURE		DATE (mm/dd/yyyy)
electorequii limita I certi I certi jurisd under plea o	or in the State of rements as contitions or restrict fy that I have projection, any (A) Title 9 of the C	f Connecticut. I intend to complained in Chapter 155 through 15 ions concerning campaign contraid any civil penalties or forfeit ot been convicted of or pled guifelony involving fraud, forgery, General Statues, or that at least en of any sentence, whichever day	surer of this candidate committee. I certify that I am an aly with all the campaign finance registration and disclosure of the General Statutes, and to abide by any prohibitions, ributions and expenditures. The sures assessed pursuant to Chapters 155 to 157, inclusive. Ity or nolo contendere to, in a court of competent larceny, embezzlement or bribery, or (B) criminal offense ight years have elapsed from the date of the conviction or atterist is later, without a subsequent conviction of or plea to
Comr	nission.	t otherwise barred from serving	as a treasurer by order of the State Elections Enforcement
	erine A Vergati		02/01/2018
TREAS	URER SIGNATURE		DATE (mm/dd/yyyy)
candi- and a- auton that I disclo	by certify and so date to serve as eccept that, in the natically become am an elector in soure requireme	the candidate's designated depute event of a vacancy caused by the responsible for discharging all in the State of Connecticut. I intents as contained in Chapter 155	tement, that I have accepted my appointment by the aty 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 end to comply with all the campaign finance registration and through 157 of the General Statutes, and to abide by any ampaign contributions and expenditures.
I certi	fy that I have p	aid any civil penalties or forfeit	ures assessed pursuant to Chapters 155 to 157, inclusive.
jurisd under plea c	iction, any (A) Title 9 of the 0	felony involving fraud, forgery, General Statues, or that at least e on of any sentence, whichever da	lty or nolo contendere to, in a court of competent larceny, embezzlement or bribery, or (B) criminal offense ight years have elapsed from the date of the conviction or ate is later, without a subsequent conviction of or plea to
	fy that I am no cement Commi		as a deputy treasurer by order of the State Elections
DEPUT	Y TREASURER SIGNA	TURE	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 solely was tow committee or a political committee formed for a single election or primary and expendit to the decomposition of the properties of the committee sponsoring my candidacy. The name of this spaces committees:						
		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 reconsitive for filing financial 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)				