SEEC FORM 1

STATE ELECTIONS ENFORCEMENT COMMISSION

Registration by Candidate

Revised September 2016



| | ORCEMEN | VI COMMISS | | | | | | | |
|---|-----------------|------------|----------|-------------|---|-----|--|-------|----------|
| REGISTRATION TYPE | 1. ELECTION DAT | ΓE (mm/da | d/yyyy) | 2. MUN | IICIPALITY | | | | |
| ✓ Initial Amendment | Nov 2018 | | | (If applica | ble) | | | | |
| 3. OFFICE OR POSITION SOUGHT | | | | | 4. DISTRICT NUMBER | | | | |
| | | | | | (If applicable) | | | | |
| State Representative | | | | | | 048 | | | |
| 5. PARTY AFFILIATION | | | | | | | | | |
| Republican • Democratic Other (Specify) | | | | | | | | | |
| 6. CANDIDATE NAME | | | | | | | | | |
| First Name | | | MI | Last Nam | e | | | | Suffix |
| Linda | | | Orang | Orange | | | | | |
| 7. CANDIDATE RESIDENCE ADDRESS | | | | 8. CAN | 8. CANDIDATE MAILING ADDRESS (If different) | | | | |
| Street Address | | | | Address | Address | | | | |
| 52 Standish Rd | | | | | | | | | |
| City | | State | Zip Code | = | | | | State | Zip Code |
| Colchester CT 06 | | | 06415 | | | | | | |

11. DESIGNATION OF CAMPAIGN FUNDING SOURCE

3936

(Check one)

(Include Area Code)

860

9. CANDIDATE TELEPHONE

537

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

lindaaorange@yahoo.com

10. CANDIDATE EMAIL ADDRESS

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.

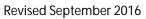
See Section 9-623(b), Connecticut General Statutes.

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





| REGISTRATION TYPE CANDIDATE NA | AME | | | | | | |
|---|---|-------------------|---|--------|----------|--|--|
| ✓ Initial I Amendment Linda A Orange | | | | | | | |
| 12. COMMITTEE NAME | | | | | | | |
| Orange 2018 | | | | | | | |
| 13. COMMITTEE ADDRESS 4 W. 15. COMMITTEE EMAIL ADDRESS & W. | | | | EBSITE | | | |
| Address | | | Email Address | | | | |
| 52 Standish Rd | | _ | lindaaorange@yahoo.com | | | | |
| City | State | Zip Code 06415 | Website | | | | |
| Colchester | CT | 00110 | | | | | |
| 16. TREASURER NAME | | | | | | | |
| First Name | | MI | Last Name Suffi | | | | |
| Gregg | | G | LePage | | | | |
| 17. TREASURER RESIDENCE ADDRESS | | | 18. TREASURER MAILING ADDRESS (If different | 9) | | | |
| Street Address | | | Address | | | | |
| 89 Shadbush Dr | | | | | | | |
| City | State | Zip Code | City | State | Zip Code | | |
| Colchester | СТ | 06415 | | | | | |
| 19. TREASURER TELEPHONE 20. TREASURE | | | IAIL ADDRESS | | | | |
| (Include Area Code) | | | | | | | |
| 860 537 0281 | cast.net | | | | | | |
| 21. DEPUTY TREASURER NAME | | l.a | | | La ar | | |
| First Name | | MI | Last Name Suffix | | | | |
| Susan | | | Thomas | | | | |
| 22. DEPUTY TREASURER RESIDENCE ADDRESS | | | 23. DEPUTY TREASURER MAILING ADDRESS (If different) Address | | | | |
| Street Address 12 Vicki Ln | | | 12 Vicky Ln | | | | |
| City | State | Zip Code | City | State | Zip Code | | |
| | | 06415 | | | | | |
| Colchester | СТ | | Colchester | СТ | 06415 | | |
| 24. DEPUTY TREASURER TELEPHONE (Include Area Code) | | | | | | | |
| | suze75@aol.com | | | | | | |
| 200 231 1000 | | | | | | | |
| 26. DEPOSITORY INSTITUTION NAME | | | | | | | |
| United Bank | | | | | | | |
| 27. DEPOSITORY INSTITUTION ADDRESS | | | | | | | |
| Address | | | | | | | |
| 99 Linwood Avenue, Colchester, CT 0641 | 99 Linwood Avenue, Colchester, C1 06415 | | | | | | |

| Revised September 2016 | Page 3 | 01 4 |
|---|---|------|
| REGISTRATION TYPE | CANDIDATE NAME | |
| ✓ Initial Amendment | Linda A Orange | |
| 28. CERTIFICATION | | |
| committee registration this statement include | state, under penalties of false statement, that all of the designations set forth in this candidate on statement are true and accurate to the best of my knowledge and belief, and further, that es my certification to the fact that any individual designated herein to serve as my treasurer ave indicated to me their acceptance of my appointment of them to those positions. O1/29/2018 DATE (mm/dd/yyyy) | 2 |
| candidate to serve as elector in the State of requirements as contalimitations or restrict. I certify that I have p I certify that I have n jurisdiction, any (A) under Title 9 of the C plea or the completion another such felony of | tate, under penalties of false statement, that I have accepted my appointment by the the candidate's designated treasurer of this candidate committee. I certify that I am an Connecticut. I intend to comply with all the campaign finance registration and disclosure ained in Chapter 155 through 157 of the General Statutes, and to abide by any prohibitions, ions concerning campaign contributions and expenditures. aid any civil penalties or forfeitures assessed pursuant to Chapters 155 to 157, inclusive. ot been convicted of or pled guilty or nolo contendere to, in a court of competent felony involving fraud, forgery, larceny, embezzlement or bribery, or (B) criminal offense General Statues, or that at least eight years have elapsed from the date of the conviction or n of any sentence, whichever date is later, without a subsequent conviction of or plea to or offense. To otherwise barred from serving as a treasurer by order of the State Elections Enforcement of 1/31/2018 | |
| TREASURER SIGNATURE | DATE (mm/dd/yyyy) | |
| candidate to serve as and accept that, in the automatically become that I am an elector in disclosure requirement prohibitions, limitation I certify that I have purisdiction, any (A) | tate, under penalties of false statement, that I have accepted my appointment by the the candidate's designated deputy treasurer of this candidate committee, and I understand e event of a vacancy caused by the treasurer's death, incapacity or resignation, I shall e responsible for discharging all of the duties required of the vacating treasurer. I certify in the State of Connecticut. I intend to comply with all the campaign finance registration and into as contained in Chapter 155 through 157 of the General Statutes, and to abide by any ons or restrictions concerning campaign contributions and expenditures. and any civil penalties or forfeitures assessed pursuant to Chapters 155 to 157, inclusive. ot been convicted of or pled guilty or nolo contendere to, in a court of competent felony involving fraud, forgery, larceny, embezzlement or bribery, or (B) criminal offense General Statues, or that at least eight years have elapsed from the date of the conviction or | 1 |

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

plea or the completion of any sentence, whichever date is later, without a subsequent conviction of or plea to

| Susan G Thomas | | 01/29/2018 | | | |
|----------------------------|---|--------------------|--|--|--|
| DEDITY TREASURED SIGNATURE | • | DATE (mm/dd/sagas) | | | |

another such felony or offense.



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) |
| poli | itical committee | ate of candidates whose campaigns are being funded solely v a town committee or a formed for a single election or primary and expendit to the decomposition of the sponsoring my candidacy. The name of this sponsor countries is: |
| | | 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 derstall 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** **OR** **OR** **OR** **OR** **DEC FORM 23 **OR** **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) |
| | | |