SEEC FORM 1

STATE ELECTIONS ENFORCEMENT COMMISSION

Registration by Candidate

Revised September 2016



REGISTRATION TYPE	1. ELECTION DATE (mm/dd/yyyy)			2. MUNICIPALITY				
✓ Initial Amendment	Nov 2018			(If applicable)				
3. OFFICE OR POSITION SOUGHT					4. DISTRICT NUMBER			
State Representative					(If applicable	e)		
5. PARTY AFFILIATION								
Republican	Democratic		Other (Speci	(fs)				
6. CANDIDATE NAME								
First Name			MI	Last Name			Suffix	
William	А			Petit Jr			Jr	
7. CANDIDATE RESIDENCE ADDRESS				8. CANDIDATE MAILING ADDRESS (If different)				
Street Address			Address					
132 Red Stone HI				PO Box 310				
City		State	Zip Code	City		State	Zip Code	
Plainville		СТ	06062	Plainville		СТ	06062-03	
9. CANDIDATE TELEPHONE 10. CAN			DIDATE EN	IAIL ADDRESS				
(Include Area Code)								
860 747	5084	docpe	tit@gmail.c	om				

11. DESIGNATION OF CAMPAIGN FUNDING SOURCE

(Check one)

✓ 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	CANDIDATE NAME						
✓ Initial Amendment	William A Petit Jr						
12. COMMITTEE NAME							
Petit 4 CT							
13. COMMITTEE ADDRESS				14. & 15. COMMITTEE EMAIL ADDRESS & WEBSITE			
Address				Email Address			
132 Red Stone HI			docpetit@comcast.net				
City State		State	06062	Website			
Plainville		СТ					
16. TREASURER NAME							
First Name			MI	Last Name Suffix			
Glenn			F	Petit			
17. TREASURER RESIDENCE	E ADDRESS			18. TREASURER MAILING ADDRESS (If different)			
Street Address				Address			
132 Red Stone HI			PO Box 310				
City		State	Zip Code	City	State	Zip Code	
Plainville CT		СТ	06062	Plainville	СТ	06062-0:	
19. TREASURER TELEPHONE 20. TREASURER E			MAIL ADDRESS				
(Include Area Code) 860 406 1866		glennf	petit@yaho	oo.com			
21. DEPUTY TREASURER NA	ME		1				
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							
Farmington Bank							
27. DEPOSITORY INSTITUTION ADDRESS							
117 East Street, Plainville, CT 06062							
L					•		

SEEC FORM 1A Revised September 2016

REGISTRA	TION TYPE	CANDIDATE NAME
✓ Initial	Amendment	William A Petit Jr
28. CERTIF	ICATION	
comn this s	nittee registration tatement includ	tate, under penalties of false statement, that all of the designations set forth in this candidate in statement are true and accurate to the best of my knowledge and belief, and further, that is my certification to the fact that any individual designated herein to serve as my treasurer are indicated to me their acceptance of my appointment of them to those positions.
Willi	iam A Petit Jr	01/30/2018
CAND	IDATE SIGNATURE	DATE (mm/dd/yyyy)
I certifurisd under plea canoth	date to serve as or in the State or rements as contations or restrict ify that I have p liction, any (A) Title 9 of the Cor the completioner such felony of	ate, 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 ined in Chapter 155 through 157 of the General Statutes, and to abide by any prohibitions, ons concerning campaign contributions and expenditures. And any civil penalties or forfeitures assessed pursuant to Chapters 155 to 157, inclusive. The 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 eneral Statues, or that at least eight years have elapsed from the date of the conviction or nof any sentence, whichever date is later, without a subsequent conviction of or plea to roffense. Otherwise barred from serving as a treasurer by order of the State Elections Enforcement
	mission.	
	n F Petit	01/30/2018
TREAS	SURER SIGNATURE	DATE (mm/dd/yyyy)
candi and a auton that I discle prohi I cert I cert jurisd	eby certify and so date to serve as eccept that, in the natically become am an elector in osure requirements bitions, limitation ify that I have positive if the service of the service of the lift of the service of the service of the service of the lift of the service of the service of the service of the service of the lift of the service of the lift of the service	ate, 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 event of a vacancy caused by the treasurer's death, incapacity or resignation, I shall responsible for discharging all of the duties required of the vacating treasurer. I certify the State of Connecticut. I intend to comply with all the campaign finance registration and its as contained in Chapter 155 through 157 of the General Statutes, and to abide by any ms or restrictions concerning campaign contributions and expenditures. And any civil penalties or forfeitures assessed pursuant to Chapters 155 to 157, inclusive. The been convicted of or pled guilty or nolo contendere to, in a court of competent celony involving fraud, forgery, larceny, embezzlement or bribery, or (B) criminal offense eneral Statues, or that at least eight years have elapsed from the date of the conviction or
plea o anoth I cert	or the completion her such felony of	otherwise barred from serving as a deputy treasurer by order of the State Elections
DEPUT	ΓΥ 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 because (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 committee sponsoring my candidacy. The name of this sponsoring my candidacy 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 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)				