SEEC FORM 1

STATE ELECTIONS ENFORCEMENT COMMISSION

Registration by Candidate

Revised September 2016



2. MUNICIPALITY

REGISTRATION TYPE	1. ELECTION DATE (mm/dd/yyyy)			2. MUNICIPALITY			
				(If applicable)			
✓ Initial Amendment	Nov 2018						
3. OFFICE OR POSITION SOUGHT					4. DISTRICT NUMBER		
5. OFFICE OKTOSITION SOUGHT					(If applicable)		
State Representative					058		
Otate Representative					030		
5. PARTY AFFILIATION							
Republican	Republican • Democratic Other (Specify)						
Republican	Democratic		Other (speci				
6. CANDIDATE NAME							
First Name MI		MI	Last Name	Name Suffix			
Thomas				Arnone			
Thomas							
7. CANDIDATE RESIDENCE ADDRESS				8. CANDIDATE MAILING ADDRESS (If different)			
Street Address			Address				
5 Cartier Rd							
City		State	Zip Code	City		State	Zip Code
Enfield		СТ	06082				
9. CANDIDATE TELEPHON	10. CAN	DIDATE EM	IAIL ADDRESS				
(Include Area Code)							
860 745	3125	tomarr	none@att.ne	et			
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 I Amendment Thomas Arnon	ment Thomas Arnone				
12. COMMITTEE NAME	12. COMMITTEE NAME				
Arnone for Enfield					
13. COMMITTEE ADDRESS			14. & 15. COMMITTEE EMAIL ADDRESS & W	EBSITE	
Address			Email Address		
5 Cartier Rd	1	_	tomarnone@att.net		
City	State	Zip Code 06082	Website		
Enfield	CT	00002			
16. TREASURER NAME					
First Name		MI	Last Name		Suffix
David		W	Kiner		
17. TREASURER RESIDENCE ADDRESS			18. TREASURER MAILING ADDRESS (If different)		
Street Address			Address		
1 Cedar St					
City	State	Zip Code	City	State	Zip Code
Enfield	СТ	06082- 4622			
19. TREASURER TELEPHONE 20. TREASURER			MAIL ADDRESS		
(Include Area Code)					
860 798 3954 david.kiner@gmai			l.com		
21. DEPUTY TREASURER NAME		1.0			
First Name		MI	Last Name		Suffix
AA DEDVIEW TOU A CANDED DECADENCE A DODGE			23. DEPUTY TREASURER MAILING ADDRESS (If different)		
22. DEPUTY TREASURER RESIDENCE ADDRESS Street Address			Address Address	S (If different))
City	State	Zip Code	City	State	Zip Code
·		•			
AA DEDUKATEDE ACUDED KELEDIOAKE	AT DED	LIEN EDE AG	LIDER FINAN APPREC		
24. DEPUTY TREASURER TELEPHONE 25. DEPUTY TRI (Include Area Code)			URER EMAIL ADDRESS		
26. DEPOSITORY INSTITUTION NAME					
United Bank					
27. DEPOSITORY INSTITUTION ADDRESS					
Address					
231 Hazard Avenue, Enfield, CT 06082					

SEEC FORM 1A Revised September 2016

REGISTRA	ATION TYPE	NDIDATE NAME					
✓ Initial	Amendment	Thomas Arnone					
28. CERTIF	FICATION						
comi this s	mittee registrationstatement includ	ate, under penalties of false statement, that all of the designations set forth in this candidate a 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 we indicated to me their acceptance of my appointment of them to those positions.					
Tho	mas Arnone	02/10/2018					
CANE	DIDATE SIGNATURE	DATE (mm/dd/yyyy)					
Treasurer							
I here cand electe requi	idate to serve as or in the State or rements as cont	ate, under penalties of false statement, that I have accepted my appointment by the he 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 ned in Chapter 155 through 157 of the General Statutes, and to abide by any prohibitions, one concerning campaign contributions and expenditures.					
I cert	rify that I have p	id any civil penalties or forfeitures assessed pursuant to Chapters 155 to 157, inclusive.					
juriso unde plea anoth I cert	diction, any (A) r Title 9 of the (or the completioner such felony of	t been convicted of or pled guilty or nolo contendere to, in a court of competent elony 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 of any sentence, whichever date is later, without a subsequent conviction of or plea to offense. otherwise barred from serving as a treasurer by order of the State Elections Enforcement					
Dav	id W Kiner	02/10/2018					
TREA	SURER SIGNATURE	DATE (mm/dd/yyyy)					
Deputy Treasure	or.						
I here cand and a autor that I discle	eby certify and sidate to serve as accept that, in the matically become am an elector is osure requireme	he 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 ins or restrictions concerning campaign contributions and expenditures.					
I cert	I certify that I have paid any civil penalties or forfeitures assessed pursuant to Chapters 155 to 157, inclusive.						
juriso unde plea	I certify that I have not been convicted of or pled guilty or nolo contendere to, in a court of competent jurisdiction, any (A) felony involving fraud, forgery, larceny, embezzlement or bribery, or (B) criminal offense under Title 9 of the General Statues, or that at least eight years have elapsed from the date of the conviction or plea or the completion of any sentence, whichever date is later, without a subsequent conviction of or plea to another such felony or offense.						
	rify that I am no reement Commi	otherwise barred from serving as a deputy treasurer by order of the State Elections sion.					
DEPU	TY TREASURER SIGNA	URE 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	12. REASON FOR EXEMPTION FROM FORMING A CANDIDATE COMMITTEE					
	I hereby certify that I am exempt from forming a candidate committee because (CHECK ONE)					
poli	A. I am one of a slate of candidates whose campaigns are being funded solely v a toy committee or a political committee formed for a single election or primary and expendit to the determy behandle be reported by the committee sponsoring my candidacy. The name of this space of committee 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 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)				