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 S	OUGHT				4. DISTR	ICT NUM	IBER
					(If applicable)		
State Representative					015		
5. PARTY AFFILIATION							
Republican	✓ Democratic		Other (Spece	ify)			
6. CANDIDATE NAME							
First Name			MI	Last Name			Suffix
Bobby			G	Gibson			Jr
7. CANDIDATE RESIDENC	E ADDRESS			8. CANDIDATE MAILING ADDRESS (If different)			
Street Address				Address	(0 00)		
5 Greenbrier Dr							
City		State	Zip Code	City		State	Zip Code
Bloomfield		СТ	06002				
9. CANDIDATE TELEPHON	NE	10. CAN	DIDATE EN	IAIL ADDRESS			
(Include Area Code)							
860 306	6638	BobbyGGibsonJr@gmail.com					
11. DESIGNATION OF CAN	IPAIGN FUNDING	SOURCE	2				
(Check one)							
✓ A. I am formi Registration	-	commi	ttee and I	am required to file a Candidate	e Comm	ittee	
Go to Form	1A and complete	pages 2	and 3 — Co	andidate Registration Statement.			
1	pt from forming ng a Candidate C			mittee and I am filing a Certifi	cation o	of Exem	ption
Go to Form 1B and complete page 4 — Certification of Exemption from Forming a Candidate Committee.							
			-	e this page <i>together with</i> either Fo		-	

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 NA	ME						
 Initial I Amendment Bobby G Gibson Jr 								
12. COMMITTEE NAME								
Bobby Gibson For State R	ер							
13. COMMITTEE ADDRESS				14. & 15. COMMITTEE EMAIL ADDRESS & W	EBSITE			
Address				Email Address				
5 Greenbrier Dr								
City		State	Zip Code	Website				
Bloomfield		СТ	06002					
16. TREASURER NAME				•				
First Name			MI	Last Name		Suffix		
Byron			R	Lester				
17. TREASURER RESIDENCE	E ADDRESS			18. TREASURER MAILING ADDRESS (If different)				
Street Address				Address				
15 Spice Bush Ln								
City		State	Zip Code	City	State	Zip Code		
Bloomfield		СТ	06002					
19. TREASURER TELEPHON	IE	20. TREASURER EMAIL ADDRESS						
(Include Area Code)								
860 985 0510			BLester02@comcast.net					
21. DEPUTY TREASURER NA	AME		T	1		1		
First Name			MI	Last Name		Suffix		
Ngina			A	McMillian				
22. DEPUTY TREASURER RI	ESIDENCE ADDR	ESS		23. DEPUTY TREASURER MAILING ADDRESS	${f S}$ (If different)		
Street Address				Address				
1087D Blue Hills Ave								
City		State	Zip Code	City	State	Zip Code		
Bloomfield		СТ	06002					
24. DEPUTY TREASURER TE (Include Area Code)	ELEPHONE	25. DEP	UTY TREAS	URER EMAIL ADDRESS				
	<u>_</u>	NaMcN	Villian@gma	ail com				
860 306 441	6	Number	Villianegria					
26. DEPOSITORY INSTITUT	ION NAME							
Simsbury Bank								
27. DEPOSITORY INSTITUTION ADDRESS								
Address								
864 Cottage Grove Road,	Bloomfield, CT (06002			<u> </u>			

SEEC FORM 1A Revised September 2016 Page 3 of 4

REGISTRAT	TION TYPE	CANDIDATE NAME
🖌 Initial	Amendment	Bobby G Gibson Jr

28. CERTIFICATION

Candidate

I hereby certify and state, under penalties of false statement, that all of the designations set forth in this candidate committee registration statement are true and accurate to the best of my knowledge and belief, and further, that this statement includes my certification to the fact that any individual designated herein to serve as my treasurer or deputy treasurer have indicated to me their acceptance of my appointment of them to those positions.

Bobby G Gibson Jr	02/15/2018
CANDIDATE SIGNATURE	DATE (mm/dd/yyyy)

Treasurer

I hereby certify and state, under penalties of false statement, that I have accepted my appointment by the candidate to serve as the candidate's designated treasurer of this candidate committee. I certify that I am an elector in the State of Connecticut. I intend to comply with all the campaign finance registration and disclosure requirements as contained in Chapter 155 through 157 of the General Statutes, and to abide by any prohibitions, limitations or restrictions concerning campaign contributions and expenditures.

I certify that I have paid any civil penalties or forfeitures assessed pursuant to Chapters 155 to 157, inclusive.

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.

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

Byron R Lester	02/15/2018
TREASURER SIGNATURE	DATE (mm/dd/yyyy)

Deputy Treasurer

I hereby certify and state, under penalties of false statement, that I have accepted my appointment by the candidate to serve as the candidate's designated deputy treasurer of this candidate committee, and I understand and accept that, in the event of a vacancy caused by the treasurer's death, incapacity or resignation, I shall automatically become responsible for discharging all of the duties required of the vacating treasurer. I certify that I am an elector in the State of Connecticut. I intend to comply with all the campaign finance registration and disclosure requirements as contained in Chapter 155 through 157 of the General Statutes, and to abide by any prohibitions, limitations or restrictions concerning campaign contributions and expenditures.

I certify that I have paid any civil penalties or forfeitures assessed pursuant to Chapters 155 to 157, inclusive.

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.

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

Ngina A McMillian	02/15/2018	
DEPUTY TREASURER SIGNATURE	DATE (mm/dd/yyyy)	

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SEEC FORM 1B STATE ELECTIONS ENFORCEMENT COMMISSION Certification of Exemption From Forming a Candidate Committee Revised September 2016



DECICED ATION TYPE	CANDIDATE NAME				
REGISTRATION TYPE					
12. REASON FOR EXEMP	12. REASON FOR EXEMPTION FROM FORMING A CANDIDATE COMMITTEE				
I hereby cer	ify 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 solely by a town committee or a political committee formed for a single election or primary and expendit the order of the total be reported by the committee sponsoring my candidacy. The name of this sponsories committee is:					
	OR				
B. I am funding my campaign entirely from my own erscell fun is and will not request or receive contributions from other individuals or committees and I to tersus there if I make expenditures exceeding one thousand dollars (\$1,000) that I shall be recensive for filing linearcial disclosure statements (SEEC Form 23) according to the same schedule and in the annumative as received of treasurers of candidate committees.					
C. I do not inte					
	OR				
D. I do	nd to receive or expend any funds, including personal funds, for this campaign.				
13. CER					
	nd state, under penalties of false statement, that this statement of exemption from forming a ttee, for the reason checked above, is true, accurate and complete to the best of my elief.				
CANDIDATE SIGNATUR	DATE (mm/dd/yyyy)				