### **SEEC FORM 1**

#### STATE ELECTIONS ENFORCEMENT COMMISSION

## Registration by Candidate

Revised September 2016



		1.00				]
REGISTRATION TYPE 1. ELECTION DATE (mm/dd/yyyy)			יעעי)	2. MUNICIPALITY		
✓ Initial   Amendment				(If applicable)		
Initial   Amendment	Nov 2018					
3. OFFICE OR POSITION SOUGHT				4. DISTRICT NUMBER		
					(If applicable)	
State Representative				138		
5. PARTY AFFILIATION						
Republican • Democratic Other (Specify)						
6. CANDIDATE NAME						
First Name			MI	Last Name		Suffix
Kenneth			М	Gucker		
7. CANDIDATE RESIDENCE ADDRESS				8. CANDIDATE MAILING ADDRESS (If different)		
Street Address			Address			
89 Padanaram Rd						
City		State	Zip Code	City	State	Zip Code
Danbury		СТ	06811			
9. CANDIDATE TELEPHONE 10. CAND			DIDATE EM	IAIL ADDRESS		
Include Area Code)						
203 733	4400	mercu	rycat21@h	otmail.com		

### 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	Kenneth M Gucker						
12. COMMITTEE NAME							
Gucker2018							
13. COMMITTEE ADDRESS				14. & 15. COMMITTEE EMAIL ADDRESS & WEBSITE			
Address			Email Address				
89 Padanaram Rd				ken@gucker2018.com			
		Zip Code 06811	Website				
Danbury		CT 06611		gucker2018.com			
16. TREASURER NAME							
First Name			MI	Last Name Suffix			
Lynn			Н	Taborsak			
17. TREASURER RESIDENCE	E ADDRESS			18. TREASURER MAILING ADDRESS (If different)			
Street Address				Address			
110 Hayestown Rd							
City		State	Zip Code	City	State	Zip Code	
Danbury		06811- 4873					
19. TREASURER TELEPHONE 20. TREASURER EM			ASURER EM	IAIL ADDRESS			
(Include Area Code)							
203 748 0822	LTaborsak@gmail.com						
21. DEPUTY TREASURER NA	ME		l v a	Ir. ov		a er	
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	
			URER EMAIL ADDRESS				
(Include Area Code)							
26. DEPOSITORY INSTITUTION NAME							
Savings Bank of Danbury							
27. DEPOSITORY INSTITUTION ADDRESS							
Address 12 Hayestown Avenue, Danbury, CT 06811							

REGISTRATION TYPE	CANDIDATE NAME	
✓ Initial   Amendmen	t Kenneth M Gucker	
28. CERTIFICATION		
committee registrathis statement incl	ation statement are true and a udes my certification to the	lse statement, that all of the designations set forth in this candidate accurate to the best of my knowledge and belief, and further, that fact that any individual designated herein to serve as my treasurer acceptance of my appointment of them to those positions.
Kenneth M Gucke	er	02/12/2018
CANDIDATE SIGNATURI	Е	DATE (mm/dd/yyyy)
elector in the State requirements as colimitations or restriction. I certify that I have jurisdiction, any (A under Title 9 of the plea or the compleanother such felon	e of Connecticut. I intend to ontained in Chapter 155 throuseictions concerning campaigne paid any civil penalties or the not been convicted of or play felony involving fraud, for e General Statues, or that at a strion of any sentence, whicher yor offense.	d treasurer of this candidate committee. I certify that I am an comply with all the campaign finance registration and disclosure ugh 157 of the General Statutes, and to abide by any prohibitions, a contributions and expenditures.  forfeitures assessed pursuant to Chapters 155 to 157, inclusive.  ed guilty or nolo contendere to, in a court of competent orgery, larceny, embezzlement or bribery, or (B) criminal offense least eight years have elapsed from the date of the conviction or ever date is later, without a subsequent conviction of or plea to
Commission.	not otherwise barred from se	erving as a treasurer by order of the State Elections Enforcement
Lynn H Taborsak		02/12/2018
TREASURER SIGNATURI		DATE (mm/dd/yyyy)
candidate to serve and accept that, in automatically become that I am an elector disclosure requires	as the candidate's designated the event of a vacancy cause ome responsible for discharg or in the State of Connecticut ments as contained in Chapte	lse statement, that I have accepted my appointment by the d deputy treasurer of this candidate committee, and I understand ed by the treasurer's death, incapacity or resignation, I shall ing all of the duties required of the vacating treasurer. I certify I intend to comply with all the campaign finance registration and er 155 through 157 of the General Statutes, and to abide by any ning campaign contributions and expenditures.
I certify that I have	e paid any civil penalties or f	forfeitures assessed pursuant to Chapters 155 to 157, inclusive.
jurisdiction, any (Aunder Title 9 of the	A) felony involving fraud, for e General Statues, or that at letion of any sentence, whicher	ed guilty or nolo contendere to, in a court of competent orgery, larceny, embezzlement or bribery, or (B) criminal offense least eight years have elapsed from the date of the conviction or ever date is later, without a subsequent conviction of or plea to
I certify that I am Enforcement Com		erving as a deputy treasurer by order of the State Elections
DEPUTY TREASURER SIG		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 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 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)			