SEEC FORM 1

STATE ELECTIONS ENFORCEMENT COMMISSION

Registration by Candidate

Revised September 2016



	MEN	VT COMM							
REGISTRATION TYPE 1. ELECTION DATE (mm/dd/yyyy)					2. MUNICIPALITY				
✓ Initial Amendment	Nov 2018				(!f applicable)				
3. OFFICE OR POSITION SOUGHT						4. DISTRICT NUMBER			
State Representative						(If applicable) 088			
5. PARTY AFFILIATION									
Republican V Democratic Other (Specify)									
6. CANDIDATE NAME									
First Name			MI		Last Name Suffix			Suffix	
Joshua				Elliott					
7. CANDIDATE RESIDENCE ADDRESS					8. CANDIDATE MAILING ADDRESS (If different)				
Street Address				Address					
59 Macarthur Dr									
City		State	Zip Code		City		State	Zip Code	
Hamden CT		06518							
9. CANDIDATE TELEPHON	10. CANDIDATE EMAIL ADDRESS								
Include Area Code)	_	•				•			

11. DESIGNATION OF CAMPAIGN FUNDING SOURCE

1918

280

(Check one)

607

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

mrjoshelliott@gmail.com

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

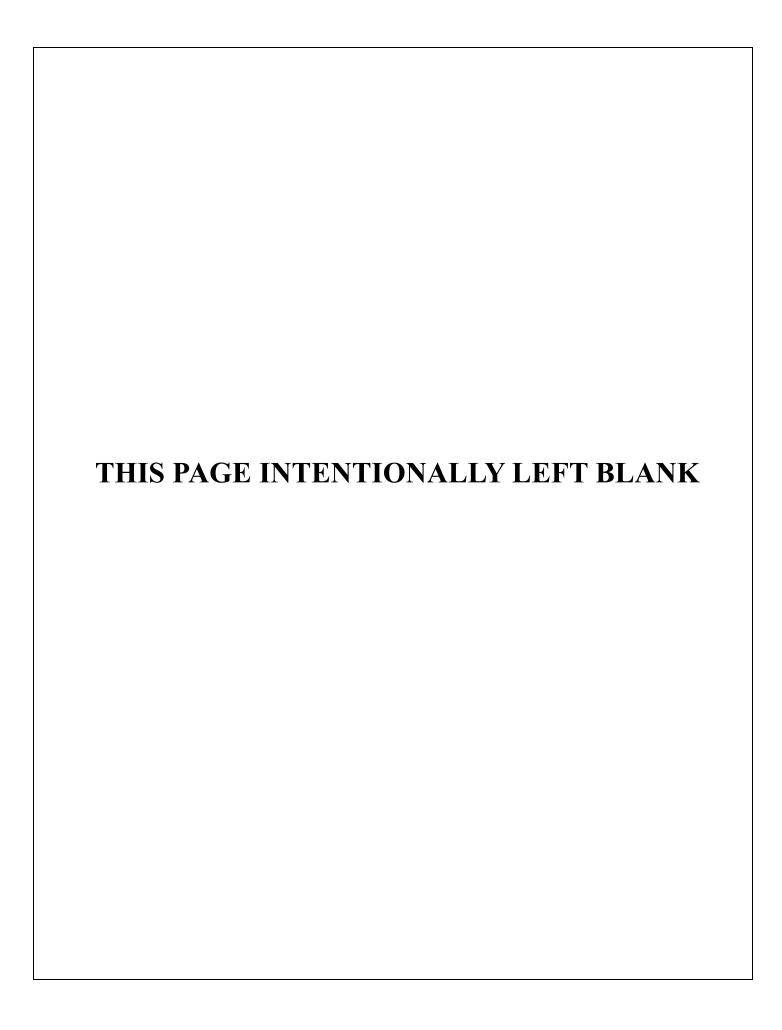
Revised September 2016



REGISTRATION TYPE CANDIDATE NAME						
✓ Initial I Amendment Joshua A Ellic	initial I Amendment Joshua A Elliott					
12. COMMITTEE NAME	12. COMMITTEE NAME					
Josh for State Representative						
13. COMMITTEE ADDRESS	13. COMMITTEE ADDRESS 4. & 15. COMMITTEE EMAIL ADDRESS & WEBSITE					
Address	Email Address					
3040 Whitney Ave						
City	State	Zip Code 06518	Website			
Hamden	СТ	00318	joshforstaterep.com			
16. TREASURER NAME						
First Name		MI	Last Name Suffix			
Patrick		S	Johnson			
17. TREASURER RESIDENCE ADDRESS			18. TREASURER MAILING ADDRESS (If different)			
Street Address			Address			
1199 Whitney Ave Apt 520						
City	State	Zip Code	City	State	Zip Code	
 Hamden	СТ	06517- 2869				
19. TREASURER TELEPHONE 20. TREASURER EM			MAIL ADDRESS			
(Include Area Code)						
802 236 0902 Patrick@203politics			cs.com			
21. DEPUTY TREASURER NAME		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 TREASURER			URER EMAIL ADDRESS			
(Include Area Code)						
26. DEPOSITORY INSTITUTION NAME						
Bank of America						
27. DEPOSITORY INSTITUTION ADDRESS						
Address						
789 Howard Avenue, New Haven, CT 06519						
, ,						

SEEC FORM 1A Revised September 2016

REGISTRAT	ION TYPE	CANDIDATE NAME	
✔ Initial	Amendment	Joshua A Elliott	
28. CERTIFIC	ATION		
committhis sta	ttee registration	on statement are true and accur es my certification to the fact	statement, that all of the designations set forth in this candidate rate to the best of my knowledge and belief, and further, that that any individual designated herein to serve as my treasurer ptance of my appointment of them to those positions.
Joshu	a A Elliott		03/03/2018
CANDIDA	ATE SIGNATURE		DATE (mm/dd/yyyy)
elector requires limitati I certify I certify jurisdic under T plea or	in the State of ments as controls or restrictly that I have pure that I have retion, any (A) Citle 9 of the C	f Connecticut. I intend to comained in Chapter 155 through ions concerning campaign coraid any civil penalties or forfe ot been convicted of or pled g felony involving fraud, forger General Statues, or that at least on of any sentence, whichever	asurer of this candidate committee. I certify that I am an apply with all the campaign finance registration and disclosure 157 of the General Statutes, and to abide by any prohibitions, attributions and expenditures. Entitures assessed pursuant to Chapters 155 to 157, inclusive. Builty or nolo contendere to, in a court of competent y, larceny, embezzlement or bribery, or (B) criminal offense eight years have elapsed from the date of the conviction or date is later, without a subsequent conviction of or plea to
I certify Commi		t otherwise barred from servin	g as a treasurer by order of the State Elections Enforcement
Patrick	S Johnson		03/03/2018
TREASUI	RER SIGNATURE		DATE (mm/dd/yyyy)
candida and acc automa that I and disclosi	ate to serve as ept that, in the tically becomes an elector is are requirements	the candidate's designated de e event of a vacancy caused by e responsible for discharging a n the State of Connecticut. I in nts as contained in Chapter 15	tatement, that I have accepted my appointment by the puty treasurer of this candidate committee, and I understand y the treasurer's death, incapacity or resignation, I shall all of the duties required of the vacating treasurer. I certify ntend to comply with all the campaign finance registration and 5 through 157 of the General Statutes, and to abide by any campaign contributions and expenditures.
I certify	that I have p	aid any civil penalties or forfe	itures assessed pursuant to Chapters 155 to 157, inclusive.
jurisdic under T plea or	tion, any (A) Title 9 of the (felony involving fraud, forger General Statues, or that at least on of any sentence, whichever	uilty or nolo contendere to, in a court of competent y, larceny, embezzlement or bribery, or (B) criminal offense eight years have elapsed from the date of the conviction or date is later, without a subsequent conviction of or plea to
	that I am no ement Comm		g as a deputy treasurer by order of the State Elections
DEPUTY	TREASURER SIGNA	ATURE	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 temporal be reported by the committee sponsoring my candidacy. The name of this sponsor committee is:						
		OR				
con thou	tributions from cusand dollars (\$	ny campaign entirely from my own erstand funds and will not request or receive other individuals or committees and I to derstand a if I make expenditures exceeding one 1,000) that I shall be reconstant for filing francial disclosure statements (SEEC Form 23) me schedule and in the tank manner as record of treasurers of candidate committees.				
C.	I do not intend	to receive experience 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 se, for the reason checked above, is true, accurate and complete to the best of my ef.				
CAN	DIDATE SIGNATURE	DATE (mm/dd/yyyy)				