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. DISTRICT NUMBER			
State Representative					(If applicable) 013			
5. PARTY AFFILIATION								
Republican	✓ Democratic		Other (Spece	ify)				
6. CANDIDATE NAME								
First Name			MI	Last Name			Suffix	
Joseph			А	Young	Young			
7. CANDIDATE RESIDENC	E ADDRESS			8. CANDIDATE MAILING ADDRESS (If different)				
Street Address				Address				
103 Autumn St								
City		State	Zip Code	City		State	Zip Code	
Manchester		СТ	06040					
9. CANDIDATE TELEPHON	1E	10. CANDIDATE EMAIL ADDRESS						
(Include Area Code)								
860 816	6801	joeyou	ungforconne	ecticut@gmail.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 <i>together with</i> either Form 1A, "Registration of Candidate Committee," <i>or</i> 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	AME						
✓ Initial Amendment	Joseph A Young							
12. COMMITTEE NAME								
Joe Young for Connecticut	t							
13. COMMITTEE ADDRESS				14. & 15. COMMITTEE EMAIL ADDRESS & W	EBSITE			
Address				Email Address				
103 Autumn St				joeyoungforconnecticut@gmail.com				
City		State	Zip Code	Website				
Manchester		СТ	06040	www.joeyoungforct.org				
16. TREASURER NAME								
First Name			MI	Last Name		Suffix		
Thomas			L	Kenney				
17. TREASURER RESIDENC	E ADDRESS			18. TREASURER MAILING ADDRESS (If different	t)			
Street Address				Address				
183 Wethersfield Ave								
City		State	Zip Code	City	State	Zip Code		
Hartford		СТ	06114					
19. TREASURER TELEPHON	IE	20. TRE	CASURER EN	MAIL ADDRESS				
(Include Area Code) 860 710 9642 tkkenney08@		ey08@gma	ail.com					
21. DEPUTY TREASURER NA	AME	<u> </u>						
First Name			MI	Last Name		Suffix		
22. DEPUTY TREASURER RI	ESIDENCE ADDR	RESS		23. DEPUTY TREASURER MAILING ADDRESS (If different)				
Street Address				Address				
City		State	Zip Code	City	State	Zip Code		
24. DEPUTY TREASURER TELEPHONE 25. DEPU		UTY TREAS	SURER EMAIL ADDRESS	<u> </u>				
(Include Area Code)								
26. DEPOSITORY INSTITUT	ION NAME							
Key Bank								
27. DEPOSITORY INSTITUT	ION ADDRESS							
Address								
225 Trumbull Street, Hartf	ord, CT 06103							

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REGISTRATION TYPE		CANDIDATE NAME
🖌 Initial	Amendment	Joseph A Young
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.

Joseph A Young		03/06/2018
	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.

Thomas L Kenney	03/06/2018
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.

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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						
Initial Amendment						
12. REASON FOR EXEMPTION FROM FORMING A CANDIDATE COMMITTEE						
I hereby cer	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 by a town committee or a political committee formed for a single election or primary and expendit the solely of the committee sponsoring my candidacy. The name of this sponsories committee is:						
	OR					
■ B. I am funding my campaign entirely from my ownerse of funds and will not request or receive contributions from other individuals or committees and I to derstand to if I make expenditures exceeding one thousand dollars (\$1,000) that I shall be receipted for filing francial disclosure statements (SEEC Form 23) according to the same schedule and in the name matter as received of treasurers of candidate committees.						
C. I do not inte						
	OR					
D. I do the provide the provide of the provide the providet the providet the providet the providet the providet						
13. CER						
I here certify and state, under penalties of false statement, that this statement of exemption from forming a candidate committee, for the reason checked above, is true, accurate and complete to the best of my knowledge and belief.						
CANDIDATE SIGNATUR	DATE (mm/dd/yyyy)					