# **SEEC FORM 1**

STATE ELECTIONS ENFORCEMENT COMMISSION

#### **Registration by Candidate**

Revised September 2016



REGISTRATION TYPE	1. ELECTION DAT	<b>FE</b> (mm/dd/s	vvvv)	2. MUNICIPALITY			
	JISTRATION TITE I. ELECTION DATE (mmadayyyy)			( <i>If applicable</i> )			
<ul> <li>Initial   Amendment</li> <li>Nov 2018</li> </ul>							
3. OFFICE OR POSITION S	OUGHT				4. DISTRICT NUMBER		
					(If applicable)		
State Senator					012		
5. PARTY AFFILIATION							
✓ Republican	Democratic		Other (Spec	ify)			
6. CANDIDATE NAME							
First Name			MI	Last Name			Suffix
Jerry			J	Mastrangelo	)		
7. CANDIDATE RESIDENCI	E ADDRESS			8. CANDIDATE MAILING ADDRESS (If different)			
Street Address				Address			
269 Shore Dr							
City		State	Zip Code	City		State	Zip Code
Branford		СТ	06405				
9. CANDIDATE TELEPHONE 10. C			JDIDATE EN	DATE EMAIL ADDRESS			
(Include Area Code)							
203 641 4499 mastrangelojerry@yahoo.com							
11. DESIGNATION OF CAM	IPAIGN FUNDING	SOURCE	L				
(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>B.</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

<b>REGISTRATION TYPE</b>	CANDIDATE NA	AME					
Initial I Amendment Jerry J Mastrangelo							
<b>12. COMMITTEE NAME</b>							
Jerry Mastrangelo for State Senate							
<b>13. COMMITTEE ADDRESS</b>				14. & 15. COMMITTEE EMAIL ADDRESS & W	/EBSITE		
Address				Email Address			
PO Box 534				mastrangelojerry@yahoo.com			
City		State	Zip Code	Website			
Branford		СТ	06405				
16. TREASURER NAME							
First Name			MI	Last Name		Suffix	
Gina				Simko			
17. TREASURER RESIDENC	E ADDRESS			18. TREASURER MAILING ADDRESS (If different)			
Street Address				Address			
925 Dunbar Hill Rd							
City		State	Zip Code	City	State	Zip Code	
Hamden		СТ	06514				
<b>19. TREASURER TELEPHON</b>	IE	20. TRE	EASURER EN	AAIL ADDRESS			
(Include Area Code)							
203 671 1759 footprint			nts8894@a	ol.com			
<b>21. DEPUTY TREASURER NA</b>	AME		-				
First Name			MI	Last Name		Suffix	
22. DEPUTY TREASURER RI	ESIDENCE ADDR	ESS		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	URER EMAIL ADDRESS				
(Include Area Code)							
26. DEPOSITORY INSTITUT	ION NAME						
Bank of America							
27. DEPOSITORY INSTITUTION ADDRESS							
Address							
2340 Dixwell Avenue, Hamden, CT 06514							
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SEEC FORM 1A

Revised September 2016

REGISTRA	ΓΙΟΝ ΤΥΡΕ	CANDIDATE NAME
✓ Initial	Amendment	Jerry J Mastrangelo

#### 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.

-	Jerry J Mastrangelo	03/22/2018
-	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.

Gina Simko	03/22/2018
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	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 solely of the committee sponsoring my candidacy. The name of this sponsories committee is:					
	OR				
contributions fro thousand dollars	g my campaign entirely from my own verse al fun is and will not request or receive in other individuals or committees and I to terstation of if I make expenditures exceeding one (\$1,000) that I shall be reconstant for filing financial disclosure statements (SEEC Form 23) same schedule and in the campaigneer 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					
I here certify and state, under penalties of false statement, that this statement of exemption from forming a candidat 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)				