SEEC FORM 1

STATE ELECTIONS ENFORCEMENT COMMISSION

Registration by Candidate

Revised September 2016



	1
2. MUNICIPALITY	
(If applicable)	

REGISTRATION TYPE	TE (mm/dd/yyyy)		2. MUNICIPALITY					
_				(If applicable)				
✓ Initial Amendment	Nov 2018							
3. OFFICE OR POSITION SOUGHT					4. DISTRICT NUMBER			
					(If applicable	e)		
State Representative					066			
5. PARTY AFFILIATION								
Republican	✔ Democratic		Other (Speci	ify)				
(CANDIDATE NAME							_	
6. CANDIDATE NAME			M	I A			0.00	
First Name			MI	MI Last Name			Suffix	
Alex			K	Larsson				
7. CANDIDATE RESIDENCE ADDRESS				8. CANDIDATE MAILING ADDRESS (If different)				
Street Address				Address				
426 Bantam Lake Rd								
City		State	Zip Code	City		State	Zip Code	
Bantam		СТ	06750					
9. CANDIDATE TELEPHON	10. CANDIDATE EMAIL ADDRESS							
(Include Area Code)								
732 551	6689	alexlaı	rsson2356@	⊉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 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 Alex K Larsson						
12. COMMITTEE NAME						
Alex Larsson 2018						
13. COMMITTEE ADDRESS			14. & 15. COMMITTEE EMAIL ADDRESS & WEBSITE			
Address			Email Address			
426 Bantam Lake Rd		_				
City	State	Zip Code 06750	Website			
Bantam	CT 06750					
16. TREASURER NAME						
First Name		MI	Last Name	Suffix		
Kim		R	Osborne			
17. TREASURER RESIDENCE ADDRESS			18. TREASURER MAILING ADDRESS (If different)			
Street Address			Address			
426 Bantam Lake Rd						
City	State	Zip Code	City	State	Zip Code	
Bantam	CT 06750					
19. TREASURER TELEPHONE 20. TREASURER EN			AAIL ADDRESS			
(Include Area Code)						
203 228 8450	Kosbo	rne29@gma	ail.com			
21. DEPUTY TREASURER NAME		_				
First Name		MI	Last Name		Suffix	
Daniela		N	Larsson			
22. DEPUTY TREASURER RESIDENCE ADDRESS 23. DEPUTY TREASURER MAILING ADDRESS (If different))		
Street Address			Address			
426 Bantam Lake Rd						
City	State	Zip Code 06750	City	State	Zip Code	
Bantam	CT	00730				
24. DEPUTY TREASURER TELEPHONE 25. DEPUTY TREAS			URER EMAIL ADDRESS			
(Include Area Code)						
518 354 9179	daniela.larsson93@gmail.com					
26. DEPOSITORY INSTITUTION NAME						
Ion Bank						
27. DEPOSITORY INSTITUTION ADDRESS						
Address						
670 Main Street, Woodbury, CT 06798						

SEEC FORM 1A Revised September 2016

Daniela N Larsson

DEPUTY TREASURER SIGNATURE

Revised September 2016					
REGISTRA	TION TYPE	CANDIDATE NAME			
✓ Initial	Amendment	Alex K Larsson			
28. CERTIF	ICATION				
comn this s or de	nittee registration tatement includ	ate, under penalties of false statement, that all of the designations set forth in this candidate in statement are true and accurate to the best of my knowledge and belief, and further, that is my certification to the fact that any individual designated herein to serve as my treasurer we indicated to me their acceptance of my appointment of them to those positions. 04/06/2018			
CAND	IDATE SIGNATURE	DATE (mm/dd/yyyy)			
I certification of the control of th	date to serve as or in the State of the stat	ate, under penalties of false statement, that I have accepted my appointment by the he candidate's designated treasurer of this candidate committee. I certify that I am an Connecticut. I intend to comply with all the campaign finance registration and disclosure ined in Chapter 155 through 157 of the General Statutes, and to abide by any prohibitions, ons concerning campaign contributions and expenditures. In the discrepancy of the General Statutes, and to abide by any prohibitions, ons concerning campaign contributions and expenditures. In the discrepancy of the General Statutes, and to abide by any prohibitions, ons concerning campaign contributions and expenditures. In the discrepancy of the General Statutes, and to abide by any prohibitions, ons concerning campaign contributions and expenditures. In the discrepancy of the General Statutes, and to abide by any prohibitions, ons concerning campaign contributions and expenditures. In the discrepancy of the General Statutes, and to abide by any prohibitions, ons concerning campaign contributions and expenditures. In the discrepancy of the General Statutes, and to abide by any prohibitions, ons concerning campaign contributions and expenditures. In the discrepancy of the General Statutes, and to abide by any prohibitions, ons concerning campaign contributions and expenditures. In the discrepancy of the General Statutes, and to abide by any prohibitions, ons concerning campaign contributions and expenditures.			
	R Osborne	04/06/2018			
TREAS	URER SIGNATURE	DATE (mm/dd/yyyy)			
candi and a auton that I discle prohi	by certify and a date to serve as except that, in the natically become am an elector is sure requirementations, limitations, limitations, limitations, any (A). Title 9 of the Corthe completion of the completion				
	cement Comm	otherwise barred from serving as a deputy treasurer by order of the State Elections sion.			

04/06/2018

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	12. REASON FOR EXEMPTION FROM FORMING A CANDIDATE COMMITTEE					
	I hereby certify that I am exempt from forming a candidate committee because (CHECK ONE)					
poli	itical committee	ate of candidates whose campaigns are being funded solely v a town committee or a formed for a single election or primary and expenditure and decomy behavioral be amittee sponsoring my candidacy. The name of this sponsor countries 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)				