### **SEEC FORM 1**

#### STATE ELECTIONS ENFORCEMENT COMMISSION

## Registration by Candidate

Revised September 2016



	MEN	V7 COMM							
REGISTRATION TYPE 1. ELECTION DATE (mm/dd/yyyy)					2. MUNICIPALITY				
✓ Initial   Amendment	Nov 2018				(If applicable)				
3. OFFICE OR POSITION SOUGHT						4. DISTRICT NUMBER			
						(If applicabl	e)		
State Representative					100				
5. PARTY AFFILIATION									
✓ Republican Democratic Other (Specify)									
6. CANDIDATE NAME									
First Name		MI		Last Name Suff			Suffix		
Tyrell				Brown					
7. CANDIDATE RESIDENCE ADDRESS					8. CANDIDATE MAILING ADDRESS (If different)				
Street Address					Address				
190 Julia Ter									
City		State	Zip Code		City		State	Zip Code	
Middletown		СТ	06457						
9. CANDIDATE TELEPHON	10. CANDIDATE EMAIL ADDRESS								
(Include Area Code)									

### 11. DESIGNATION OF CAMPAIGN FUNDING SOURCE

3358

510

#### (Check one)

860

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

T\_brown97@aol.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 Tyrell J Brown							
12. COMMITTEE NAME							
Brown 2018							
13. COMMITTEE ADDRESS	14. & 15. COMMITTEE EMAIL ADDRESS & W	EBSITE					
Address			Email Address				
190 Julia Ter	_						
City	State	Zip Code <b>06457</b>	Website				
Middletown	СТ	00437					
16. TREASURER NAME							
First Name		MI	Last Name		Suffix		
Leah			Grainger				
17. TREASURER RESIDENCE ADDRESS			18. TREASURER MAILING ADDRESS (If different)				
Street Address			Address				
539 Butternut St							
City	State	Zip Code	City	State	Zip Code		
Middletown	CT 06457						
19. TREASURER TELEPHONE 20. TREASURER EM			AAIL ADDRESS				
(Include Area Code) 860 834 3931 Grainger1212@con			omcast.net				
21. DEPUTY TREASURER NAME							
			Last Name		Suffix		
22. DEPUTY TREASURER RESIDENCE ADDR	RESS		23. DEPUTY TREASURER MAILING ADDRESS (If different)				
Street Address		Address					
City	State	Zip Code	City	State	Zip Code		
	State	2.p code					
24 DEDITY THE ACTION TELEDITATE	25 DED	LITY TOE AC	IDED EMAIL ADDRESS				
24. DEPUTY TREASURER TELEPHONE (Include Area Code)	25. DEP	UIY IKEAS	URER EMAIL ADDRESS				
26. DEPOSITORY INSTITUTION NAME							
Seasons Federal Credit Union							
27. DEPOSITORY INSTITUTION ADDRESS							
Address							
524 South Main Street, Middletown, CT 06	524 South Main Street, Middletown, CT 06457						

REGISTRA	TION TYPE	CANDIDATE NAME	
✓ Initial	Amendment	Tyrell J Brown	
8. CERTIF	ICATION		
comn this st	nittee registration tatement includ	on statement are true and accur es my certification to the fact t	tatement, 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.
Tyre	ell J Brown		04/12/2018
CAND	IDATE SIGNATURE		DATE (mm/dd/yyyy)
I certifurisd under plea canoth	date to serve as or in the State of the Stat	the candidate's designated treat Connecticut. I intend to compained in Chapter 155 through I ions concerning campaign contaid any civil penalties or forfeit of been convicted of or pled guffelony involving fraud, forgery General Statues, or that at least on of any sentence, whichever corroffense.	itures assessed pursuant to Chapters 155 to 157, inclusive.  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
Comr	nission.	t otherwise barred from serving	g as a treasurer by order of the State Elections Enforcement
	Grainger		04/12/2018
TREAS	URER SIGNATURE		DATE (mm/dd/yyyy)
candi- and a auton that I disclo	by certify and s date to serve as ecept that, in the natically become am an elector in osure requireme	the candidate's designated depe event of a vacancy caused by e responsible for discharging and the State of Connecticut. I in the state of Connecticut. I in the state of Connecticut.	tatement, that I have accepted my appointment by the puty treasurer of this candidate committee, and I understand the treasurer's death, incapacity or resignation, I shall all of the duties required of the vacating treasurer. I certify intend 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 certi	ify that I have p	aid any civil penalties or forfei	itures assessed pursuant to Chapters 155 to 157, inclusive.
jurisd under plea o	iction, any (A) Title 9 of the 0	felony involving fraud, forgery General Statues, or that at least on of any sentence, whichever of	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
	fy that I am no cement Commi		g as a deputy treasurer by order of the State Elections



# **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 soler, y a toy committee or a political committee formed for a single election or primary and expendit to the description of the reported by the committee sponsoring my candidacy. The name of this space of 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 derstall if I make expenditures exceeding one 1,000) that I shall be reconstructed for filing francial disclosure statements (SEEC Form 23) me schedule and in the annumancer as record of treasurers of candidate committees.  **OR**  **OR**  **OR**  **OR**  **OR**  **DEC FORM 23  **OR**  **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)				