### **SEEC FORM 1**

#### STATE ELECTIONS ENFORCEMENT COMMISSION

## Registration by Candidate

Revised September 2016



		11×60				
REGISTRATION TYPE 1. ELECTION DATE (mm/dd/yyyy)				2. MUNICIPALITY		
				(If applicable)		
✓ Initial   Amendment	Nov 2018					
3. OFFICE OR POSITION SOUGHT					4. DISTRICT NUM	IBER
					(If applicable)	
State Senator				016		
5. PARTY AFFILIATION						
Republican • Democratic Other (Specify)						
6. CANDIDATE NAME	5. CANDIDATE NAME					
First Name			MI	Last Name		Suffix
Vickie			0	Nardello		
7. CANDIDATE RESIDENCE ADDRESS				8. CANDIDATE MAILING ADDRESS (If different)		
Street Address			Address			
8 Laurel Ln						
City		State	Zip Code	City	State	Zip Code
Prospect		CT	06712			
9. CANDIDATE TELEPHONE 10. C.			ANDIDATE EMAIL ADDRESS			
(Include Area Code)						
203 758	5888	vonard	dello@gma	ail.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 Vickie O Na	Vickie O Nardello					
12. COMMITTEE NAME						
Vickie Nardello for State Senate	Vickie Nardello for State Senate					
13. COMMITTEE ADDRESS	14. & 15. COMMITTEE EMAIL ADDRESS & WEBSITE					
Address Email Address						
8 Laurel Ln						
City	State	Zip Code <b>06712</b>	Website			
Prospect	СТ	007.12				
16. TREASURER NAME		_				
First Name		MI	Last Name		Suffix	
Megen			Groski			
17. TREASURER RESIDENCE ADDRESS			18. TREASURER MAILING ADDRESS (If different)			
Street Address			Address			
22 Walnut St						
City	State	Zip Code	City	State	Zip Code	
Watertown	СТ	Г 06795				
19. TREASURER TELEPHONE 20. TREASURER EM			MAIL ADDRESS			
(Include Area Code)						
203 217 6715 megenn@gmail.			com			
21. DEPUTY TREASURER NAME						
First Name		MI	Last Name		Suffix	
Nancy		М	Spagnolo			
22. DEPUTY TREASURER RESIDENCE ADDRESS 23. DEPUTY TREASURER MAILING ADDRESS (If different)			t)			
Street Address Address						
870 Carrington Rd						
City	State	Zip Code 06524	City	State	Zip Code	
Bethany	СТ	00024				
24. DEPUTY TREASURER TELEPHONE 25. DEPUTY TREASURER EMAIL ADDRESS						
(Include Area Code)						
nmspagnolo@gmail.com						
26. DEPOSITORY INSTITUTION NAME						
Webster Bank						
27. DEPOSITORY INSTITUTION ADDRESS						
Address						
Route 69, Prospect Street, CT 06712						

SEEC FORM 1A Revised September 2016

DEPUTY TREASURER SIGNATURE

Revised September 2016					
REGISTRA	TION TYPE	CANDIDATE NAME			
✓ Initial	Amendment	Vickie O Nardello			
28. CERTIF	ICATION				
comn this so or de	nittee registration tatement includ	on statement are true and access my certification to the fac	e statement, that all of the designations set forth in this candidate curate to the best of my knowledge and belief, and further, that ct that any individual designated herein to serve as my treasurer ceptance of my appointment of them to those positions.  04/19/2018		
	IDATE SIGNATURE		DATE (mm/dd/yyyy)		
CAND	IDATE SIGNATURE		DATE (mm/dd/yyyy)		
candi electo requii	date to serve as or in the State or rements as cont	the candidate's designated of Connecticut. I intend to coained in Chapter 155 through	e statement, that I have accepted my appointment by the treasurer of this candidate committee. I certify that I am an emply with all the campaign finance registration and disclosure the 157 of the General Statutes, and to abide by any prohibitions, contributions and expenditures.		
I cert	ify that I have p	aid any civil penalties or for	rfeitures assessed pursuant to Chapters 155 to 157, inclusive.		
jurisd under plea c	liction, any (A) Title 9 of the (	felony involving fraud, forg General Statues, or that at lead on of any sentence, whichever	I guilty or nolo contendere to, in a court of competent gery, larceny, embezzlement or bribery, or (B) criminal offense ast eight years have elapsed from the date of the conviction or er date is later, without a subsequent conviction of or plea to		
	ify that I am no	otherwise barred from serv	ving as a treasurer by order of the State Elections Enforcement		
Meg	en Groski		04/19/2018		
TREAS	SURER SIGNATURE		DATE (mm/dd/yyyy)		
candi and a auton that I disclo prohil	eby certify and s date to serve as ccept that, in the natically become am an elector in osure requirements bitions, limitation	the candidate's designated of event of a vacancy caused e responsible for discharging the State of Connecticut. Into as contained in Chapter ons or restrictions concerning	e statement, that I have accepted my appointment by the deputy treasurer of this candidate committee, and I understand by the treasurer's death, incapacity or resignation, I shall g all of the duties required of the vacating treasurer. I certify I intend to comply with all the campaign finance registration and 155 through 157 of the General Statutes, and to abide by any ng campaign contributions and expenditures.		
1 cert	ny mat i nave p	and any civil penalties of for	Tenures assessed pursuant to Chapters 133 to 137, inclusive.		
jurisd under plea c	liction, any (A) Title 9 of the (	felony involving fraud, forg General Statues, or that at lead on of any sentence, whichever	I guilty or nolo contendere to, in a court of competent gery, larceny, embezzlement or bribery, or (B) criminal offense ast eight years have elapsed from the date of the conviction or er date is later, without a subsequent conviction of or plea to		
	ify that I am nor rement Commi		ring as a deputy treasurer by order of the State Elections		
Nan	cy M Spagnolo		04/19/2018		

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	ON 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 solely v a tow committee or a political committee formed for a single election or primary and expendit to the decomposition of the properties of the committee sponsoring my candidacy. The name of this space of the committee sponsoring my candidacy.				
		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 to the notation of 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)		