## **SEEC FORM 1**

#### STATE ELECTIONS ENFORCEMENT COMMISSION

### Registration by Candidate

Revised September 2016



2 MUNICIPALITY
2. MUNICIPALITY

							<u>,                                      </u>	
REGISTRATION TYPE 1	1. ELECTION DATE	ΓE (mm/dd/yyyy)		2. MUNICIPALITY				
✓ Initial   Amendment	Nov 2018			(If applicable)				
3. OFFICE OR POSITION SO	OUGHT			4. DISTRICT NUMBER				
State Representative					(If applicable) 031			
5. PARTY AFFILIATION								
Republican	✓ Democratic		Other (Speci	(h)				
6. CANDIDATE NAME								
First Name			MI	Last Name Su			Suffix	
Jill				Barry				
7. CANDIDATE RESIDENCE ADDRESS				8. CANDIDATE MAILING ADDRESS (If different)				
Street Address 199 Cavan Ln				Address				
City	St		Zip Code	City		State	Zip Code	
Glastonbury CT 06033			06033					
9. CANDIDATE TELEPHONE	Ε 1	10. CANDIDATE EMAIL ADDRESS						
(Include Area Code)								
860 983 4	1814	jillian1112@sbcglobal.net						
11. DESIGNATION OF CAMPAIGN FUNDING SOURCE								
(Check one)  A Lam forming a candidate committee and Lam required to file a Candidate Committee								

✓ 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**





REGISTRATION TYPE **CANDIDATE NAME** ✓ Initial Amendment Jill Barry 12. COMMITTEE NAME Barry 4 CT 13. COMMITTEE ADDRESS 14. & 15. COMMITTEE EMAIL ADDRESS & WEBSITE Address Email Address 199 Cavan Ln jillian1112@sbcglobal.net Website Zip Code City State 06033 Glastonbury CT 16. TREASURER NAME First Name ΜI Last Name Suffix Jacob McChesney 17. TREASURER RESIDENCE ADDRESS 18. TREASURER MAILING ADDRESS (If different) Street Address Address 48 Mark Dr State Zip Code State Zip Code City 06033 Glastonbury CT 19. TREASURER TELEPHONE 20. TREASURER EMAIL ADDRESS (Include Area Code) 516 680 7739 jmcchesn@gmail.com 21. DEPUTY TREASURER NAME First Name ΜI Last Name Suffix Joanne **Fontana** 22. DEPUTY TREASURER RESIDENCE ADDRESS 23. DEPUTY TREASURER MAILING ADDRESS (If different) Street Address Address 151 Chase Hollow Ln City State Zip Code City State Zip Code 06033 Glastonbury CT 24. DEPUTY TREASURER TELEPHONE 25. DEPUTY TREASURER EMAIL ADDRESS (Include Area Code) joannefontana@cox.net 860 659 7185 26. DEPOSITORY INSTITUTION NAME **United Bank** 27. DEPOSITORY INSTITUTION ADDRESS Address 2670 Main Street, Glastonbury, CT 06033

SEEC FORM 1A Revised September 2016

Joanne Fontana

DEPUTY TREASURER SIGNATURE

✓ Initial Amendment Ji  28. CERTIFICATION  Candidate  I hereby certify and state committee registration s this statement includes r	e, under penalties of false statement, that all of the designations set forth in this candidate statement are true and accurate to the best of my knowledge and belief, and further, that
28. CERTIFICATION  Candidate  I hereby certify and state committee registration s this statement includes r	e, under penalties of false statement, that all of the designations set forth in this candidate
I hereby certify and state committee registration s this statement includes r	
I hereby certify and state committee registration s this statement includes r	
Jill Barry  CANDIDATE SIGNATURE	my certification to the fact that any individual designated herein to serve as my treasurer e indicated to me their acceptance of my appointment of them to those positions.    04/23/2018   DATE (mm/dd/yyyy)
candidate to serve as the elector in the State of Corequirements as contained limitations or restriction.  I certify that I have paid.  I certify that I have not be jurisdiction, any (A) felounder Title 9 of the Gen plea or the completion of another such felony or of	e, under penalties of false statement, that I have accepted my appointment by the 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 ed in Chapter 155 through 157 of the General Statutes, and to abide by any prohibitions, as concerning campaign contributions and expenditures.  I any civil penalties or forfeitures assessed pursuant to Chapters 155 to 157, inclusive.  The been convicted of or pled guilty or nolo contendere to, in a court of competent convince only involving fraud, forgery, larceny, embezzlement or bribery, or (B) criminal offense it least eight years have elapsed from the date of the conviction or of any sentence, whichever date is later, without a subsequent conviction of or plea to offense.  The been convicted of the conviction of or plea to offense.
Jacob McChesney	04/23/2018
TREASURER SIGNATURE	DATE (mm/dd/yyyy)
Deputy Treasurer	

04/23/2018

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 becaus (CHECK ONE)									
A. I am one of a slate of candidates whose campaigns are being funded soler, y a tow 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 committees 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 experiments of one thousand dollars (\$1,000).									
□ 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)							