SEEC FORM 1

STATE ELECTIONS ENFORCEMENT COMMISSION

Registration by Candidate

Revised September 2016



REGISTRATION TYPE	1. ELECTION DATE	(mm/dd/nnnu)	2. MUNICIPALITY			
REGISTRATIONTITE	1. ELECTION DATE	(mm/au/yyyy)	(If applicable)			
✓ Initial Amendment	Nov 2018		(i) apprication			
3. OFFICE OR POSITION S	OUGHT			4. DISTRICT	NUMBER	
				(If applicable)		
State Senator	nator			002		
5. PARTY AFFILIATION						
Republican	✓ Democratic	Other (Spec	eify)			
6. CANDIDATE NAME						
First Name		MI	Last Name		Suffix	
Douglas			McCrory			
7. CANDIDATE RESIDENCE ADDRESS			8. CANDIDATE MAILING ADDRESS (If different)			
Street Address			Address			
235 Blue Hills Ave						
City	Sta	-	City	State	Zip Code	
Hartford	С	O6112				
9. CANDIDATE TELEPHONE 10. CANDIDATE EN			MAIL ADDRESS			
(Include Area Code)				_		
860 983	5521 t	ti10Dog@aol.cor	n			
11 DECICNATION OF CAN	IDATON FUNDING CO	NUD CE				

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 N.	E CANDIDATE NAME					
✓ Initial I Amendment Douglas McCr	Douglas McCrory					
12. COMMITTEE NAME						
McCrory for Senate	McCrory for Senate					
13. COMMITTEE ADDRESS			14. & 15. COMMITTEE EMAIL ADDRESS & W	EBSITE		
Address				Email Address		
235 Blue Hills Rd			ti10doug@aol.com			
City	State Zip Code Website 06112					
Hartford	СТ	00112				
16. TREASURER NAME						
First Name		MI	Last Name		Suffix	
Bernadette		L	Lockett			
17. TREASURER RESIDENCE ADDRESS			18. TREASURER MAILING ADDRESS (If different)			
Street Address			Address			
441 Clark Ave Unit 29						
City	State	Zip Code	City	State	Zip Code	
Bristol	СТ	06010				
19. TREASURER TELEPHONE 20. TREASURER EM			IAIL ADDRESS			
(Include Area Code)						
203 565 7154 Lockettsx4@aol.co			om			
21. DEPUTY TREASURER NAME		l v g	Ir. ov		o er	
First Name		MI	Last Name		Suffix	
Kevin			Henry			
			23. DEPUTY TREASURER MAILING ADDRES Address	${f S}$ (If different)	
Street Address			Address			
487 Main St Unit 2	T					
City	State	Zip Code 06103	City	State	Zip Code	
Hartford	СТ	00103				
24. DEPUTY TREASURER TELEPHONE	25. DEP	UTY TREAS	URER EMAIL ADDRESS			
(Include Area Code)						
	kthenry@me.com					
860 838 1759	kthenr	y @ mc.com				
26. DEPOSITORY INSTITUTION NAME	kthenr	y emc.com				
	kthenr	y e mo.com				
26. DEPOSITORY INSTITUTION NAME	kthenr	y emc.com				
26. DEPOSITORY INSTITUTION NAME Webster Bank	kthenr	y emc.com				

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DEPUTY TREASURER SIGNATURE

Revised Sep	tember 2016		
REGISTRA	TION TYPE	CANDIDATE NAME	
✓ Initial	Amendment	Douglas McCrory	
28. CERTIF	ICATION		
common this so or de	nittee registration tatement includ	on statement are true and access my certification to the fact	statement, that all of the designations set forth in this candidate urate to the best of my knowledge and belief, and further, that that any individual designated herein to serve as my treasurer eptance of my appointment of them to those positions. 04/09/2018 DATE (mm/dd/yyyy)
candi electo requi	date to serve as or in the State o rements as cont	the candidate's designated to f Connecticut. I intend to con ained in Chapter 155 through	statement, that I have accepted my appointment by the reasurer of this candidate committee. I certify that I am an imply with all the campaign finance registration and disclosure in 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	feitures assessed pursuant to Chapters 155 to 157, inclusive.
jurisd under plea d	liction, any (A) Title 9 of the (felony involving fraud, forge General Statues, or that at least on of any sentence, whicheve	guilty or nolo contendere to, in a court of competent ery, larceny, embezzlement or bribery, or (B) criminal offense st eight years have elapsed from the date of the conviction or r date is later, without a subsequent conviction of or plea to
	ify that I am no mission.	otherwise barred from servi	ng as a treasurer by order of the State Elections Enforcement
Bern	adette L Locket		04/09/2018
TREAS	SURER SIGNATURE		DATE (mm/dd/yyyy)
candi and a auton that I discle prohi I cert I cert jurisd under plea o	eby certify and so date to serve as eccept that, in the natically become am an elector in osure requirement bitions, limitation if that I have provided if that I have provided in the control of the Con	the candidate's designated de event of a vacancy caused le responsible for discharging in the State of Connecticut. If into as contained in Chapter 1 cons or restrictions concerning aid any civil penalties or fortot been convicted of or pled felony involving fraud, forge General Statues, or that at least on of any sentence, whichever	statement, that I have accepted my appointment by the leputy treasurer of this candidate committee, and I understand by the treasurer's death, incapacity or resignation, I shall gall of the duties required of the vacating treasurer. I certify intend to comply with all the campaign finance registration and .55 through 157 of the General Statutes, and to abide by any gampaign contributions and expenditures. feitures assessed pursuant to Chapters 155 to 157, inclusive. guilty or nolo contendere to, in a court of competent ery, larceny, embezzlement or bribery, or (B) criminal offense st eight years have elapsed from the date of the conviction or redate is later, without a subsequent conviction of or plea to
Enfor	rcement Commi		ng as a deputy treasurer by order of the State Elections
Kev	in Henry		04/09/2018

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	N FOR EXEMPTION	ON FROM FORMING A CANDIDATE COMMITTEE				
	I hereby certify that I am exempt from forming a candidate committee becaus (CHECK ONE)					
poli	itical committee	late of candidates whose campaigns are being funded solely v a town committee or a formed for a single election or primary and expendit to the decomposition of the special beautiful as a special property of the special property of the second property o				
		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 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 se, for the reason checked above, is true, accurate and complete to the best of my ef.				
CAN	DIDATE SIGNATURE	DATE (mm/dd/yyyy)				