### **SEEC FORM 1**

#### STATE ELECTIONS ENFORCEMENT COMMISSION

### Registration by Candidate

Revised September 2016



		VT~COM							
REGISTRATION TYPE	1. ELECTION DATE (mm/dd/yyyy)				2. MUNICIPALITY				
Initial	Nov 2018				(If applicable)				
3. OFFICE OR POSITION SOUGHT					4. DISTRICT NUMBER				
						(If applicable	?)		
State Representative					136				
5. PARTY AFFILIATION									
✓ Republican Democratic Other (Specify)									
6. CANDIDATE NAME									
First Name			MI		Last Name			Suffix	
Greg				Kraut					
7. CANDIDATE RESIDENCE ADDRESS					8. CANDIDATE MAILING ADDRESS (If different)				
Street Address				Address					
60 Center St									
City		State	Zip Code		City		State	Zip Code	
Westport		СТ	06880	0					
9. CANDIDATE TELEPHONE 10			10. CANDIDATE EMAIL ADDRESS						
(Include Area Code)									

### 11. DESIGNATION OF CAMPAIGN FUNDING SOURCE

0995

557

#### (Check one)

203

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

greg@gregkraut.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 Greg Kraut	Initial ✓I Amendment Greg Kraut					
12. COMMITTEE NAME						
Kraut For Westport						
13. COMMITTEE ADDRESS	13. COMMITTEE ADDRESS 4 WEBSITE					
Address			Email Address			
PO Box 601			greg@gregkraut.com			
City	State Zip Code		Website			
Westport	СТ	06881	gregkraut.com			
16. TREASURER NAME						
First Name		MI	Last Name Suffix			
Robert		С	Bass			
17. TREASURER RESIDENCE ADDRESS			18. TREASURER MAILING ADDRESS (If different)			
Street Address			Address			
10 Thomas Rd						
City	State	Zip Code	City	State	Zip Code	
Westport	СТ	06880				
19. TREASURER TELEPHONE 20. TREASURER EM			IAIL ADDRESS			
(Include Area Code) 203 722 5340 robertcbass@gma			il.com			
21. DEPUTY TREASURER NAME						
First Name		MI	Last Name Suff		Suffix	
22. DEPUTY TREASURER RESIDENCE ADDRESS			23. DEPUTY TREASURER MAILING ADDRESS (If different)			
Street Address			Address			
City	State	Zip Code	City	State	Zip Code	
24. DEPUTY TREASURER TELEPHONE 25. DEPUTY TREASURER			URER EMAIL ADDRESS			
(Include Area Code)						
26. DEPOSITORY INSTITUTION NAME						
People's Bank						
27. DEPOSITORY INSTITUTION ADDRESS						
Address						
371 Post Road East, Westport, CT 06880.						

SEEC FORM 1A Revised September 2016

REGISTRATION TYPE	CANDIDATE NAME	
Initial	Greg Kraut	
28. CERTIFICATION		
committee registration this statement include	on statement are true and accurate to es my certification to the fact that ar	ent, that all of the designations set forth in this candidate the best of my knowledge and belief, and further, that ny individual designated herein to serve as my treasurer to of my appointment of them to those positions.
Greg Kraut		10/24/2018
CANDIDATE SIGNATURE		DATE (mm/dd/yyyy)
candidate to serve as elector in the State o requirements as cont limitations or restrict.  I certify that I have pure in the state of the completion of the completion another such felony of the state of the state of the completion of the such felony of the state o	the candidate's designated treasurer f Connecticut. I intend to comply wained in Chapter 155 through 157 of cions concerning campaign contributed and any civil penalties or forfeitures not been convicted of or pled guilty of felony involving fraud, forgery, largue General Statues, or that at least eight on of any sentence, whichever date is proffense.	assessed pursuant to Chapters 155 to 157, inclusive.  or nolo contendere to, in a court of competent eny, embezzlement or bribery, or (B) criminal offense years have elapsed from the date of the conviction or s later, without a subsequent conviction of or plea to
I certify that I am no Commission.	t otherwise barred from serving as a	treasurer by order of the State Elections Enforcement
Robert C Bass		10/26/2018
TREASURER SIGNATURE		DATE (mm/dd/yyyy)
candidate to serve as and accept that, in the automatically become that I am an elector is disclosure requirement prohibitions, limitating I certify that I have pure I certify that I have pure in the service of the Completion of the completion another such felony of the completion	the candidate's designated deputy to event of a vacancy caused by the to event of the State of Connecticut. I intendents as contained in Chapter 155 through one or restrictions concerning camparated any civil penalties or forfeitures and the event of the convicted of or pled guilty of felony involving fraud, forgery, largue General Statues, or that at least eight on of any sentence, whichever date is or offense.	ent, that I have accepted my appointment by the reasurer of this candidate committee, and I understand reasurer's death, incapacity or resignation, I shall the duties required of the vacating treasurer. I certify to comply with all the campaign finance registration and ough 157 of the General Statutes, and to abide by any aign contributions and expenditures.  assessed pursuant to Chapters 155 to 157, inclusive.  or nolo contendere to, in a court of competent teny, embezzlement or bribery, or (B) criminal offense years have elapsed from the date of the conviction or as later, without a subsequent conviction of or plea to deputy treasurer by order of the State Elections
DEPUTY TREASURER SIGNA	TUDE	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)				
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 determy behand be 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 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)			