### **SEEC FORM 1**

#### STATE ELECTIONS ENFORCEMENT COMMISSION

#### Registration by Candidate

Revised September 2016



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REGISTRATION TYPE 1. ELECTION DATE (mm/dd/yyyy) 2. MUNICIPALITY								
✓ Initial   Amendment   Nov 2018 (If applicable)								
3. OFFICE OR POSITION SOUGHT 4. DISTRICT NUMBER								
State Representative				(If applicable) 068				
5. PARTY AFFILIATION								
Republican V Democratic Other (Specify)								
6. CANDIDATE NAME								
First Name			MI	Last Name			Suffix	
Jeffrey	Jeffrey V Desmarais							
7. CANDIDATE RESIDENCE ADDRESS 8. CANDIDATE MAILING ADDRESS (If different)								
Street Address Address								
80 Williamson Cir								
City		State	Zip Code	City		State	Zip Code	
Oakville		СТ	06779					
9. CANDIDATE TELEPHONE 10. CANDIDATE EMAIL ADDRESS								
(Include Area Code)								
203 592 5899 Isjudr@gmail.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



V   Initial   I   Amendment   Jeffrey V   Desmarais	REGISTRATION TYPE CANDIDATE NA	AME					
Desmarais 2018   I. COMMITTEE ADDRESS	✓ Initial I Amendment Jeffrey V Desmarais						
13. COMMITTEE ADDRESS	12. COMMITTEE NAME						
Address   Email Address   Email Address   Email Address	Desmarais 2018						
State   Zip Code   OR779   Website	13. COMMITTEE ADDRESS			14. & 15. COMMITTEE EMAIL ADDRESS & W	EBSITE		
City Oakville  I.6. TREASURER NAME  First Name Cristina  MI Last Name Hassinger  I.7. TREASURER RESIDENCE ADDRESS Street Address  400 French St  City Oakville  CT  State CT  O6779  State CT  State CT  O6779  CT  O6779  CT  O6779  CT  O6779  State CT  O6779  CT  O6779  CT  O6779  State CT  O6779  CT  O6779  CT  O6779  CT  O6779  O6779  CT  O6779  CT  O6779  O6779  CT  O6779  O67				Email Address			
Cakville	80 Williamson Cir						
Dakville	City	State		Website			
First Name Cristina  MI Last Name Hassinger  11. TREASURER RESIDENCE ADDRESS Street Address  Address  Address  Address  Address  Address  Address  Lig Code 06779 CT  State Cry Oakville  12. TREASURER MAILING ADDRESS (If different)  State Cry Oakville  CT  State Cry Oakville  13. TREASURER MAILING ADDRESS (If different)  State Cry Oakville  CT  CT  CT  CT  State Cry O6779 Cry Oakville  14. TREASURER EMAIL ADDRESS  (Include Area Code) B60 417 8083  Cristinahassinger@gmail.com  21. DEPUTY TREASURER NAME First Name Peter A Schutt  22. DEPUTY TREASURER RESIDENCE ADDRESS Street Address  176 Yale Ave  City Milford  CT  State Zip Code O6460 CT  CT  State Zip Code O6460 CT  O6460 CT  Deputy TREASURER MAILING ADDRESS  State Zip Code O6460 CT  Address  Peter Treasurer Mailing Address  Tig Code O6460 CT  Deputy TREASURER MAILING ADDRESS (If different)  State Zip Code O6460 CT  Deputy TREASURER MAILING ADDRESS  State Address  Peter Crity Deputy TREASURER MAILING ADDRESS (If different)  Address  Peter Crity Deputy TREASURER MAILING ADDRESS (If different)  Address  Address  Peter Crity Deputy TREASURER MAILING ADDRESS (If different)  Address  Peter Crity Deputy TREASURER MAILING ADDRESS (If different)  Address  Peter Crity Deputy TREASURER MAILING ADDRESS (If different)  Address  Peter Crity Deputy TREASURER MAILING ADDRESS (If different)  Address  Peter Crity Deputy TREASURER MAILING ADDRESS (If different)  Address  Peter Crity Deputy TREASURER MAILING ADDRESS (If different)  Address  Peter Crity Deputy TREASURER MAILING ADDRESS (If different)  Address  Peter Crity Deputy TREASURER MAILING ADDRESS (If different)  Address  Peter Crity Deputy TREASURER MAILING ADDRESS (If different)  Address  Peter Crity Deputy TREASURER MAILING ADDRESS (If different)  Address  Peter Crity Deputy TreasureR MAILING ADDRESS (If different)  Address  Peter Crity Deputy TreasureR MAILING ADDRESS (If different)  Address  Peter Crity Deputy TreasureR MAILING ADDRESS (If different)  Address  Peter Crity Deputy TreasureR MAILING ADDRESS (If different)	Oakville	CT	00779				
T. TREASURER RESIDENCE ADDRESS   18. TREASURER MAILING ADDRESS (If different)	16. TREASURER NAME	•					
17. TREASURER RESIDENCE ADDRESS   18. TREASURER MAILING ADDRESS (If different)	First Name		MI	Last Name		Suffix	
Street Address	Cristina			Hassinger			
A00 French St	17. TREASURER RESIDENCE ADDRESS			18. TREASURER MAILING ADDRESS (If different	9)		
City Oakville CT CT City O6779 City O6779  19. TREASURER TELEPHONE	Street Address			Address			
Oakville	400 French St						
Dakville	City	State		City	State	Zip Code	
Reference   Refe	Oakville	СТ	06779				
21. DEPUTY TREASURER NAME  First Name Peter  MI Last Name A Schutt  22. DEPUTY TREASURER RESIDENCE ADDRESS Street Address 176 Yale Ave  City Milford  State  Zip Code O6460 CT  24. DEPUTY TREASURER TELEPHONE CT  25. DEPUTY TREASURER EMAIL ADDRESS (Include Area Code) peteschutt@aol.com	19. TREASURER TELEPHONE 20. TREASURER EMAIL ADDRESS						
21. DEPUTY TREASURER NAME  First Name Peter  A Schutt  22. DEPUTY TREASURER RESIDENCE ADDRESS Street Address  176 Yale Ave  City Milford  State CT  State CT  CT  State CT  CT  CT  State CT	(Include Area Code)						
First Name Peter  MI A Schutt   22. DEPUTY TREASURER RESIDENCE ADDRESS Street Address Address  176 Yale Ave  City Milford  State CT  State CT  CT  State CT  CT  Address  State City O6460 CT  Address  State City O6460 CT  CT  Peter Address  Address  Address  Address  Address  Address  Address  Address  Include Area Code Address  Addres	860 417 8083 cristinahassinger@gmail.com						
Peter A Schutt  22. DEPUTY TREASURER RESIDENCE ADDRESS Street Address 176 Yale Ave  City State Zip Code O6460 CT  24. DEPUTY TREASURER TELEPHONE (Include Area Code) 203 435 4459  Address  City Deteschutt@aol.com							
22. DEPUTY TREASURER RESIDENCE ADDRESS Street Address  176 Yale Ave  City  Milford  CT  State  City  Milford  CT  State  City  CT  CT  CT  CT  CT  CT  CT  CT  CT  C						Sumx	
Street Address  176 Yale Ave  City  Milford  State  CT  CT  State  CT  State  CT  CT  CT  State  CT  CT  CT  CT  CT  CT  CT  CT  CT  C		Peter A Schutt					
City State Zip Code O6460  CT  State Zip Code O6460  CT  24. DEPUTY TREASURER TELEPHONE	10 00 7						
City Milford CT State CT CT City O6460 CT							
Milford CT 06460  24. DEPUTY TREASURER TELEPHONE 25. DEPUTY TREASURER EMAIL ADDRESS  (Include Area Code) 203 435 4459 peteschutt@aol.com		State	Zin Code	City	State	Zin Code	
24. DEPUTY TREASURER TELEPHONE  (Include Area Code)  203 435 4459  25. DEPUTY TREASURER EMAIL ADDRESS  peteschutt@aol.com			I -			Z.p code	
(Include Area Code) 203 435 4459 peteschutt@aol.com	Milford						
203 435 4459 peteschutt@aol.com							
200 400 4400		netesc	hutt@aol co	nm.			
26. DEPOSITORY INSTITUTION NAME	250 400 4400						
TD Bank							
27. DEPOSITORY INSTITUTION ADDRESS							
Address							
1247 Main Street, Watertown, CT 06795							

SEEC FORM 1A Revised September 2016					
REGISTRATION TYPE	CANDIDATE NAME				
✓ Initial   Amendment	Jeffrey V Desmarais				
28. CERTIFICATION					
committee registration this statement include	on statement are true and accurate to the es my certification to the fact that any ave indicated to me their acceptance of	t, that all of the designations set forth in this candidate the best of my knowledge and belief, and further, that individual designated herein to serve as my treasurer f my appointment of them to those positions.     O5/15/2018			
		· · · · · · · · · · · · · · · · · · ·			
candidate to serve as elector in the State of requirements as contalimitations or restrict  I certify that I have p  I certify that I have n jurisdiction, any (A) under Title 9 of the C plea or the completion another such felony of I certify that I am not	the candidate's designated treasurer of Connecticut. I intend to comply with ained in Chapter 155 through 157 of the ions concerning campaign contribution aid any civil penalties or forfeitures as ot been convicted of or pled guilty or a felony involving fraud, forgery, larcen General Statues, or that at least eight year of any sentence, whichever date is larger offense.	t, that I have accepted my appointment by the f this candidate committee. I certify that I am an all the campaign finance registration and disclosure are General Statutes, and to abide by any prohibitions, and expenditures.  Seessed pursuant to Chapters 155 to 157, inclusive.  Include the contender to, in a court of competent and the competent are ears have elapsed from the date of the conviction or eater, without a subsequent conviction of or plea to the casurer by order of the State Elections Enforcement			
Commission.					
Cristina Hassinger		05/22/2018			
TREASURER SIGNATURE		DATE (mm/dd/yyyy)			
candidate to serve as and accept that, in the automatically become that I am an elector in disclosure requirement prohibitions, limitation	the candidate's designated deputy treate event of a vacancy caused by the treate responsible for discharging all of the nother than the State of Connecticut. I intend to not as contained in Chapter 155 throughous or restrictions concerning campaignament.	t, that I have accepted my appointment by the asurer of this candidate committee, and I understand asurer's death, incapacity or resignation, I shall duties required of the vacating treasurer. I certify comply with all the campaign finance registration and the 157 of the General Statutes, and to abide by any contributions and expenditures.			

I certify that I have not been convicted of or pled guilty or nolo contendere to, in a court of competent jurisdiction, any (A) felony involving fraud, forgery, larceny, embezzlement or bribery, or (B) criminal offense under Title 9 of the General Statues, or that at least eight years have elapsed from the date of the conviction or plea or the completion of any sentence, whichever date is later, without a subsequent conviction of or plea to another such felony or offense.

I certify that I am not otherwise barred from serving as a deputy treasurer by order of the State Elections Enforcement Commission.

Peter A Schutt	 05/15/2018	
DEPUTY TREASURER SIGNATURE	 DATE (mm/dd/yyyyy)	



# **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)				
poli	A. I am one of a slate of candidates whose campaigns are being funded solely was town committee or a political committee formed for a single election or primary and expendit and decomplete and be reported by the committee sponsoring my candidacy. The name of this space committee is:					
		OR				
con thou	tributions from cusand dollars (\$2)	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 a served 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)				