SEEC FORM 1

STATE ELECTIONS ENFORCEMENT COMMISSION

Registration by Candidate

Revised September 2016



		V7~COM						<u> </u>	
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) 074			
5. PARTY AFFILIATION									
Republican V Democratic Other (Specify)									
6. CANDIDATE NAME									
First Name			MI		Last Name			Suffix	
Wendy				Tyson-Wood					
7. CANDIDATE RESIDENCE ADDRESS					8. CANDIDATE MAILING ADDRESS (If different)				
Street Address				Address					
329 Schraffts Dr Apt 306									
City		State	Zip Code		City		State	Zip Code	
Waterbury		СТ	0670	5					
9. CANDIDATE TELEPHONE 1			10. CANDIDATE EMAIL ADDRESS						
(Include Area Code)									

11. DESIGNATION OF CAMPAIGN FUNDING SOURCE

6469

546

(Check one)

203

✓ 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.

wtw74d@gmail.com

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 Wendy M Tyson-Wood							
12. COMMITTEE NAME							
Elect Wendy							
13. COMMITTEE ADDRESS	14. & 15. COMMITTEE EMAIL ADDRESS & WEBSITE						
Address			Email Address				
329 Schraffts Dr # 306							
City	State Zip Code 06705		Website				
Waterbury							
16. TREASURER NAME	16. TREASURER NAME						
First Name		MI	Last Name		Suffix		
Kenneth		R	Cook				
17. TREASURER RESIDENCE ADDRESS			18. TREASURER MAILING ADDRESS (If different)				
Street Address			Address				
329 Schraffts Dr Apt 306							
City	State	Zip Code	City	State	Zip Code		
Waterbury	СТ	06705					
19. TREASURER TELEPHONE 20. TREASURER E			MAIL ADDRESS				
(Include Area Code)							
203 754 6469 Kennethcookct@a			aol.com				
21. DEPUTY TREASURER NAME							
First Name		MI	Last Name		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 TREAS			URER EMAIL ADDRESS				
(Include Area Code)							
26. DEPOSITORY INSTITUTION NAME							
Ion Bank							
27. DEPOSITORY INSTITUTION ADDRESS Address							
3670 East Main Street, Waterbury. CT 067	705						
on a Last main strong, tratorously, or sorrous							

DEPUTY TREASURER SIGNATURE

Revised Sep	Revised September 2016					
REGISTRA	TION TYPE	CANDIDATE NAME				
✓ Initial	Amendment	Wendy M Tyson-Wood				
28. CERTIF	ICATION					
comn this si or dej Wer	nittee registration tatement includ	ate, under penalties of false statement, that all of the designations set forth in this candidate in statement are true and accurate to the best of my knowledge and belief, and further, that is my certification to the fact that any individual designated herein to serve as my treasurer we indicated to me their acceptance of my appointment of them to those positions. Od O5/24/2018 DATE (mm/dd/yyyy)				
candi electo requi limita	date to serve as or in the State of rements as contactions or restrict	ate, under penalties of false statement, that I have accepted my appointment by the he 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 ined in Chapter 155 through 157 of the General Statutes, and to abide by any prohibitions, ons concerning campaign contributions and expenditures. id any civil penalties or forfeitures assessed pursuant to Chapters 155 to 157, inclusive.				
jurisd under plea c anoth I certi	iction, any (A) Title 9 of the Cor the completion er such felony of	t been convicted of or pled guilty or nolo contendere to, in a court of competent elony involving fraud, forgery, larceny, embezzlement or bribery, or (B) criminal offense eneral Statues, or that at 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. otherwise barred from serving as a treasurer by order of the State Elections Enforcement				
Kenr	neth R Cook	05/24/2018				
TREAS	SURER SIGNATURE	DATE (mm/dd/yyyy)				
candicand and according that I disclosure prohibits I certification of the control of the contro	by certify and so date to serve as except that, in the natically become am an elector in esure requirementations, limitation of that I have projected if that I have noticed in the completion of the completion o	otherwise barred from serving as a deputy treasurer by order of the State Elections				

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 because (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 temporal description of the reported by the committee sponsoring my candidacy. The name of this sponsor 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 reconstructed for filing francial 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)				