SEEC FORM 1

STATE ELECTIONS ENFORCEMENT COMMISSION

Registration by Candidate

Revised September 2016

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evised september 2010	SET STATE OF SET		
EGISTRATION TYPE	1. ELECTION DATE (mm/dd/yyyy)	2. MUNICIPALITY	
		(If applicable)	
✓ Initial Amendment	Nov 2018		
OFFICE OR POSITION S	OUGHT		4. DISTRICT NUMBER
			(If applicable)
tate Representative			071
PARTY AFFILIATION			
✓ Republican	Democratic Othe	CT (Specify)	
CANDIDATE NAME			

State Representative				071	
5. PARTY AFFILIATION					
✓ Republican Democratic		Other (Specify)			
6. CANDIDATE NAME					
First Name		MI	Last Name		Suffix
Anthony		J	Damelio		
7. CANDIDATE RESIDENCE ADDRESS		8. CANDIDATE MAILING ADDRESS (If different)			
Street Address			Address		
64 Wellington Ave					
City	State	Zip Code	City	State	Zip Code
Waterbury	СТ	06708			
9. CANDIDATE TELEPHONE 10. CAN		CANDIDATE EMAIL ADDRESS			
(Include Area Code)				· · · · · · · · · · · · · · · · · · ·	
203 217 3508	damelio71@aol.com				
11 DESIGNATION OF CAMBAICN 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 NAME					
✓ Initial I Amendment Anthony J Da	/ Initial Amendment Anthony J Damelio				
12. COMMITTEE NAME					
D'Amelio 2018					
13. COMMITTEE ADDRESS			14. & 15. COMMITTEE EMAIL ADDRESS & W	EBSITE	
Address			Email Address		
64 Wellington Ave damelio71@aol.com					
City	State		Website		
Waterbury					
16. TREASURER NAME					
First Name		MI	Last Name Suffix		Suffix
Jonathan		М	Barney		
17. TREASURER RESIDENCE ADDRESS			18. TREASURER MAILING ADDRESS (If different)		
Street Address			Address		
31 Cheryl Dr					
City	State	Zip Code	City	State	Zip Code
Waterbury	CT 06708				
19. TREASURER TELEPHONE					
(Include Area Code) 203 558 0265 Jonathanb221@yahoo.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	(0.00	,
City	State	Zip Code	City	State	Zip Code
24. DEPUTY TREASURER TELEPHONE	25. DEP	 	URER EMAIL ADDRESS		
(Include Area Code)	20, 521		ONEN ENAME INDUNE		
26. DEPOSITORY INSTITUTION NAME					
T.D Bank North					
27. DEPOSITORY INSTITUTION ADDRESS					
Address					
630 Highland Avenue					
			<u>. </u>		

SEEC FORM 1A Revised September 2016

REGISTRAT	TION TYPE	CANDIDATE NAME		
✓ Initial	Amendment			
V Illitial	Amendment	Anthony J Damelio		
28. CERTIFIC	CATION			
comm this sta	ittee registration atement includ	tate, under penalties of false statement, that all of the designations set forth in this candidate on statement are true and accurate to the best of my knowledge and belief, and further, that es my certification to the fact that any individual designated herein to serve as my treasurer ave indicated to me their acceptance of my appointment of them to those positions.		
Antho	Anthony J Damelio 05/31/2018			
CANDII	DATE SIGNATURE	DATE (mm/dd/yyyy)		
Treasurer				
I herek candid elector require	ate to serve as in the State or ements as cont	tate, under penalties of false statement, that I have accepted my appointment by the 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 ained in Chapter 155 through 157 of the General Statutes, and to abide by any prohibitions, ions concerning campaign contributions and expenditures.		
I certif	fy that I have p	aid any civil penalties or forfeitures assessed pursuant to Chapters 155 to 157, inclusive.		
jurisdi under plea or anothe I certif	ction, any (A) Title 9 of the C the completion r such felony of	ot been convicted of or pled guilty or nolo contendere to, in a court of competent felony involving fraud, forgery, larceny, embezzlement or bribery, or (B) criminal offense General Statues, or that at least eight years have elapsed from the date of the conviction or n of any sentence, whichever date is later, without a subsequent conviction of or plea to or offense. To otherwise barred from serving as a treasurer by order of the State Elections Enforcement		
	han M Barney	05/31/2018		
	JRER SIGNATURE	DATE (mm/dd/yyyy)		
TKL/ISC	KER GIGIATIONE	DATE (tilling du yyyyy)		
candid and ac autom that I a disclos	late to serve as cept that, in the atically become am an elector in sure requireme	tate, under penalties of false statement, that I have accepted my appointment by the the candidate's designated deputy treasurer of this candidate committee, and I understand e event of a vacancy caused by the treasurer's death, incapacity or resignation, I shall e responsible for discharging all of the duties required of the vacating treasurer. I certify a the State of Connecticut. I intend to comply with all the campaign finance registration and ents as contained in Chapter 155 through 157 of the General Statutes, and to abide by any ons or restrictions concerning campaign contributions and expenditures.		
I certif	fy that I have p	aid any civil penalties or forfeitures assessed pursuant to Chapters 155 to 157, inclusive.		
jurisdi under plea o	ction, any (A) Title 9 of the (ot been convicted of or pled guilty or nolo contendere to, in a court of competent felony involving fraud, forgery, larceny, embezzlement or bribery, or (B) criminal offense General Statues, or that at least eight years have elapsed from the date of the conviction or n of any sentence, whichever date is later, without a subsequent conviction of or plea to or offense.		
	fy that I am not ement Commi	otherwise barred from serving as a deputy treasurer by order of the State Elections ssion.		
DEPUTY	TREASURER SIGNA	TURE 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 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 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 experiments of one thousand dollars (\$1,000).					
□ D. I do proved to receive 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)			