SEEC FORM 1

STATE ELECTIONS ENFORCEMENT COMMISSION

Registration by Candidate

Revised September 2016



	EME	NT COMM					<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	2)	
5. PARTY AFFILIATION							
Republican Democratic Other (Specify)							
6. CANDIDATE NAME							
First Name			MI	Last Name			Suffix
Roland			J	Lemar			
7. CANDIDATE RESIDENCE ADDRESS				8. CANDIDATE MAILING ADDRESS (If different)			
Street Address				Address			
552 Chapel St							
City		State	Zip Code	City		State	Zip Code
New Haven		СТ	06511				
9. CANDIDATE TELEPHON	10. CANDIDATE EMAIL ADDRESS						
(Include Area Code)							

11. DESIGNATION OF CAMPAIGN FUNDING SOURCE

6135

240

(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.

rjlemar@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 N	CANDIDATE NAME					
✓ Initial I Amendment Roland J Lema	Roland J Lemar					
12. COMMITTEE NAME						
Lemar2018						
13. COMMITTEE ADDRESS		14. & 15. COMMITTEE EMAIL ADDRESS & WEBSITE				
Address		Email Address				
552 Chapel St			rjlemar@gmail.com			
City	State	Zip Code 06511	Website			
New Haven CT						
16. TREASURER NAME		_				
First Name		MI	Last Name Suffix			
Hacibey			Catalbasoglu			
17. TREASURER RESIDENCE ADDRESS			18. TREASURER MAILING ADDRESS (If different)			
Street Address			Address			
31 High St			122 Howe St			
City	State	Zip Code	City	State	Zip Code	
New Haven	СТ	06511	New Haven	СТ	06511-3	
19. TREASURER TELEPHONE 20. TREASURER E			MAIL ADDRESS			
(Include Area Code)						
203 212 7686	203 212 7686 c.hacibey@gmail.com					
21. DEPUTY TREASURER NAME		1				
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			SURER EMAIL ADDRESS			
(Include Area Code)						
26. DEPOSITORY INSTITUTION NAME						
Bank of America						
27. DEPOSITORY INSTITUTION ADDRESS						
Address						
157 Church Street, New Haven, CT 06511						
137 Church Street, New Flaven, C1 00311						

SEEC FORM 1ARevised September 2016

REGISTRA	ATION TYPE	CANDIDATE NAME	
✓ Initial	Amendment	Roland J Lemar	
28. CERTIF	FICATION		
comi this s	mittee registrationstatement includ	on statement are true and acces my certification to the fac	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.
Roland J Lemar			05/17/2018
CANE	DIDATE SIGNATURE		DATE (mm/dd/yyyy)
Treasurer			
cand electe requi	idate to serve as or in the State of rements as cont	the candidate's designated to Connecticut. I intend to coained 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	tify that I have p	aid any civil penalties or for	feitures assessed pursuant to Chapters 155 to 157, inclusive.
juriso unde plea anoth I cert	diction, any (A) r Title 9 of the (or the completion er such felony of	felony involving fraud, forgo General Statues, or that at lea on of any sentence, whicheve or offense.	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 as a treasurer by order of the State Elections Enforcement
Hacibey Catalbasoglu 06/		u	06/04/2018
TREASURER SIGNATURE			DATE (mm/dd/yyyy)
Deputy Treasure	or.		
cand and a autor that I discl	idate to serve as accept that, in the matically become am an elector is osure requireme	the candidate's designated of e event of a vacancy caused e responsible for discharging in the State of Connecticut. I ents as contained in Chapter 1	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.
I cert	tify that I have p	aid any civil penalties or for	feitures assessed pursuant to Chapters 155 to 157, inclusive.
juriso unde plea	diction, any (A) r Title 9 of the (felony involving fraud, forgo General Statues, or that at lea 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
	tify that I am no rcement Commi		ng as a deputy treasurer by order of the State Elections
DEPU	TY 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 toy compittee or a political committee formed for a single election or primary and expendit to the toy behave all be reported by the committee sponsoring my candidacy. The name of this spaces of compitations:					
		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)			