SEEC FORM 1

STATE ELECTIONS ENFORCEMENT COMMISSION

Registration by Candidate

Revised September 2016



| REGISTRATION TYPE 1. ELECTION DATE (mm/dd/yyyy) | | | 2. MUNICIPALITY | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|---------|-----------------------------|-----------------------------------|------------------------|--------|----------|
| ✓ Initial Amendment Nov 2018 | | | (If applicable) | | | | |
| 3. OFFICE OR POSITION S | OUGHT | | | | 4. DISTRICT NUMBER | | |
| State Representative | | | | | (If applicable) 128 | | |
| 5. PARTY AFFILIATION | | | | | | | |
| ✓ Republican | Democratic | | Other (Spec | ify) | | | |
| 6. CANDIDATE NAME | | | | | | | |
| First Name | | | MI | Last Name | | | Suffix |
| Ethan | | | | Book | | | |
| 7. CANDIDATE RESIDENC | E ADDRESS | | | 8. CANDIDATE MAILING ADDRESS | (If different) | | |
| Street Address | | | | Address | | | |
| 144 Coleman St | | | | | | | |
| City | | State | Zip Code | City | | State | Zip Code |
| Bridgeport | | СТ | 06604 | | | | |
| 9. CANDIDATE TELEPHONE | | | 10. CANDIDATE EMAIL ADDRESS | | | | |
| (Include Area Code) | | | | | | | |
| 203 943 0045 newenglimo@aol.com | | | | | | | |
| 11. DESIGNATION OF CAN | IPAIGN FUNDING | SOURCE | 2 | | | | |
| (Check one) | | | | | | | |
| ✓ A. I am formi Registration | - | commi | ttee and I | am required to file a Candidate | e Comm | ittee | |
| Go to Form | 1A and complete | pages 2 | and 3 — Co | andidate Registration Statement. | | | |
| - | pt from forming ng a Candidate C | | | nmittee and I am filing a Certifi | cation c | ofExem | ption |
| 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 <i>together with</i> either Form 1A, "Registration of Candidate Committee" or Form 1B "Exemption from Forming a Candidate Committee" within 10 days | | | | | | | |

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 NA | AME | | | | | | |
|-------------------------------------------------------|---------------|---------|------------------------------------|---------------------------------------------------------------------|----------------|------------|--|--|
| Initial I Amendment Ethan Book | | | | | | | | |
| 12. COMMITTEE NAME | | | | | | | | |
| Ethan Book for State Rep '18 | | | | | | | | |
| 13. COMMITTEE ADDRESS | | | | 14. & 15. COMMITTEE EMAIL ADDRESS & W | /EBSITE | | | |
| Address | | | | Email Address | | | | |
| 144 Coleman St | | | | newenglimo@aol.com | | | | |
| City | | State | 1 | Website | | | | |
| Bridgeport | | СТ | 06604 | ethanforbpt.com | | | | |
| 16. TREASURER NAME | | | | | | | | |
| First Name | | | MI | Last Name | | Suffix | | |
| Sheila | | | М | Foy | | | | |
| 17. TREASURER RESIDENC | E ADDRESS | | | 18. TREASURER MAILING ADDRESS (If different | t) | | | |
| Street Address | | | | Address | | | | |
| 247 Helen St | | | | | | | | |
| City | | State | Zip Code | City | State | Zip Code | | |
| Bridgeport | | СТ | 06608 | | | | | |
| 19. TREASURER TELEPHON | 1E | 20. TRE | EASURER EN | MAIL ADDRESS | | | | |
| (Include Area Code) 475 449 1478 foyenterprises | | | erprises@g | mail.com | | | | |
| 21. DEPUTY TREASURER NA | AME | | | | | | | |
| First Name | | | MI | Last Name | | Suffix | | |
| | | | | | | | | |
| 22 DEPUTY TREASURER RI | FSIDENCE ADDR | FSS | | 23. DEPUTY TREASURER MAILING ADDRES | S (If differen | <i>t</i>) | | |
| 22. DEPUTY TREASURER RESIDENCE ADDRESS Street Address | | | | 25. DEPUTY TREASURER MAILING ADDRESS (If aliferent) Address | | | | |
| | | | | | | | | |
| City | | State | Zip Code | City | State | Zip Code | | |
| | | | | | | r · · · · | | |
| | | | | | | | | |
| 24. DEPUTY TREASURER TELEPHONE 25. | | 25. DEP | 25. DEPUTY TREASURER EMAIL ADDRESS | | | | | |
| (Include Area Code) | | | | | | | | |
| | | | | | | | | |
| 26. DEPOSITORY INSTITUT | ION NAME | | | | | | | |
| People's United Bank | | | | | | | | |
| 27. DEPOSITORY INSTITUTION ADDRESS | | | | | | | | |
| Address | | | | | | | | |
| 850 Main Street, Bridgeport, CT 06604 | | | | | | | | |
| | | | | | | | | |

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| REGISTRATION TYPE | CANDIDATE NAME | | |
|--------------------------|----------------|--|--|
| ✓ Initial Amendment | Ethan Book | | |
| 28. CERTIFICATION | | | |

Candidate

I hereby certify and state, under penalties of false statement, that all of the designations set forth in this candidate committee registration statement are true and accurate to the best of my knowledge and belief, and further, that this statement includes my certification to the fact that any individual designated herein to serve as my treasurer or deputy treasurer have indicated to me their acceptance of my appointment of them to those positions.

| Ethan Book | | 08/24/2018 |
|---------------------|---|-------------------|
| CANDIDATE SIGNATURE | - | DATE (mm/dd/yyyy) |

Treasurer

I hereby certify and state, under penalties of false statement, that I have accepted my appointment by the candidate to serve as the candidate's designated treasurer of this candidate committee. I certify that I am an elector in the State of Connecticut. I intend to comply with all the campaign finance registration and disclosure requirements as contained in Chapter 155 through 157 of the General Statutes, and to abide by any prohibitions, limitations or restrictions concerning campaign contributions and expenditures.

I certify that I have paid any civil penalties or forfeitures assessed pursuant to Chapters 155 to 157, inclusive.

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 treasurer by order of the State Elections Enforcement Commission.

| Sheila M Foy | 08/24/2018 |
|---------------------|-------------------|
| TREASURER SIGNATURE | DATE (mm/dd/yyyy) |

Deputy Treasurer

I hereby certify and state, under penalties of false statement, that I have accepted my appointment by the candidate to serve as the candidate's designated deputy treasurer of this candidate committee, and I understand and accept that, in the event of a vacancy caused by the treasurer's death, incapacity or resignation, I shall automatically become responsible for discharging all of the duties required of the vacating treasurer. I certify that I am an elector in the State of Connecticut. I intend to comply with all the campaign finance registration and disclosure requirements as contained in Chapter 155 through 157 of the General Statutes, and to abide by any prohibitions, limitations or restrictions concerning campaign contributions and expenditures.

I certify that I have paid any civil penalties or forfeitures assessed pursuant to Chapters 155 to 157, inclusive.

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.

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SEEC FORM 1B STATE ELECTIONS ENFORCEMENT COMMISSION Certification of Exemption From Forming a Candidate Committee Revised September 2016



| DECICED ATION TYPE | CANDIDATE NAME | | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|
| REGISTRATION TYPE | | | | | | |
| Initial Amendment | | | | | | |
| 12. REASON FOR EXEMPTION FROM FORMING A CANDIDATE COMMITTEE | | | | | | |
| I hereby cer | 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 solely by a town committee or a political committee formed for a single election or primary and expendit and the tamp behavioral be reported by the committee sponsoring my candidacy. The name of this spinsor expension mittains: | | | | | | |
| | OR | | | | | |
| contributions fro thousand dollars | g my campaign entirely from my own verse al fun is and will not request or receive in other individuals or committees and I to terstation of if I make expenditures exceeding one (\$1,000) that I shall be reconstant for filing financial disclosure statements (SEEC Form 23) same schedule and in the campaigneer as received of treasurers of candidate committees. | | | | | |
| C. I do not inte | | | | | | |
| | OR | | | | | |
| D. I do | nd to receive or expend any funds, including personal funds, for this campaign. | | | | | |
| 13. CER | | | | | | |
| | nd state, under penalties of false statement, that this statement of exemption from forming a ttee, for the reason checked above, is true, accurate and complete to the best of my elief. | | | | | |
| CANDIDATE SIGNATUR | DATE (mm/dd/yyyy) | | | | | |