SEEC FORM 1

STATE ELECTIONS ENFORCEMENT COMMISSION

Registration by Candidate

Revised September 2016



Received by SEEC 05/19/2021 12:08 PM

REGISTRATION TYPE 1. ELECTION DATE (mm/dd/yyyy)			2. MUNICIPALITY				
			(If applicable)				
✓ Initial Amendment	Nov 2021 - Sp. E	Elec -					
3. OFFICE OR POSITION S					4. DISTRICT NUMBER		
					(If applicable	е)	
Judge of Probate					040		
5. PARTY AFFILIATION							
✓ Republican	Democratic		Other (Spece	fy)			
5. CANDIDATE NAME							
ïrst Name			MI	Last Name			Suffix
Win				Smith			
. CANDIDATE RESIDENC	E ADDRESS			8. CANDIDATE MAILING ADDRESS (If different)			
treet Address				Address			
167 Penn Cmn							
lity		State	Zip Code	City		State	Zip Code
Milford		СТ	06460				
. CANDIDATE TELEPHON	Æ	10. CAN	DIDATE EN	IAIL ADDRESS		<u> </u>	
Include Area Code)							
203 815 8727 winIll@deysmith			deysmith.c	com			
1. 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

REGISTRATION TYPE	CANDIDATE NAME							
✓ Initial Amendment	Win Smith							
12. COMMITTEE NAME								
Win Smith for Probate Jud	ge							
13. COMMITTEE ADDRESS				14. & 15. COMMITTEE EMAIL ADDRESS & W	EBSITE			
Address				Email Address				
50 Cherry St Ste 102				info@winsmithforprobatejudge.com				
City		State Zip Code		Website				
Milford		СТ 06460		winsmithforprobatejudge.com				
16. TREASURER NAME								
First Name			MI	Last Name		Suffix		
Justin				Liskiewicz				
17. TREASURER RESIDENCI	E ADDRESS			18. TREASURER MAILING ADDRESS (If different)				
Street Address				Address				
190 Lookout Hill Rd								
City		State	Zip Code	City	State	Zip Code		
Milford		СТ	06461					
19. TREASURER TELEPHON	E	20. TRE	20. TREASURER EMAIL ADDRESS					
(Include Area Code) 203 647 9002 Justin@JLiskcpa.		com						
1 DEDUTY THE ACURED NA	ME							
21. DEPUTY TREASURER NA First Name			MI	Last Name		Suffix		
Scott			F	Marlow				
22. DEPUTY TREASURER RE	ESIDENCE ADDR	ESS		23. DEPUTY TREASURER MAILING ADDRESS (If different)				
Street Address				Address				
353 W Main St								
City		State	Zip Code	City	State	Zip Code		
Milford		СТ	06460					
24. DEPUTY TREASURER TELEPHONE 25. DEPUTY TREAS			URER EMAIL ADDRESS					
(Include Area Code)								
203 877 7535 marloscot@aol.com			om in the second s					
26. DEPOSITORY INSTITUTI	ION NAME							
People's United Bank								
27. DEPOSITORY INSTITUTION ADDRESS								
Address 190 South Broad Street, Milford, CT 06460								
				·	<u> </u>			

SEEC FORM 1A Revised September 2016 Page 3 of 4

REGISTRAT	ΓΙΟΝ ΤΥΡΕ	CANDIDATE NAME	
✓ Initial	Amendment	Win Smith	
28. CERTIFICATION			
Candidate			
I have be contified and state and demonstration of false statements that all of the designations and fourth in this can didate			

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.

Win Smith	05/17/2021
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.

Justin Liskiewicz	05/17/2021
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.

Scott F Marlow	05/18/2021
DEPUTY TREASURER SIGNATURE	DATE (mm/dd/yyyy)

THIS PAGE INTENTIONALLY LEFT BLANK

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 EXEMP	TION FROM FORMING A CANDIDATE COMMITTEE			
I hereby cer	ify 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 solely, y a toy committee or a political committee formed for a single election or primary and expendit the sole of my behavioral be reported by the committee sponsoring my candidacy. The name of this spin soles committee is:				
	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)			