

# SEEC FORM 1

STATE ELECTIONS ENFORCEMENT COMMISSION

## Registration by Candidate

Revised September 2016



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Page 1 of 4

|   |       |                                      |  |                           |          |
|---|-------|--------------------------------------|--|---------------------------|----------|
| <b>REGISTRATION TYPE</b>  |       | <b>1. ELECTION DATE</b> (mm/dd/yyyy) |  | <b>2. MUNICIPALITY</b>    |          |
| ✓ Initial   Amendment   |       | Nov 5, 2024                          |  | (If applicable)           |          |
| <b>3. OFFICE OR POSITION SOUGHT</b>   |       |                                      |  | <b>4. DISTRICT NUMBER</b> |          |
| State Representative  |       |                                      |  | (If applicable)<br>054    |          |
| <b>5. PARTY AFFILIATION</b>   |       |                                      |  |                           |          |
| Republican    ✓ Democratic    Other (Specify) _____   |       |                                      |  |                           |          |
| <b>6. CANDIDATE NAME</b>  |       |                                      |  |                           |          |
| First Name  |       | MI                                   | Last Name  |                           | Suffix   |
| Gregory   |       |                                      | Haddad   |                           |          |
| <b>7. CANDIDATE RESIDENCE ADDRESS</b>   |       |                                      | <b>8. CANDIDATE MAILING ADDRESS</b> (If different) |                           |          |
| Street Address  |       |                                      | Address  |                           |          |
| 28 Storrs Heights Rd  |       |                                      |  |                           |          |
| City  | State | Zip Code                             | City   | State                     | Zip Code |
| Storrs  | CT    | 06268                                |  |                           |          |
| <b>9. CANDIDATE TELEPHONE</b>   |       |                                      | <b>10. CANDIDATE EMAIL ADDRESS</b>                 |                           |          |
| (Include Area Code)   |       |                                      |  |                           |          |
| 860      429      8517  |       |                                      | gregory.haddad@snet.net                            |                           |          |
| <b>11. DESIGNATION OF CAMPAIGN FUNDING SOURCE</b>   |       |                                      |  |                           |          |
| <b>(Check one)</b>  |       |                                      |  |                           |          |
| ✓   <b>A.</b> I am forming a candidate committee and I am required to file a Candidate Committee Registration Statement.  |       |                                      |  |                           |          |
| Go to <b>Form 1A</b> and complete <b>pages 2 and 3</b> — Candidate Registration Statement.  |       |                                      |  |                           |          |
| <b>B.</b> I am exempt from forming a candidate committee and I am filing a Certification of Exemption from Forming a Candidate Committee.   |       |                                      |  |                           |          |
| Go to <b>Form 1B</b> and complete <b>page 4</b> — Certification of Exemption from Forming a Candidate Committee.  |       |                                      |  |                           |          |
| <b>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.</b> |       |                                      |  |                           |          |
| 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



|   |  |                       |  |                            |                   |
|---|--|-----------------------|--|----------------------------|-------------------|
| <b>REGISTRATION TYPE</b>                      |  | <b>CANDIDATE NAME</b> |  |                            |                   |
| ✓ Initial   Amendment                         |  | Gregory Haddad        |  |                            |                   |
| <b>12. COMMITTEE NAME</b>                     |  |                       |  |                            |                   |
| Haddad 2024                                   |  |                       |  |                            |                   |
| <b>13. COMMITTEE ADDRESS</b>                  |  |                       | <b>14. &amp; 15. COMMITTEE EMAIL ADDRESS &amp; WEBSITE</b> |                            |                   |
| Address<br>483 Woodland Rd                    |  |                       | Email Address<br>gregory.haddad@snet.net                   |                            |                   |
| City<br>Storrs                                |  | State<br>CT           | Zip Code<br>06268  | Website<br>gregghaddad.com |                   |
| <b>16. TREASURER NAME</b>                     |  |                       |  |                            |                   |
| First Name<br>Bruce                           |  | MI                    | Last Name<br>Clouette                                      |                            | Suffix            |
| <b>17. TREASURER RESIDENCE ADDRESS</b>        |  |                       | <b>18. TREASURER MAILING ADDRESS (If different)</b>        |                            |                   |
| Street Address<br>483 Woodland Rd             |  |                       | Address  |                            |                   |
| City<br>Storrs                                |  | State<br>CT           | Zip Code<br>06268  | City                       | State<br>Zip Code |
| <b>19. TREASURER TELEPHONE</b>                |  |                       | <b>20. TREASURER EMAIL ADDRESS</b>                         |                            |                   |
| (Include Area Code)<br>860 933 9587           |  |                       | clouette@charter.net                                       |                            |                   |
| <b>21. DEPUTY TREASURER NAME</b>              |  |                       |  |                            |                   |
| First Name<br>Nicholas                        |  | MI                    | Last Name<br>Lanza   |                            | Suffix            |
| <b>22. DEPUTY TREASURER RESIDENCE ADDRESS</b> |  |                       | <b>23. DEPUTY TREASURER MAILING ADDRESS (If different)</b> |                            |                   |
| Street Address<br>38 Hillyndale Rd            |  |                       | Address  |                            |                   |
| City<br>Storrs                                |  | State<br>CT           | Zip Code<br>06268  | City                       | State<br>Zip Code |
| <b>24. DEPUTY TREASURER TELEPHONE</b>         |  |                       | <b>25. DEPUTY TREASURER EMAIL ADDRESS</b>                  |                            |                   |
| (Include Area Code)<br>860 771 0562           |  |                       | nickklanzaa@gmail.com                                      |                            |                   |
| <b>26. DEPOSITORY INSTITUTION NAME</b>        |  |                       |  |                            |                   |
| M&T Bank                                      |  |                       |  |                            |                   |
| <b>27. DEPOSITORY INSTITUTION ADDRESS</b>     |  |                       |  |                            |                   |
| Address<br>1244 Storrs Rd., Storrs, CT 06268  |  |                       |  |                            |                   |



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# SEEC FORM 1B

## STATE ELECTIONS ENFORCEMENT COMMISSION Certification of Exemption From Forming a Candidate Committee

Revised September 2016



| REGISTRATION TYPE   | CANDIDATE NAME |
|---|----------------|
| <input type="checkbox"/> Initial <input type="checkbox"/> Amendment |                |

### 12. REASON FOR EXEMPTION 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 solely by a town committee or a political committee formed for a single election or primary and expenditures made on my behalf will be reported by the committee sponsoring my candidacy. The name of this sponsoring committee is:

\_\_\_\_\_

OR

B. I am funding my campaign entirely from my own personal funds and will not request or receive contributions from other individuals or committees and I understand that if I make expenditures exceeding one thousand dollars (\$1,000) that I shall be responsible for filing financial disclosure statements (SEEC Form 23) according to the same schedule and in the same manner as required of treasurers of candidate committees.

OR

C. I do not intend to receive or expend funds in excess of one thousand dollars (\$1,000).

OR

D. I do not intend to receive or expend any funds, including personal funds, for this campaign.

### 13. CERTIFICATION

I hereby certify and state, under penalties of false statement, that this statement of exemption from forming a candidate committee, for the reason checked above, is true, accurate and complete to the best of my knowledge and belief.

\_\_\_\_\_  
CANDIDATE SIGNATURE

\_\_\_\_\_  
DATE (mm/dd/yyyy)