

**SEEC FORM 4****EXPLORATORY COMMITTEE REGISTRATION**  
CONNECTICUT STATE ELECTION ENFORCEMENT COMMISSION

Rev. 3/07

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Do Not Mark in This Space For  
Official Use Only**REGISTRATION TYPE**

- 
- INITIAL
- 
- 
- AMENDED

<b>1. ELECTION DATE</b>		<b>2. SUBTYPE OF EXPLORATORY COMMITTEE OFFICE BEING CONSIDERED (Check one below)</b>					
(mm/dd/yyyy) Nov 2010		<input checked="" type="checkbox"/> <b>2a. Offices Include Statewide Office &amp; General Assembly</b> Including State Representative <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Including State Treasurer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			<input type="checkbox"/> <b>2b. Offices Include Statewide Office only</b> Including State Treasurer <input type="checkbox"/> Yes <input type="checkbox"/> No		
		<input type="checkbox"/> <b>2c. Offices Include General Assembly only</b> Including State Representative <input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> <b>2d. Municipal &amp; Other Offices Excluding those in Box 2a, 2b and 2c</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>3. CANDIDATE NAME</b>							
Prefix		First Themis		MI	Last Klarides		Suffix
<b>4. CANDIDATE RESIDENCE ADDRESS</b>				<b>5. CANDIDATE MAILING ADDRESS (if different)</b>			
Street Address 23 East Ct				Address			
City Derby		State CT	Zip Code 06418	City		State	Zip Code
<b>6. CANDIDATE TELEPHONE (Include Area Code)</b>				<b>7. CANDIDATE E-MAIL ADDRESS</b>			
( 203 ) 735 — 5911				tkfit@aol.com			
<b>8. PARTY AFFILIATION</b>					<b>9. NAME OF COMMITTEE</b>		
<input checked="" type="checkbox"/> Republican <input type="checkbox"/> Democratic <input type="checkbox"/> Other					Klarides 2010		
<b>10. COMMITTEE ADDRESS</b>							
Address 28 Tyler City Rd				City Orange		State CT	Zip Code 06477
<b>11. COMMITTEE E-MAIL ADDRESS</b>				<b>12. COMMITTEE WEB SITE ADDRESS</b>			
<b>13. TREASURER NAME</b>							
Prefix		First Kevin		MI	Last Houlihan		Suffix
<b>14. TREASURER RESIDENCE ADDRESS</b>				<b>15. TREASURER MAILING ADDRESS (if different)</b>			
Street Address 448 Barton Dr				Address			
City Orange		State CT	Zip Code 06477	City		State	Zip Code
<b>16. TREASURER TELEPHONE (Include Area Code)</b>				<b>17. TREASURER E-MAIL ADDRESS</b>			
( 203 ) 887 — 4557				kevinh@prodigy.net			
<b>18. DEPUTY TREASURER NAME</b>							
Prefix		First Karen		MI J.	Last Arnold		Suffix
<b>19. DEPUTY TREASURER RESIDENCE ADDRESS</b>				<b>20. DEPUTY TREASURER MAILING ADDRESS (if different)</b>			
Street Address 28 Tyler City Rd				Address			
City Orange		State CT	Zip Code 06477	City		State	Zip Code
<b>21. DEPUTY TREASURER TELEPHONE</b>				<b>22. DEPUTY TREASURER E-MAIL ADDRESS</b>			
( 203 ) 799 — 7273				gop1ka@aol.com			

**GO TO PAGE 2 TO COMPLETE DEPOSITORY AND CERTIFICATION**

*Notice: 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 4

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### CANDIDATE NAME

Themis Klarides

### 23. DEPOSITORY INSTITUTION NAME

Peoples Bank

### 24. DEPOSITORY INSTITUTION ADDRESS

Address	City	State	Zip Code
6333 Orange Center Road, Orange, CT 06477			

### 25. CERTIFICATION

I hereby certify and state, under penalties of false statement, that all of the designations set forth in this exploratory 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 such position.

Themis Klarides

CANDIDATE (SIGNATURE)

10/07/2009

DATE (mm/dd/yyyy)

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 exploratory committee. I intend to comply with all the campaign finance disclosure requirements as contained in Chapter 155 of the General Statutes, and to abide by any prohibitions, limitations or restrictions concerning campaign contributions and expenditures.

Kevin Houlihan

TREASURER (SIGNATURE)

10/06/2009

DATE (mm/dd/yyyy)

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 exploratory 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 to discharge all of the duties required of the vacating treasurer. I intend to comply with all the campaign finance disclosure requirements as contained in Chapter 155 of the General Statutes, and to abide by any prohibitions, limitations or restrictions concerning campaign contributions and expenditures.

Karen J. Arnold

DEPUTY TREASURER (SIGNATURE)

10/07/2009

DATE (mm/dd/yyyy)

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