

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

Rev. 3/07

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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 2018		<input checked="" type="checkbox"/> <b>2a. Offices Include Statewide Office &amp; General Assembly</b> Including State Representative <input type="checkbox"/> Yes <input checked="" 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 Anthony		MI	Last Hwang		Suffix
<b>4. CANDIDATE RESIDENCE ADDRESS</b>				<b>5. CANDIDATE MAILING ADDRESS (if different)</b>			
Street Address 80 Martingale Ln				Address			
City Fairfield		State CT	Zip Code 06824	City		State	Zip Code
<b>6. CANDIDATE TELEPHONE (Include Area Code)</b>				<b>7. CANDIDATE E-MAIL ADDRESS</b>			
( 203 ) 255 — 5557				tony@tonyhwang.org			
<b>8. PARTY AFFILIATION</b>				<b>9. NAME OF COMMITTEE</b>			
<input checked="" type="checkbox"/> Republican <input type="checkbox"/> Democratic <input type="checkbox"/> Other				Tony Hwang For Connecticut (Exploratory)			
<b>10. COMMITTEE ADDRESS</b>							
Address PO Box 762				City Fairfield		State CT	Zip Code 06824
<b>11. COMMITTEE E-MAIL ADDRESS</b>				<b>12. COMMITTEE WEB SITE ADDRESS</b>			
tony@tonyhwang.org				www.tonyhwang.org			
<b>13. TREASURER NAME</b>							
Prefix		First Richard		MI J.	Last Kopchyak		Suffix
<b>14. TREASURER RESIDENCE ADDRESS</b>				<b>15. TREASURER MAILING ADDRESS (if different)</b>			
Street Address 15 Pheasant Ln				Address			
City Fairfield		State CT	Zip Code 06824	City		State	Zip Code
<b>16. TREASURER TELEPHONE (Include Area Code)</b>				<b>17. TREASURER E-MAIL ADDRESS</b>			
( 203 ) 209 — 5579				rjkmak@optonline.net			
<b>18. DEPUTY TREASURER NAME</b>							
Prefix		First Pamela		MI C	Last lacono		Suffix
<b>19. DEPUTY TREASURER RESIDENCE ADDRESS</b>				<b>20. DEPUTY TREASURER MAILING ADDRESS (if different)</b>			
Street Address 68 Phyfe Rd				Address			
City Fairfield		State CT	Zip Code 06824	City		State	Zip Code
<b>21. DEPUTY TREASURER TELEPHONE</b>				<b>22. DEPUTY TREASURER E-MAIL ADDRESS</b>			
( 203 ) 450 — 3226				piacono73@gmail.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

## EXPLORATORY COMMITTEE REGISTRATION CONNECTICUT STATE ELECTION ENFORCEMENT COMMISSION

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### CANDIDATE NAME

Anthony Hwang

### 23. DEPOSITORY INSTITUTION NAME

Chase Bank

### 24. DEPOSITORY INSTITUTION ADDRESS

Address	City	State	Zip Code
2272 Black Rock Turnpike, Fairfield, CT 06824			

### 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.

Anthony Hwang  
CANDIDATE (SIGNATURE)

06/24/2015  
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.

Richard J. Kopchyak  
TREASURER (SIGNATURE)

06/24/2015  
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.

Pamela C Iacono  
DEPUTY TREASURER (SIGNATURE)

06/24/2015  
DATE (mm/dd/yyyy)

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