

# SEEC FORM 1

STATE ELECTIONS ENFORCEMENT COMMISSION

Registration b)  
Revised September 2019



File #: 2019-36  
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2 Pages

ELECTION FILINGS

Susan M. Pawluk, Town Clerk

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SUSAN M. PAWLUK  
2019 JUL 19 AM 9:37  
STRAITFORD TOWN CLERK

REGISTRATION TYPE		1. ELECTION DATE (mm/dd/yyyy)		2. MUNICIPALITY <i>(If applicable)</i>	
<input checked="" type="radio"/> Initial <input type="radio"/> Amendment		11/05/2019		Stratford	
3. OFFICE OR POSITION SOUGHT					
Board of Education					
4. DISTRICT NUMBER <i>(If applicable)</i>					
5. PARTY AFFILIATION					
<input checked="" type="radio"/> Republican <input type="radio"/> Democratic <input type="radio"/> Other <i>(Specify)</i> _____					
6. CANDIDATE NAME					
First Name	MI	Last Name	Suffix		
Alan	D	Llewelyn			
7. CANDIDATE RESIDENCE ADDRESS					
Street Address					
949 Huntington Road					
City	State	Zip Code	City	State	Zip Code
Stratford	CT	06614			
8. CANDIDATE MAILING ADDRESS <i>(If different)</i>					
Address					
9. CANDIDATE TELEPHONE					
<i>(Include Area Code)</i>					
(203) 641-0386					
10. CANDIDATE EMAIL ADDRESS					
alan.d.llewelyn@gmail.com					
11. DESIGNATION OF CAMPAIGN FUNDING SOURCE					
<b>(Check one)</b>					
<input type="checkbox"/> A. I am forming a candidate committee and I am required to file a Candidate Committee Registration Statement.  <i>Go to Form 1A and complete pages 2 and 3 — Candidate Registration Statement.</i>					
<input checked="" type="checkbox"/> B. I am exempt from forming a candidate committee and I am filing a Certification of Exemption from Forming a Candidate Committee.  <i>Go to Form 1B and complete page 4 — Certification of Exemption from Forming a Candidate Committee.</i>					
<b>Important Notice:</b> 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.					
<i>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.</i>					

# SEEC FORM 1A

## STATE ELECTIONS ENFORCEMENT COMMISSION

### Candidate Committee Registration Statement

Revised September 2016



<b>REGISTRATION TYPE</b>		<b>CANDIDATE NAME</b>	
<input type="radio"/> Initial <input type="radio"/> Amendment			
<b>12. COMMITTEE NAME</b>			
<b>13. COMMITTEE ADDRESS</b>		<b>14. &amp; 15. COMMITTEE EMAIL ADDRESS &amp; WEBSITE</b>	
Address		Email Address	
City	State	Zip Code	Website
<b>16. TREASURER NAME</b>			
First Name		MI	Last Name
			Suffix
<b>17. TREASURER RESIDENCE ADDRESS</b>		<b>18. TREASURER MAILING ADDRESS (if different)</b>	
Street Address		Address	
City	State	Zip Code	City
			State
			Zip Code
<b>19. TREASURER TELEPHONE</b>		<b>20. TREASURER EMAIL ADDRESS</b>	
(Include Area Code)			
<b>21. DEPUTY TREASURER NAME</b>			
First Name		MI	Last Name
			Suffix
<b>22. DEPUTY TREASURER RESIDENCE ADDRESS</b>		<b>23. DEPUTY TREASURER MAILING ADDRESS (if different)</b>	
Street Address		Address	
City	State	Zip Code	City
			State
			Zip Code
<b>24. DEPUTY TREASURER TELEPHONE</b>		<b>25. DEPUTY TREASURER EMAIL ADDRESS</b>	
(Include Area Code)			
<b>26. DEPOSITORY INSTITUTION NAME</b>			
<b>27. DEPOSITORY INSTITUTION ADDRESS</b>			
Address		City	State
			Zip Code

# SEEC FORM 1B

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

Revised September 2016



<b>REGISTRATION TYPE</b>	<b>CANDIDATE NAME</b>
<input checked="" type="radio"/> Initial <input type="radio"/> Amendment	Alan D. Llewellyn

### 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:

Stratford Republican Town Committee

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

07/18/19

DATE (mm/dd/yyyy)

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