

# SEEC FORM 1

STATE ELECTIONS ENFORCEMENT COMMISSION

Registrati

Revised Septe



File #: 2019-29  
07/19/2019 09:37AM

2 Pages

ELECTION FILINGS

Susan M. Pawluk, Town Clerk

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SUSAN M. PAWLUK

2019 JUL 19 AM 9:37

STRAITFORD TOWN CL

<b>REGISTRATION TYPE</b>		<b>1. ELECTION DATE</b> (mm/dd/yyyy)		<b>2. MUNICIPALITY</b>	
<input checked="" type="radio"/> Initial	<input type="radio"/> Amendment	11/05/2019		(If applicable) Stratford	
<b>3. OFFICE OR POSITION SOUGHT</b>					
Council					
<b>4. DISTRICT NUMBER</b> (If applicable) 4					
<b>5. PARTY AFFILIATION</b>					
<input checked="" type="radio"/> Republican <input type="radio"/> Democratic <input type="radio"/> Other (Specify) _____					
<b>6. CANDIDATE NAME</b>					
First Name Linnea		MI A	Last Name Scheck		Suffix
<b>7. CANDIDATE RESIDENCE ADDRESS</b>					
Street Address 72 Howard Street					
City Stratford	State CT	Zip Code 06615	City	State	Zip Code
<b>8. CANDIDATE MAILING ADDRESS</b> (If different)					
Address					
<b>9. CANDIDATE TELEPHONE</b>					
(Include Area Code) (203) 375-9933					
<b>10. CANDIDATE EMAIL ADDRESS</b>					
<b>11. DESIGNATION OF CAMPAIGN FUNDING SOURCE</b>					
<b>(Check one)</b>					
<input type="checkbox"/> <b>A.</b> 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>B.</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



REGISTRATION TYPE	CANDIDATE NAME
<input checked="" type="radio"/> Initial <input type="radio"/> Amendment	Linnea A. Scheck

**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 Linnea A. Scheck  
 RECEIVED FOR RECORD AT STRATFORD, CT  
 7/19/2019 09:37 AM  
*Steven M. Pambuck*  
 Stratford Town Clerk

7/18/19  
 DATE (mm/dd/yyyy)

