

SEEC FORM 1

STATE ELECTIONS ENFORCEMENT COMMISSION

Registration by Candidate

Revised January 2016



TOWN & CITY CLERK
 2019 APR -2 PM 12:09
J. Rosado

REGISTRATION TYPE	1. ELECTION DATE (mm/dd/yyyy)	2. OFFICE OR POSITION SOUGHT	3. DISTRICT NUMBER
<input checked="" type="checkbox"/> Initial <input type="checkbox"/> Amendment		City Council	(If applicable)

4. PARTY AFFILIATION

Republican Democratic Other (Specify) _____

5. CANDIDATE NAME

First Name	MI	Last Name	Suffix
MALY	D.	Rosado	

6. CANDIDATE RESIDENCE ADDRESS			7. CANDIDATE MAILING ADDRESS (If different)		
Street Address			Address		
134 Forster St					
City	State	Zip Code	City	State	Zip Code
Hartford	CT	06106			

8. CANDIDATE TELEPHONE	9. CANDIDATE EMAIL ADDRESS
(Include Area Code)	
860 794-1646	Rosadomalay@yahoo.com

10. DESIGNATION OF CAMPAIGN FUNDING SOURCE

(Check one)

A. I am forming a candidate committee and I am required to file a Candidate Committee Registration Statement.

Go to Form 1A and complete pages 2 and 3 — Candidate Registration Statement.

B. I am exempt from forming a candidate committee and I am filing a Certification of Exemption from Forming a Candidate Committee.

Go to Form 1B and complete page 4 — Certification of Exemption from Forming a Candidate Committee.

2019 APR -2 PM 12:06
 TOWN & CITY CLERK
J. Rosado

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.

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 January 2016



REGISTRATION TYPE		CANDIDATE NAME			
<input checked="" type="checkbox"/> Initial <input type="checkbox"/> Amendment		MALY B. ROSADO			
11. COMMITTEE NAME					
MALY ROSADO FOR CITY COUNCIL					
12. COMMITTEE ADDRESS			13. & 14. COMMITTEE EMAIL ADDRESS & WEBSITE		
Address			Email Address		
134 Forster St			MALY ROSADO FOR CITY COUNCIL@gmail.com		
City		State	Zip Code	Website	
Hartford		CT	06106		
15. TREASURER NAME					
First Name		MI	Last Name		Suffix
James		E	Woulfe		
16. TREASURER RESIDENCE ADDRESS			17. TREASURER MAILING ADDRESS (If different)		
Street Address			Address		
2 Columbia St					
City		State	Zip Code	City	State Zip Code
Hartford		CT	06106		
18. TREASURER TELEPHONE			19. TREASURER EMAIL ADDRESS		
(Include Area Code)					
860-937-7151			j.edward.woulfe@gmail.com		
20. DEPUTY TREASURER NAME					
First Name		MI	Last Name		Suffix
21. DEPUTY TREASURER RESIDENCE ADDRESS			22. DEPUTY TREASURER MAILING ADDRESS (If different)		
Street Address			Address		
City		State	Zip Code	City	State Zip Code
23. DEPUTY TREASURER TELEPHONE			24. DEPUTY TREASURER EMAIL ADDRESS		
(Include Area Code)					
25. DEPOSITORY INSTITUTION NAME					
26. DEPOSITORY INSTITUTION ADDRESS					
Address			City		State Zip Code

19 APR 12 PM 12:06
 STATE OF CONNECTICUT
 CLERK

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

27. CERTIFICATION

Candidate

I hereby certify and state, under penalties of false statement, that all of the designations set forth in this candidate 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 my appointment of them to those positions.

CANDIDATE SIGNATURE

4/1/2019
DATE (mm/dd/yyyy)

Treasurer

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 candidate committee. I certify that I am an elector in the State of Connecticut. I intend to comply with all the campaign finance registration and disclosure requirements as contained in Chapter 155 through 157 of the General Statutes, and to abide by any prohibitions, limitations or restrictions concerning campaign contributions and expenditures.

I certify that I have paid any civil penalties or forfeitures assessed pursuant to Chapters 155 to 157, inclusive.

I certify that I have not been convicted of or pled guilty or nolo contendere to, in a court of competent jurisdiction, any (A) felony involving fraud, forgery, larceny, embezzlement or bribery, or (B) criminal offense under Title 9 of the General Statutes, or that at least eight years have elapsed from the date of the conviction or plea or the completion of any sentence, whichever date is later, without a subsequent conviction of or plea to another such felony or offense.

I certify that I am not otherwise barred from serving as a treasurer by order of the State Elections Enforcement Commission.

TREASURER SIGNATURE

4/1/2019
DATE (mm/dd/yyyy)

Deputy Treasurer

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 candidate 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 for discharging all of the duties required of the vacating treasurer. I certify that I am an elector in the State of Connecticut. I intend to comply with all the campaign finance registration and disclosure requirements as contained in Chapter 155 through 157 of the General Statutes, and to abide by any prohibitions, limitations or restrictions concerning campaign contributions and expenditures.

I certify that I have paid any civil penalties or forfeitures assessed pursuant to Chapters 155 to 157, inclusive.

I certify that I have not been convicted of or pled guilty or nolo contendere to, in a court of competent jurisdiction, any (A) felony involving fraud, forgery, larceny, embezzlement or bribery, or (B) criminal offense under Title 9 of the General Statutes, or that at least eight years have elapsed from the date of the conviction or plea or the completion of any sentence, whichever date is later, without a subsequent conviction of or plea to another such felony or offense.

I certify that I am not otherwise barred from serving as a deputy treasurer by order of the State Elections Enforcement Commission.

DEPUTY TREASURER SIGNATURE

DATE (mm/dd/yyyy)

STATE ELECTIONS ENFORCEMENT COMMISSION
MAY 12 2019
12:17