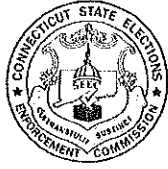


SEEC FORM 1
STATE ELECTIONS ENFORCEMENT COMMISSION

Registration by Candidate

Revised September 2016



TOWN & CITY CLERK
 2019 MAY -8 PM 2:48
John Cannon

REGISTRATION TYPE		1. ELECTION DATE (mm/dd/yyyy)		2. MUNICIPALITY			
<input checked="" type="radio"/> Initial <input type="radio"/> Amendment		November 5, 2019		(If applicable) City of Hartford, CT			
3. OFFICE OR POSITION SOUGHT						4. DISTRICT NUMBER	
Court of Common Council						(If applicable)	
5. PARTY AFFILIATION							
<input checked="" type="radio"/> Republican <input type="radio"/> Democratic <input type="radio"/> Other (Specify) _____							
6. CANDIDATE NAME							
First Name		MI	Last Name			Suffix	
Theodore		T	Cannon				
7. CANDIDATE RESIDENCE ADDRESS				8. CANDIDATE MAILING ADDRESS (If different)			
Street Address				Address			
222 Girard Avenue							
City		State	Zip Code	City		State	Zip Code
Hartford		CT	06105				
9. CANDIDATE TELEPHONE				10. CANDIDATE EMAIL ADDRESS			
(Include Area Code)							
860 335 1810				tedtcannon@yahoo.com			

11. 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.

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 September 2016



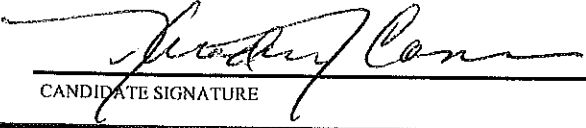
REGISTRATION TYPE		CANDIDATE NAME			
<input checked="" type="radio"/> Initial <input type="radio"/> Amendment		Theodore T. Cannon			
12. COMMITTEE NAME					
Cannon For Council					
13. COMMITTEE ADDRESS			14. & 15. COMMITTEE EMAIL ADDRESS & WEBSITE		
Address 222 Girard Avenue			Email Address		
City Hartford		State CT	Zip Code 06105	Website	
16. TREASURER NAME					
First Name John		MI	Last Name Monacella		Suffix
17. TREASURER RESIDENCE ADDRESS			18. TREASURER MAILING ADDRESS (if different)		
Street Address 100 Wells Street Unit 820			Address		
City Hartford		State CT	Zip Code 06103	City	State Zip Code
19. TREASURER TELEPHONE <i>(Include Area Code)</i>		20. TREASURER EMAIL ADDRESS			
860 278 9321		jmonacella5522@gmail.com			
21. DEPUTY TREASURER NAME					
First Name		MI	Last Name		Suffix
22. DEPUTY TREASURER RESIDENCE ADDRESS			23. DEPUTY TREASURER MAILING ADDRESS (if different)		
Street Address			Address		
City		State	Zip Code	City	State Zip Code
24. DEPUTY TREASURER TELEPHONE <i>(Include Area Code)</i>		25. DEPUTY TREASURER EMAIL ADDRESS			
26. DEPOSITORY INSTITUTION NAME					
Bank of America					
27. DEPOSITORY INSTITUTION ADDRESS					
Address 600 Silas Deane Hwy.			City Wethersfield		State CT Zip Code 06109

REGISTRATION TYPE	CANDIDATE NAME
<input checked="" type="radio"/> Initial <input type="radio"/> Amendment	Theodore T. Cannon

28. 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

5-8-19
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

5-8-19
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)