SEEC FORM 1
STATE ELECTIONS ENFORCEMENT COMMISSION

Registration by Candidate

Revised January 2021



Page 1 of 4

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REGISTRATION TYPE 1	I. ELECTION DATI	E (mm/dd/yy	(עע	2. MUNICIPALITY			इंक्टी	<u> </u>	30
∏ Initial ☐ Amendment	Nov 7,	203	13	(If applicable) HARTI	FORD		ent and		
3. OFFICE OR POSITION SO	UGHT					4. DISTR	ICT NUM	IBER	
MAY	YOR			To the state of th		(If applicable	8 4	13	i O m
5. PARTY AFFILIATION	21.00						450,	ယ	
Ŋ Republican I	□ Democratic		Other (Specij	(b)					
6. CANDIDATE NAME									1000
First Name MICHAEL			М	Mc GA	RRY			Suffix	:
7. CANDIDATE RESIDENCE	ADDRESS			8. CANDIDATE MAII	ING ADDRESS	(If different)			
31 WOODLAND ST	REET, #1	- 10-1-	 	Address					
City		State 2	Zip Code	City			State	. Zip Cod	de
HARTFORD		CT	06105	Commence of the Commence of th			The Prince Land Stranger	1111111111	
9. CANDIDATE TELEPHONE	<u> </u>	10. CANI	DIDATE EM	IAIL ADDRESS		50 (50) (50)		<u> </u>	
(10clyde Area Code) (860) 422-7	7937	mil	kem1	944@avl.	Com			·	
11. DESIGNATION OF CAMP	AIGN FUNDING S	OURCE						813 4	
(Check one)					<del></del>				
☐ A. I am formin Registration S	Statement.			am required to file		e Comm	ittee		
	t from forming a g a Candidate Co			mittee and I am fi	ling a Certifi	cation o	f Exem <sub>j</sub>	ption	
Go to Form 11	B and complete p	age 4 —	- Certificati	ion of Exemption from	m Forming a C	'andidate	Commit	tee.	
of Candidate Comp	mittee," <i>or</i> Form	1B "Ex	cemption fi	this page <i>together</i> irom Forming a Can andidate to a manda	didate Comm	ittee," wi	ithin 10 (		

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.

See Section 9-623(b), Connecticut General Statutes.

## SEEC FORM 1A STATE ELECTIONS ENFORCEMENT COMMISSION Candidate Committee Registration Statement



Revised January 2021

REGISTRATION TYPE CANDIDATE NA	AME				
Initial - Amendment MICI-	IAEL	- Mc	GARRY		
12. COMMITTEE NAME					
			•		
13. COMMITTEE ADDRESS			14, & 15, COMMITTEE EMAIL ADDRESS 奏	WEBSITE	
Address			Email Address		
City	State	Zip Code	Website		
16. TREASURER NAME					
First Name		МІ	Last Name		Suffix
17. TREASURER RESIDENCE ADDRESS			18. TREASURER MAILING ADDRESS (1) differ	ent)	
Street Address			Address		
City	State	Zip Code	City	State	Zip Code
19. TREASURER TELEPHONE	20, TRE	ASPRER EM	AIL ADDRESS		
(Include Area Code)					
21. DEPUTY TREASURER NAME	/	9 9 6 9 8			
First Name		МІ	Last Name		Suffix
22. DEPUTY TREASURER RESIDENCE ADDR	ESS		23. DEPUTY TREASURER MAILING ADDRI	CSS (If differen	n)
Street Address			Address		
/					
City	State	Zip Code	City	State	Zip Code
City  24. DEPUTY TREASURER TELEPHONE			City URER EMAIL ADDRESS	State	Zip Code
				State	Zip Code
24. DEPUTY TREASURER/TELEPHONE				State	Zip Code
24. DEPUTY TREASURER FELEPHONE (Include Area Code)				State	Zip Code
24. DEPUTY TREASURER FELEPHONE (Include Area Code)				State	Zip Code
24. DEPUTY TREASURER TELEPHONE (Include Area Code)  26. DEPOSITORY INSTITUTION NAME			URER EMAIL ADDRESS		Zip Code

Revised January 2021		PARTICIPAN VALUE MARKANINA AND CONTROL OF THE CONTR	
REGISTRATION TYPE	CANDIDATE NAME		
∏ Initial ☐ Amendment	MICHAEL	MCGARRY	,
28. CERTIFICATION		<u> </u>	/
committee registration this statement include	on statement are true and accurate my certification to the fact the	atement, that all of the designations set forth in this candidate ate to the best of my knowledge and belief, and further, that nat any individual designated herein to serve as my treasurer tance of my appointment of them to those positions.	
CANDIDATE SIGNATURE		DATE (mm/dd/yyyy)	
Treasurer			
candidate to serve as elector in the State of requirements as contilimitations or restrict.  I certify that I have p I certify that I have n jurisdiction, any (A) under Title 9 of the C plea or the completion another such felony of	the candidate's designated treas f Connecticut. I intend to complained in Chapter 155 through 15 tions concerning campaign contraid any civil penalties or forfeit to been convicted of or pled guifelony involving fraud, forgery, General Statues, or that at least en of any sentence, whichever days or offense.	atement, that I have accepted my appointment by the surer of this candidate committee. I certify that I am an ally with all the campaign finance registration and disclosure 57 of the General Statutes, and to abide by any prohibitions, ributions and expenditures.  The acceptance of the Chapters 155 to 157, inclusive.  The acceptance of the competent of the conviction of	
TREASURER SIGNATURE		DATE (mm/dd/yyyy)	
candidate to serve as and accept that, in the automatically become that I am an elector in disclosure requireme prohibitions, limitated I certify that I have pure prohibition, any (A) under Title 9 of the Coplea or the completion another such felony of I certify that I am not Enforcement Commi	the candidate's designated depute event of a vacancy caused by the event of Connecticut. I into the state of the	attement, that I have accepted my appointment by the cuty treasurer of this candidate committee, and I understand the treasurer's death, incapacity or resignation, I shall I of the duties required of the vacating treasurer. I certify tend to comply with all the campaign finance registration and through 157 of the General Statutes, and to abide by any ampaign contributions and expenditures.  The same assessed pursuant to Chapters 155 to 157, inclusive, altronometric to, in a court of competent, larceny, embezzlement or bribery, or (B) criminal offense eight years have elapsed from the date of the conviction or attended is later, without a subsequent conviction of or plea to	
DEPUTY TREASURER SIGNA	TURE	DATE (mm/dd/yyyy)	

## **SEEC FORM 1B**

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



Revised January 2021

REG	ISTRATION TYPE CANDIDATE NAME
₩ In	
12, RI	EASON 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:
	OR
	<b>B.</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. CI	ERTIFICATION
	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.     Manual Manual Candidate Signature   Candidate Si