

SEEC FORM 4

EXPLORATORY COMMITTEE REGISTRATION
CONNECTICUT STATE ELECTION ENFORCEMENT COMMISSION
 Rev. 3/07
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REGISTRATION TYPE

- ☐ INITIAL
☐ AMENDED

1. ELECTION DATE (mm/dd/yyyy) 11/3/15		2. SUBTYPE OF EXPLORATORY COMMITTEE OFFICE BEING CONSIDERED (Check one below)			
<input type="checkbox"/> 2a. Offices Include Statewide Office & General Assembly Including State Representative <input type="checkbox"/> Yes <input type="checkbox"/> No Including State Treasurer <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> 2b. Offices Include Statewide Office only Including State Treasurer <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> 2d. Municipal & Other Offices Excluding those in Box 2a, 2b and 2c <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> 2c. Offices Include General Assembly only Including State Representative <input type="checkbox"/> Yes <input type="checkbox"/> No			
3. CANDIDATE NAME					
Prefix Mr	First Michael	MI P	Last Speer	Suffix	
4. CANDIDATE RESIDENCE ADDRESS			5. CANDIDATE MAILING ADDRESS (if different)		
Street Address 37 Elm Street			Address NOV 07 2014 TOWN CLERK'S OFFICE EAST HAVEN, CONN.		
City East Haven	State CT	Zip Code 06512	City	Zip Code	
6. CANDIDATE TELEPHONE (Include Area Code)			7. CANDIDATE E-MAIL ADDRESS		
(203) 1627-6058			Michael.Speer2015@gmail.com		
8. PARTY AFFILIATION			9. NAME OF COMMITTEE		
<input type="checkbox"/> Republican <input checked="" type="checkbox"/> Democratic <input type="checkbox"/> Other			Speer 2015		
10. COMMITTEE ADDRESS					
Address 39 Elm Street			City East Haven	State CT	Zip Code 06512
11. COMMITTEE E-MAIL ADDRESS			12. COMMITTEE WEB SITE ADDRESS		
N/A			N/A		
13. TREASURER NAME					
Prefix Mrs.	First Jan	MI A	Last Lougat	Suffix	
14. TREASURER RESIDENCE ADDRESS			15. TREASURER MAILING ADDRESS (if different)		
Street Address 39 Elm Street			Address		
City East Haven	State CT	Zip Code 06512	City	State	Zip Code
16. TREASURER TELEPHONE (Include Area Code)			17. TREASURER E-MAIL ADDRESS		
(203) 468-8786			JPLougat@aol.com		
18. DEPUTY TREASURER NAME					
Prefix Ms.	First Ravae	MI C	Last Cilio	Suffix	
19. DEPUTY TREASURER RESIDENCE ADDRESS			20. DEPUTY TREASURER MAILING ADDRESS (if different)		
Street Address 439 Short Beach Rd.			Address		
City East Haven	State CT	Zip Code 06512	City	State	Zip Code
21. DEPUTY TREASURER TELEPHONE			22. DEPUTY TREASURER E-MAIL ADDRESS		
(203) 843-1351			ravaecilio@yahoo.com		

GO TO PAGE 2 TO COMPLETE DEPOSITORY AND CERTIFICATION

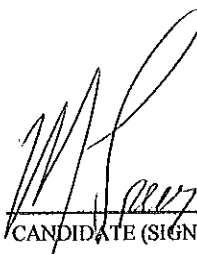
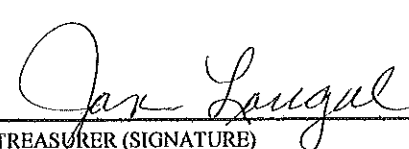
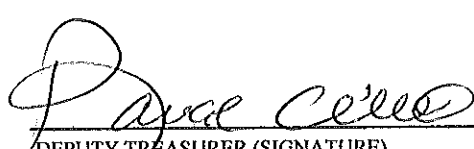
Notice: Making a false statement on this form may subject you to criminal penalties, including but not limited to, imprisonment for up to one year or a fine of up to two thousand dollars, or both.

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CANDIDATE NAME Michael P. Speer			
23. DEPOSITORY INSTITUTION NAME Citizens Bank			
24. DEPOSITORY INSTITUTION ADDRESS			
Address 2163 Hemingway Avenue	City East Haven	State CT	Zip Code 06512
25. CERTIFICATION			
<p>I hereby certify and state, under penalties of false statement, that all of the designations set forth in this exploratory 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 such position.</p> <div style="text-align: right; margin-top: 100px;"> _____ CANDIDATE (SIGNATURE) <div style="display: inline-block; vertical-align: bottom; margin-left: 20px;">11/7/14 _____ DATE (mm/dd/yyyy)</div></div>			
<p>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 exploratory committee. I intend to comply with all the campaign finance disclosure requirements as contained in Chapter 155 of the General Statutes, and to abide by any prohibitions, limitations or restrictions concerning campaign contributions and expenditures.</p> <div style="text-align: right; margin-top: 100px;"> _____ TREASURER (SIGNATURE) <div style="display: inline-block; vertical-align: bottom; margin-left: 20px;">11.7.14 _____ DATE (mm/dd/yyyy)</div></div>			
<p>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 exploratory 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 to discharge all of the duties required of the vacating treasurer. I intend to comply with all the campaign finance disclosure requirements as contained in Chapter 155 of the General Statutes, and to abide by any prohibitions, limitations or restrictions concerning campaign contributions and expenditures.</p> <div style="text-align: right; margin-top: 100px;"> _____ DEPUTY TREASURER (SIGNATURE) <div style="display: inline-block; vertical-align: bottom; margin-left: 20px;">11/7/14 _____ DATE (mm/dd/yyyy)</div></div>			

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