

# Individual Contributor Certification Form

Make checks payable to  
Newington First 2011

mail to: c/o Neil Ryan  
237 Brockett Street  
Newington, CT 06111

**DON'T FORGET TO COMPLETE & SIGN THIS FORM**

|                                |       |                      |   |
|--------------------------------|-------|----------------------|---|
| NAME OF INDIVIDUAL CONTRIBUTOR |       |                      | CONTRIBUTION AMOUNT   |
| RESIDENTIAL ADDRESS*           |       |                      | PHONE NUMBER  |
| CITY                           | STATE | ZIP CODE             | Are you 18 or older?<br>Yes <input type="checkbox"/> No <input type="checkbox"/> If you are not 18 or older please list your age: _____ |
| EMPLOYER                       |       | PRINCIPAL OCCUPATION |   |

**Please answer each of the following:**

Yes  No  Are you a lobbyist\*\*?

Yes  No  Are you the spouse or dependent child of a lobbyist?

**If this is a contribution to a candidate committee or exploratory committee for Chief Executive Officer of a municipality (i.e. mayor, first selectman) answer the following:**

Yes  No  Do you or a business with which you are associated\*\*\* have a contract with the town, city or borough in which the candidate is running that is valued at more than five thousand dollars?

**CERTIFICATION**

I hereby certify and state that all of the information disclosed by me and set forth above on this contributor card is true and accurate to the best of my knowledge and belief. I certify that I am either a United States citizen or a foreign national with permanent resident status in the United States. I certify that this contribution is being made from my personal funds, is not being reimbursed in any manner, is not being made as a loan, and is not an otherwise prohibited contribution

\_\_\_\_\_  
SIGNATURE OF CONTRIBUTOR

\_\_\_\_\_  
DATE (mm/dd/yyyy)

\* You may enter an alternate address in lieu of your residential address **only if** you are admitted into the Address Confidentiality Program pursuant to General Statutes § 54-240(a) or if you are one of the individuals with protected address status articulated in General Statutes §1-217.

\*\* The law requires disclosure for each itemized contribution made by a lobbyist, the spouse of a lobbyist or any dependent child of a lobbyist who resides in the lobbyist's household. General Statutes § 9-608(c) (1)(I). The term lobbyist includes anyone required by law to register as a lobbyist with the Office of State Ethics because they (a) expend or agree to expend \$2,000 or more in a calendar year on lobbying; OR (b) receive or agree to receive \$2,000 or more in a calendar year for lobbying. General Statutes § 1-91. Lobbyists **may** contribute to candidate committees and exploratory committees for municipal office.

\*\*\* A "business with which you are associated" refers to any business in which the contributor is a director, officer, owner, limited or general partner, or stockholder of 5% or more of the total stock of the business.