

**SEEC FORM 1**  
**STATE ELECTIONS ENFORCEMENT COMMISSION**  
**Registration by Candidate**

Revised January 2025



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 TOWN AND CITY CLERK

<b>REGISTRATION TYPE</b>	<b>1. ELECTION DATE</b> (mm/dd/yyyy)	<b>2. MUNICIPALITY</b>
<input type="checkbox"/> Initial <input checked="" type="checkbox"/> Amendment	11/04/2025	(If applicable) BRISTOL

<b>3. OFFICE OR POSITION SOUGHT</b>	<b>4. DISTRICT NUMBER</b>
MAYOR	(If applicable)

**5. PARTY AFFILIATION**

Republican     Democratic     Other (Specify) \_\_\_\_\_

**6. CANDIDATE NAME**

First Name ELLEN	MI A	Last Name ZOPPO-SASSU	Suffix
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<b>7. CANDIDATE RESIDENCE ADDRESS</b>			<b>8. CANDIDATE MAILING ADDRESS</b> (If different)		
Street Address 47 KORY LANE			Address		
City BRISTOL	State CT	Zip Code 06010	City	State	Zip Code

<b>9. CANDIDATE TELEPHONE</b>	<b>10. CANDIDATE EMAIL ADDRESS</b>
(Include Area Code) (860) 620-3110	ellenzoppo@comcast.net

**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 January 2025



<b>REGISTRATION TYPE</b>		<b>CANDIDATE NAME</b>			
<input type="checkbox"/> Initial <input checked="" type="checkbox"/> Amendment		ELLEN A. ZOPPO-SASSU			
<b>12. COMMITTEE NAME</b>					
ELLEN FOR MAYOR					
<b>13. COMMITTEE ADDRESS</b>			<b>14. &amp; 15. COMMITTEE EMAIL ADDRESS &amp; WEBSITE</b>		
Address 47 KORY LANE			Email Address ellenzoppo@comcast.net		
City BRISTOL	State CT	Zip Code 06010	Website www.EllenforBristol.com		
<b>16. TREASURER NAME</b>					
First Name WYLAND		MI D	Last Name CLIFT		Suffix
<b>17. TREASURER RESIDENCE ADDRESS</b>			<b>18. TREASURER MAILING ADDRESS (If different)</b>		
Street Address 1175 S MAIN ST #9			Address PO BOX 1		
City PLANTSVILLE	State CT	Zip Code 06479	City PLANTSVILLE	State CT	Zip Code 06479
<b>19. TREASURER TELEPHONE</b>		<b>20. TREASURER EMAIL ADDRESS</b>			
(Include Area Code) (860) 310-5681		wclift@CliftLawCT.com			
<b>21. DEPUTY TREASURER NAME</b>					
First Name Debra		MI A	Last Name SCHUR		Suffix
<b>22. DEPUTY TREASURER RESIDENCE ADDRESS</b>			<b>23. DEPUTY TREASURER MAILING ADDRESS (If different)</b>		
Street Address 6 PILGRIM RD			Address		
City BRISTOL	State CT	Zip Code 06010	City	State	Zip Code
<b>24. DEPUTY TREASURER TELEPHONE</b>		<b>25. DEPUTY TREASURER EMAIL ADDRESS</b>			
(Include Area Code) (860) 329-5144					
<b>26. DEPOSITORY INSTITUTION NAME</b>					
WEBSTER BANK, N.A.					
<b>27. DEPOSITORY INSTITUTION ADDRESS</b>					
Address 132 MAIN ST			City SOUTHINGTON		State CT    Zip Code 06489

REGISTRATION TYPE	CANDIDATE NAME
<input type="checkbox"/> Initial <input checked="" type="checkbox"/> Amendment	ELLEN A. ZOPPO-SASSU

**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.

Ellen Zoppo Sassu  
CANDIDATE SIGNATURE

5/29/25  
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.

Hyland Dale Cleft  
TREASURER SIGNATURE

5/29/25  
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.

Sebat Schu  
DEPUTY TREASURER SIGNATURE

5/29/25  
DATE (mm/dd/yyyy)