

## Certificate of Party Endorsement

## November 6th, 2018 State Election

Who uses this form? Candidates who have been ENDORSED by the party.

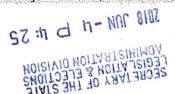
Where do I file the form? Office of the Secretary of the State Attn: LEAD 30 Trinity St. Hartford, CT. 06106

When do I file? Before 4pm on the 14th day after the meeting.

Note if the 14th day is a Saturday, Sunday or legal holiday, file before 4pm on the next business day.

	Office Select one of the following:		
1	X CT Assembly District # US Congressional District #		
	CT Senatorial District # Probate District #		
	Municipal Office of in the town of		
	Meeting of the Democratic party  Select one of the following:		
2	Town Committee Meeting Caucus		
	Town Convention  Party Convention  OS/29/2018  Meeting location and town  Date of Meeting  MM/DD/MY  MM/DD/MY  OT  Date of Meeting		
	About the candidate  Print candidate name in block letters as it will appear on the ballot		
	Candidate name Robin E. Comey		
3	Address (09 Shore br.		
	City/townBranford CT Zip Code CL6405		
	I declare that Candidate Signature    Value   Value		
	X Pa Comes 5/20/2000		
	X I authorize my name to appear on the ballot  Date    X   I authorize my name to appear on the ballot    X   I authorize my name to appear on the ballot    X   I authorize my name to appear on the ballot    X   I authorize my name to appear on the ballot    X   I authorize my name to appear on the ballot		
	Attested by		
4.	Must be signed by the chairman, presiding officer, OR secretary of convention Select on of the following		
	Chairman/presiding office of convention Signature		
	Secretary of Convention X		

If this form is not filed with the Office of the Secretary of the State, then this endorsement is invalid.



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**November 6th, 2018 State Election** 

SECRETARY OF THE STATE LEGISLATION & ELECTIONS ADMINISTRATION DIVISION

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Note if the 14th day is a Saturday, Sunday or legal holiday, file before 4pm on the next business day.

	Office Select one of the following:			
1	CT Assembly District # 102	US Congressional District #		
	CT Senatorial District #			
	Municipal Office of	in the town of		
10.1	Meeting of the Republican	party		
	Select one of the following:			
2	Town Committee Meeting	Caucus		
	Town Convention	Party Convention		
	Donorars Sona Rosen Mainst brunful	3 . , , ,		
1 7 3 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	Meeting location and town	Date of Meeting MM/DD/YYYY		
10040	About the candidate			
	e hallot			
The second	Print candidate name in block letters as it will appear on the ballot  Candidate name Robert Improto			
3	Address 17 Nicola Rd			
	City/town Branford	CT Zip Code <u>OG YOS</u>		
	I declare that	Candidate Signature		
	I was endorsed for office by the Party listed on this form	VI Della		
Y V	X I authorize my name to appear on the ballot	Value (1)		
		Date MM/DD/YYYY		
	Attested by			
	Must be signed by the chairman, presiding officer, OR secretary of convention  Select on of the following			
4 -		Circumstante		
	Chairman/presiding office of convention	Signature		
	Secretary of Convention	x		
		1		