Certificate of Party Endorsement

November 6th, 2018 State Election

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

18 MAY 17 P 2: 39

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: | | | |
|--|-------------|-----------------------------|--------------------------|
| TO Assembly District # 1114 | i, E | US Congressional District # | |
| CT Senatorial District # | in | the town of | |
| Meeting of the DEMOCRATIC | | par | ty |
| Select one of the following: 2 Town Committee Meeting | Ē | Caucus | |
| Town Convention | X | Party Convention | 05 16 2010 |
| Hotchkiss Hose - Derby, CT Meeting location and town | Da | Pate of Meeting | 05-16-2018 MM/DD/YYYY |
| About the candidate Print candidate name in block letters as it will appear on the ballot Candidate name Mary Welander | | | |
| Address 377 Dogwood Road | | | 06177 |
| City/town Orange | CT | Zip Code | 06477 |
| I declare that | | Candidate Signa | ature |
| X I authorize my name to appear on the ballot | | X Mau Date 5-16-20 | 18 MM/DD/YYY |
| | | Date 5(-16-20) | 10 MivyDD/1111 |
| Attested by Must be signed by the chairman, presiding officer, Ol Select on of the following | R secretary | | 03-231-4111 |
| X Chairman/presiding office of convention | | Signature 20 | |
| Secretary of Convention | | × Hla | e J. Saroflo |

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| | Office | COSCIII CO |
|------------|---|--|
| | Select one of the following: | |
| 1 | CT Assembly District # | US Congressional District # |
| | CT Senatorial District # | |
| | Municipal Office of | in the town of |
| | Meeting of the PERITAL. | party |
| | Select one of the following: | |
| 2 | Town Committee Meeting | Caucus |
| | Town Convention | Party Convention 05:16.18 |
| | High Plans Community Room | Date of Meeting MM/DD/YYYY |
| -17 | Meeting location and town | |
| | About the candidate Print candidate name in block letters as it will appear on the | e ballot |
| | The six Marie | |
| | | |
| 3 | Address 33 EAST COURT | 20118 |
| | City/town DBBby | CT Zip Code 00410 |
| | I declare that | Candidate Signature |
| | I was endorsed for office by the Party listed on this form | × Theres Realets |
| A STATE OF | I authorize my name to appear on the ballot | the state of the s |
| | | Date MM/DD/YYYY |
| | Attested by | |
| | Must be signed by the chairman, presiding officer, OR second | retary of convention |
| 4 | Select on of the following | |
| 4 | Chairman/presiding office of convention | Signature |
| | Secretary of Convention | x M Dan Was |