© Certificate of Party Endorsement

2018 MAY 25 P 3: 13

November 6th, 2018 State Election

SECRETARY OF THE STATE LEGISLATION & ELECTIONS ANALYSIS FRAHOM TRUETON

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.

		A Some
	Office Select one of the following	US Congressional 2nd
1	CT Assembly District #	District #
	CT Senatorial District #	
	Municipal Office of	in the town of
	Meeting of the Republican Select one of the following:	party
2	Town Committee Meeting	Caucus
	Town Convention	Party Convention 5-11-2018
	Fox woods LEDYARI) Meeting location and town	Date of Meeting MM/DD/YYYY
3	About the candidate Print candidate name in block letters as it will appear on the Candidate name Candidate name Candidate name Candidate name Candidate name Candidate name City/town City/town City/town I declare that X I was endorsed for office by the Party listed on this form X I authorize my name to appear on the ballot	
	Tauthonze my hame to appear on the bandt	Date MM/DD/YYYY
4	Attested by Must be signed by the charman, presiding officer, OR second selection of the following Chairman/presiding office of convention Secretary of Convention	Signature X

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	Office	CALL THE STATE OF	
	Select one of the following:	아내는 경우를 하는 것이 아무리를 하는 것이 없는데 얼마나요?	
1	CT Assembly District #	X 1156 2	
		US Congressional District #	
	CT Senatorial District #	Probate District #	
	Municipal Office of	in the town of	
	Municipal Office of	in the town of	
50.5	D		
2	Meeting of the <u>Vemocratic</u>	party	
	Select one of the following:		
	Town Committee Meeting	Caucus	
	Town Convention	Party Convention	
		05/19/2010	
	355 High St, Willimantic	Date of MeetingMM/DD/YYYY	
	Meeting location and town		
	About the candidate		
	Print candidate name in block letters as it will appear on the ballot		
3			
	Candidate name JOE COUFFREY		
	Address 9 ToBias Court		
	City/town Vernon C	T Zip Code 06 C66	
	2.3/12.11.		
	I declare that	Candidate Signature	
	I was endorsed for office by the Party listed on this form		
		X V C +	
	X I authorize my name to appear on the ballot	our ley	
		Date MM/DD/YYYY	
	Attasted by		
	Attested by		
	Must be signed by the chairman, presiding officer, OR secre	etary of convention	
	Select on of the following		
4	Chairman/prociding office of convention	Signatura	
	Chairman/presiding office of convention	Signature	
	Secretary of Convention	v()	
		"Mus reals	

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