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.

| Vikinings again | | |
|-----------------|---|--|
| | Office Select one of the following: | ADHIER TO SECOND |
| 1 | CT Assembly District # 30th | US Congressional District # |
| | CT Senatorial District # | |
| | Municipal Office of | in the town of T |
| | Meeting of the Democratic | party See 8 |
| | Select one of the following: | |
| 2 | Town Committee Meeting | Caucus ` |
| | Town Convention | Party Convention - 111 110 |
| | Pine LOFF Pizza, 1474 Berlin Inpk Meeting location and town Berlin CT | Date of Meeting 5 / 1 L / 18 MM/DD/YYYY |
| | About the candidate | |
| | Print candidate name in block letters as it will appear on the | e ballot |
| 3 | Candidate name Jue Arcsimou | |
| | Address 33 Langdon Ct | #F-3 |
| | City/town Bellin c | T Zip Code <u>06037</u> |
| | I declare that | Candidate Signature |
| | Was endorsed for office by the Party listed on this form | \mathbf{x} () () |
| | authorize my name to appear on the ballot | The state of the s |
| | | Date MM/DD/YYY/ |
| 4 | Attested by | |
| | Must be signed by the chairman, presiding officer, OR secre Select on of the following | tary of convention |
| | Select of the following | |
| | Chairman/presiding office of convention | Signature |
| -11 | Secretary of Convention | * hothle Donal My |
| | | |

Replacement Committee. 30th District

Certificate of Party Endorsement

November 6th, 2018 State Election

Mike Gaghardi for 30th House Representative

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.

| 1 | Office Select one of the following: CT Assembly District # | US Congressional District # Probate - Multi Town District # | |
|---|--|---|--|
| | | in the town of | |
| | Meeting of the Reducement Committee of the Selectione of the following: | 10 30th District party | |
| 2 | Town Committee Meeting | Caucus | |
| , | Town Convention [Berlin CT Meeting location and town | Party Convention Date of Meeting $ \frac{10/16/2-019}{MM/DD/YYYY} $ | |
| 3 | About the candidate rint candidate name in block letters as it will appear on the ballot Candidate name Michael Gagliardi Address 272 Alling 5+ | | |
| | City/town Reduce CT | Zip Code 06037 | |
| | I declare that | Candidate Signature | |
| | I was endorsed for office by the Party listed on this form X I authorize my name to appear on the ballot | x Milyati | |
| | | Date / / MM/DD/YYYY | |
| 4 | Attested by Must be signed by the chairman, presiding officer, OR secretary Select on of the following Chairman/presiding office of convention Secretary of Convention | Signature X | |
| | (| CARREL STRATEGICAL STRATEGICA | |

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

ZN & d 91 100 8107

SECRETARY OF THE STRIE LEGISLATION & ELECTIONS MOISIVIO MOITARTRIMOA