Certificate of Party Endorsement

November 6th, 2018 State Election

2018 JUN - 1 P 2: 47

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	CT Assembly District #	US Congressional District #	
	CT Senatorial District #	7 cth 01 1 1	
	Municipal Office of Judge Of Probate in	the town of SU" District	
	Meeting of the Republican party Select one of the following:		
2	Town Committee Meeting	Caucus	
	Town Convention	Party Convention 5/14/1018	
Z	134 Gratar Long Point Road Gratar CT Da Meeting location and town	ate of Meeting MM/DD/YYYY MM/DD/YYYY	
A STATE	About the candidate		
Print candidate name in block letters as it will appear on the ballot			
	Candidate name Salvatore Kitaco	.0	
3	Address 149 Liberty Street		
	City/town Pawcatuck CT	Zip Code <u>06399</u>	
	I declare that	Candidate Signature	
	I was endorsed for office by the Party listed on this form		
		05/2400	
	X I authorize my name to appear on the ballot	Date MM/DD/YYYY	
	Attested by	of convention	
4 .	Must be signed by the chairman, presiding officer, OR secretary Select on of the following	Of CONVENTION	
	Chairman/presiding office of convention	Signature	
	Secretary of Convention	* ttd xmman	

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SECRETARY OF THE STATE LEGISLATION & ELECTIONS ADMINISTRATION DIVISION

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	Office Select one of the following:		
Ĺ	CT Assembly District #	US Congressional District #	
		E in the town of GROTON, LEDYARD, STUNINGTON NORTH STONINGTON	
	Meeting of the DEMOCRATIC Select one of the following:		
2	Town Committee Meeting	Caucus	
	Town Convention	Party Convention	
	102 NEWTOWN RD., GROTON, CT Meeting location and town	Date of Meeting 05 23 2018 MM/DD/YYYY	
	About the candidate Print candidate name in block letters as it will appear on the ballot		
3	Candidate name NICHOLAS KEPPLE		
	Address 224 N. MAIN STREE		
	City/town STONINGTON C	T Zip Code <u>((4378</u>	
	I declare that	Candidate Signature	
	X I authorize my name to appear on the ballot	Date 5/23/2018 MM/DD/MYY	
11,01		Date 5/23/2018 MM/DD/YYY	
7	Attested by Must be signed by the chairman, presiding officer, OR secretary of convention Select on of the following		
4	Chairman/presiding office of convention	Signature	
	Secretary of Convention	x B	