# Certificate of Party Endorsement

2018 MAY 18 A 10: 16

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. 06 106 STON 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.	C. Fischisty District #	Ongressional District #	
	CT Senatorial District #		
	Municipal Office of in the tow	nor Stonington and North Stoningto	
	Meeting of the Stanington and North Stanington Democrate party Select one of the following:		
2	2 Town Committee Meeting Caucu	s	
	Town Convention Party C	convention  os/16/2018  eeting MM/DD/YYYY	
	About the candidate		
	Print candidate name in block letters as it will appear on the ballot		
3	Candidate name Kate Rotella		
	Address 170 Long Wharf Drive		
	City/town Mystic CT Zip Co	ode <u>0(a355</u>	
		idate Signature	
	X I was endorsed for office by the Party listed on this form		
	X I authorize my name to appear on the ballot	en pulla	
	Date	MM/DD/YYYY 05/16/2018	
	Attested by		
	Must be signed by the chairman, presiding officer, OR secretary of convention Select on of the following		
4	4 Chairman/presiding office of convention Signat	ure	
Will William	Secretary of Convention X	Rogarda	

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

### **Certificate of Eligibility for Primary**

November 6th, 2018 State Election

2018 MAY 18 A 10: 16

Who uses this form? Candidates who are running for multi-town district office, have not been endorsed by the party, and received 15% of the votes at the convention 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: CT Assembly District # **US** Congressional District # CT Senatorial District # Convention of the Stonington and North Stonington Complete the following: onington, cT 06378 2 Convention Location and Town **Date of Convention** About the candidate Print candidate name in block letters as it will appear on the ballot 3 Chris Donahue Candidate name 41 Mechanic Apt 2 Address 06379 Pawcatuck, CT City/town Zip Code Candidate Signature I declare that X I received at least 15% of the votes from the convention delgates voting. X I am an enrolled member of the party in the district listed above. X I consent to be a candidate for the office and party listed above Date X I authorize my name to appear on the ballot. Attested by Must be signed by the chairman, presiding officer, OR secretary of convention Select on of the following Chairman/presiding office of convention Signature GOORS Secretary of Convention



## **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.

to states	Office				
	Selections of the following:				
1	X CT A:sembly District # 43 Pd Us Congressional District #				
	CT Senatorial District #				
	Municipal Office of in the town of				
	Meeting of the Republican party Selections of the following:				
2	Town Committee Meeting Caucus				
	Brouch Hall Clurch Stay an CT Date of Meeting  MM/DD/YYY				
	Meeting location and town				
	About the candiciate  Print candidate name in block letters as it will appear on the ballot  Candidate name  SHAUN MASTROIANNI				
3	Address 5 Union Staget				
	City/town Staristan CT Zip Code 06378				
	I declare that Candidate Signature				
	X   Lwas endorsed for office by the Party listed on this form   X   X				
	X   I authorize my name to appear on the ballot   Date OS/Ib   2018   MM/DD/Y/YY				
	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 Gic M Janue	_			
	Secretary of Convention  SS:11 \to ZZ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
	HOINIAID				