

Certificate of Party Endorsement For State Offices and United States Senator

November 6th, 2018 State Election

Who uses this form? Candidates who have been ENDORSED by the party for state office and United States Senator 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.

	When do I file? Before 4pm on the 14th day after the r Note if the 14th day is a Saturday, Sunday or legal h		om on the r	next business day.	
	Convention of the Ropublic	(An)	par		550
1	Toll do Bal	MADONA	2		(A) 31-
	Convention Location and Town	Date of Conventio	LOI & -	05/12/2018	
	Endorsed Candidates Print candidate nam			will appear on the	ballot
	Governor Candidate name MANK BOVG HT W				30
2	1/2 5-1-				Ė
~		<u> </u>			
	City/town OAND CT Candidate Signature	Zip Code 0	108 11		
	000 08		.5.60	472018	
	* HID	Date		41 P-14-2 D	
	Candidate name Lieutenant Governor Candidate name May Classification	ev			
	(17 Floo Street	7			
	Address Didole III	06	1179		
	City/town Y (M) TO V) CT	Zip Code	919		
	0	Dete	MASO	12/2018	
	* CfC Myon	Date		12/2010	
	United States Senator Candidate name	COVPN			
	IDI COINTON STUDE	WIC		<u></u>	
	Address 9 COVIEV 57 PC	2/	1111		
	City/town CT Candidate Signature CT	Zip Code	090		
		Deste	15 late	danso	
	×	Date	U W Y Y	41018	
	Secretary of the State	hapman			
	Address PO Box 8186				
	City/town New Fairfield CT	Zip Code 0(0817		
	Candidate Signature			1	
	× Seessa (N-2	Date	MATO	MAOI8	
*	Treasurer	(•		
	Candidate name	Gray		ÁP	
	Address Nells Hill KO.		7/ 3		
	City/town CT Candidate Signature CT	Zip Code C	16080	1	
	0 0/ /	Data	ATA	orland to	
	x Theoles work	Date	CMAJOU	4,0010	
	Comptroller Candidate name				
	Address 18 Swan Ave	54			
	City/town Seymonk CT	Zip Code 06	493	<u> </u>	
	Candidate Signature		,		
	x ////////////////////////////////////	Date	ando	2/2018	
	Attorney General				*
	Candidate name Sue Hatteld	0			
	Address 30 (Wrights Crossi	1	01 250	,	
	City/town CT Candidate Signature CT	Źip Code (06759	<u> </u>	
	x	Date	Amerika	what 16	
		55	ען עצוועם	81218	
3	Attested by (Mast be signed by the chairman, presidence on of the following:	ling officer, OR secre	etary of con	Derlya	mil
=	Chairman/presiding office of convention	Signature X	/		2010
	Secretary of Convention	Tone	1	Jouch.	



Certificate of Eligibility for Primary

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For State Offices and United States Senator

November 6th, 2018 State Election

Who uses this form? Candidates who are running for statewide office or united states senator, 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.

1	Convention of the Repulsion of Pa	arty	Party
	Convention Location and Town FOXWOODS		Date of Convention
	Primary Eligibl	e Candidate	2
	Print candidate names in block letter as they	will appear	on the ballot
2	Governor Candidate name		
	_ Timothy M. Herbst		$\cdot \cup \bigcirc $
	Address		Candidate/Sidnature
	91 tairview Ave		Fortell h. USA
	City/town 17 LV 0 Zip Code	Date MM/PD/XYM	
	Lieutenant Governor Candidate name		
	Erin E. Stewart		
			Candidate Signature
	242 Reservoir Rd.		M MILLIANUZ
	City/town Britain Missigner	Date /	71900000
	United States Senator Candidate name	WHY DEPEND	
	Officed States Seriator Candidate name		
	A 1 Property		Caralli dan Sirana
	Address		Candidate Signature
	City/town Zip Code	Date	
	*	MM/DD/YYYY	
	Secretary of the State Candidate name		
	A.1.		Condition Cinery
	Address		Candidate Signature
	City/town Zip Code	Date	
	Treasurer Candidate name	MM/DD/YYYY	Λ
	i Candidate name		
			_
			-
	Comptroller candidate name	- Color	90.
	The state of the s		
	Address		Candidate Signature
	City/town Zin Code	Date	
	Zip Code	MM/DD/YYYY	
	Attorney General Candidate name		
	Address		Candidate Signature
	City/town Zio Codo	Date	
	Zip Code	MM/DD/YYYY	
3		I received at le convention de	east 15% of the votes from the
			ed member of the party.
	Candidate by signing this form you declare that:		e a candidate for the office and party
		listed above	
20	14.0% 8.744		name to appear on the ballot.
4	Attested by (Must be signed by the chairman, presidir	ng officer, OR se	ecretary of convention)
	Select on of the following:	616	
	Chairman/presiding office of convention	YIO X	Signature

Secretary of Convention



Certificate of Eligibility for Primary

For State Offices and United States Senator

2018 MAY 14 P 2: 52

November 6th, 2018 State Election

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1 Convention of the Res	DU DIIZUR	rty	Party					
Convention Location and Town Fox W6	ods		Date of Convention					
Print candidate names in block letter as they will appear on the ballot 2 Governor candidate name								
C) ~!								
Address 0 +	100000		Canalidate Signature					
City/town	Ld3		390					
Westport	o Zip Code	MSI/DD/YXX						
Lieutenant Governor Candidate na	me							
Address		Candidate Signature						
			carriadate signarare					
City/town	Zip Code	Date MM/DD/YYYY						
United States Senator Candidate na	ame							
Address			Candidate Signature					
City/town	Zip Code	Date MM/DD/YYYY						
Secretary of the State Candidate na	Primary Eligible Candidate te names in block letter as they will appear on the ballot lidate name Primary Eligible Candidate te names in block letter as they will appear on the ballot lidate name Date Candidate Signature Candidate Signature Senator Candidate name Candidate Signature Candidate Si							
Secretary of the State Candidate name Address City/town Zip Code Date								
	Zip Code							
Treasurer Candidate name								
Address			Candidate Signature					
City/town	Zip Code							
Comptroller Candidate name		IVIIVIJUUJTTT						
Address			Candidate signature					
City/town	Zip Code		/ =					
Attorney General Candidate name								
Address	Address							
City/town	7io Codo	Date						
	Zip Code		east 15% of the votes from the					
3		convention de	lgates voting.					
Candidate by signing this form you declare	I consent to be							
	7 (8%) .gosea.							
4 Attested by (Must be signed by the cl Select on of the following:	nairman, presidir	ng officer, OR se	cretary of convention)					
Chairman/presiding office of convention	Date VIII P212	018 4	Şignature					
Secretary of Convention		Dhy.						

This form must be filed with the Office of the Secretary of the State to be a valid candidate for the primary.



Certificate of Eligibility for Primary For State Offices and United States Senator

November 6th, 2018 State Election

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1	Convention of the Rep Warrie	of Par	n	^	Party	-05/12/201A
	CONVERTION AS COLOR STOWN & PM			Date	e of Convention	001. 10010
	Primary Eli	gible	Candidate			
	Print candidate names in block letter as t	they	will appear	on the ball	ot	
2	Governor Candidate name					
	Address				Candidate Signatu	re
						1000
	City/town Zip Cod	de	Date MM/DD/YYYY			
	Lieutenant Governor Candidate name					
	Jayme Stevenson					
	Address 65 Saint Nicholas			Jagmo	Candidate signatu	re
	Darien Biggs	20	Pate Party S	18		
	United States Senator Candidate name		13/19/20			
	Dominic Rapini				andidate Signatu	
	Address 4 Mariners Way			T	Zalifuldate signatu	16
	City/town Branford Otideo	5	Date MM/DB/MM/S			
	Secretary of the State Candidate name		N a			
	NONE					
	Address				Candidate Signatu	re
	City/town Zin Cox		Date			
	Zip Cod	ae	MM/DD/YYYY			
	Treasurer Candidate name					
	Address			9	Candidate Signatu	re
	City/town Zip Coo	de	Date			
	· · · · · · · · · · · · · · · · · · ·	uc .	MM/DD/YYYY			
	Comptroller Candidate name					
	Add			,	Candidate Signatu	
	Address			,	Candidate Signatu	
	City/town Zip Coo	de	Date MM/DD/YYYY			
	Attorney General Candidate name					
	John Shaban			()		
	Address 29 Legge wood Rd.				Candidate Signatu	re
	City/town Redding 788	96	Date Date	8	1	7
3		14	I received at le convention de	ast 15% of the	votes from the	: : : : : : : : : : : : : : : : : : :
			I am an enrolle		he party.	
	Candidate by signing this form you declare that:				or the office and	l party
			listed above		11	*
				2 7.1	ar on the ballot.	
4	Attested by (Must be signed by the chairman, pre			cretary of con	vention)	
	Select on of the following: Chairman/presiding office of convention	19/79/Y	8	Cionat	ra	
	Chairman/presiding office of convention Secretary of Convention	1001	Tom	Signatur	10	
	V Scalery of Convention				~ /	

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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	Convention of the	Republicar		an	Party		
	Convention Location and Town	Fox	woods Casino, Mash	antucket, CT	05/11-12/2018 Date of Convention		
				le Candidate			
	Print candidate names in b						
2	Governor Candidate name						
	7				0 111 0		
	Address			Candidate Signature			
	City/town			Date			
	·		Zip Code	MM/DD/YYYY			
	Lieutenant Governor Candida	ite name	I	- United the second			
					= = = = = = = = = = = = = = = = = = =		
	Address				Candidate Signature		
	Address				277		
	City/town		7:- 01-	Date	Y OF RATIO		
			Zip Code	MM/DD/YYYY	922		
	United States Senator Candi	date name)		D One		
					e STA		
	Address				Candidate Signature		
	Address			2	Candidate dignature		
	City/town		Zin Codo	Date			
			Zip Code	MM/DD/YYYY			
	Secretary of the State Candid	late name					
	Address		Candidate Signature				
	City/town		Zip Code	Date MM/DD/YYYY			
	Treasurer Candidate name			IVIIVIIDDITTT			
	. X						
	Art Linares Address		water		Candidate Signature		
	1110 Old Clinton Rd un	it F		5/25/2018	Candidate Signature		
	City/town		<i>ଠ୍ୟେଷ</i> Zip Code	Date	/// 7.		
	Westbrook			MM/DD/YYYY	Cet Livares		
	Comptroller Candidate name						
	Address	ress			Candidate Signature		
39	City/town	1		Date			
			Zip Code	MM/DD/YYYY			
	Attorney General Candidate nan	ne					
	Address				Candidate Signature		
	01. 11						
	City/town		Zip Code	Date			
				MM/DD/YYYY	east 15% of the votes from the		
3				convention del			
	Candidate by signing this form you do	loro that			ed member of the party.		
	Candidate by signing this form you dec	iaie iliai.		I consent to be	a candidate for the office and party		
				listed above	W		
	***				name to appear on the ballot.		
4	Attested by (Must be signed by the	he chairm	an, presiding of	ficer, OR secreta	ary of convention)		
Γ	Select on of the following:		5/12/2018	9	7		
	Chairman/presiding office of convent	tion		2	Signature		
	Secretary of Convention			no	3 00		
	This form must be filed with the	Office of	the Secretary of	the State to be a	valid candidate for the primary.		



Certificate of Eligibility for Primary

For State Offices and United States Senator OF THE STATE LEGISLATION & ELECTIONS ADMINISTRATION DIVISION

November 6th, 2018 State Election

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Where do I file the form? Office of the Secretary of the State Attn: LEAD 30 Trinity St. Hartford, CT. 06106

hol	liday, file before 4pm on the next business day	/.				ALESS SEC
1	Convention of the	Republic	an	Party	H	HISTA
	L			05/11-12/2018		RAT
		The state of the s	The State of the S			
					33 200	S. C. C.
2		er as tney w	ill appear on	the ballot		SES.
2	Governor Candidate name				00	医心管
	2000					
	Address			Candidate Signatur	e	
	City/town	Zin Codo	Date			
		Zip Code	MM/DD/YYYY			Ē1
	Lieutenant Governor Candidate name					
	Address			Candidate Signatur	e	
	City/town	100 N 100 100 100	Data			
	Control Control	Zip Code	MM/DD/YYYY			
	United States Senator Candidate name					
	Address			Candidate Signatur	e	
	City/town	Zip Code				
	Secretary of the State Candidate name		WIND DATE TO			
	,					
	Address			Candidate Signatur	e	
		Party Signature Republican Fowwoods Casino, Mashantucket, CT Primary Eligible Candidate ness in block letter as they will appear on the ballot Zip Code Date MM/DD/YYYY Atte Candidate name Candidate Signature Tip Code MM/DD/YYYY Date MM/DD/YYYY Atte Candidate Signature I received at least 15% of the votes from the convention delgates voting. I am an enrolled member of the party. I consent to be a candidate for the office and party listed above I authorize my name to appear on the ballot.				
	City/town	Zip Code				
	Treasurer Candidate name					
	Address			Candidate Signatur	е	
	City/town		Date			
		Zip Code				
	Comptroller Candidate name			\M/		
	MARK GREEVBERG		cholo	V Warn C		
	Address 184 FERN AVE	1170	21291,18	Candidate Signatur	е	
	City/toyen	Zip Code				
	Atternay Constal a 111		MM/DD/YYYY			
	Attorney General Candidate name					
	Address			Condidate Ciar -tu-	·0	
	Address			Candidate Signatur	е	
	City/town	Zip Code				
2		Sures Assuran	I received at I		9	
3				Call The Sent Cart and Call Call Call Call Call Call Call Cal		
	Candidate by signing this form you declare that:			5 (5)	d narh	,
				o a candidate for the United all	a party	
			l authorize my	name to appear on the ballot	ř	
4	Attested by (Must be signed by the chairm	nan, presiding o	officer, OR secret	tary of convention)		
	Select on of the following:	5/12/2018	0	01		
	Chairman/presiding office of convention	The same of the sa	- 2	Signature		
	Secretary of Convention			* 1		1