



Certificate of Party Endorsement

November 6th, 2018 State Election

2018 MAY 21 P 12:01

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.

SECRETARY OF THE STATE
LEGISLATION & ELECTIONS
REGISTRATION DIVISION

Office

Select one of the following:

- 1 CT Assembly District # 52nd US Congressional District # _____
- CT Senatorial District # _____
- Municipal Office of _____ in the town of _____

Meeting of the Stafford + Somers Democratic party

Select one of the following:

- 2 Town Committee Meeting Caucus
- Town Convention Party Convention
- Stafford Public Library Meeting location and town May 16, 2018 Date of Meeting
MM/DD/YYYY

About the candidate

Print candidate name in block letters as it will appear on the ballot

Candidate name DAVID F. WALSH

3 Address 21 Grant Ave.

City/town Stafford Springs CT Zip Code 06076

I declare that

- I was endorsed for office by the Party listed on this form
- I authorize my name to appear on the ballot

Candidate Signature

X
May 19, 2018 David F. Walsh
 Date MM/DD/YYYY

Attested by

Must be signed by the chairman, presiding officer, OR secretary of convention

Select one of the following

- 4 Chairman/presiding officer of convention
- Secretary of Convention

Signature

X
J Jell J 5/20/18

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



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Office

Select one of the following:

- 1 CT Assembly District # 52 US Congressional District # _____
- CT Senatorial District # _____
- Municipal Office of _____ in the town of _____

Meeting of the Republican party

Select one of the following:

- 2 Town Committee Meeting Caucus
- Town Convention Party Convention
- Stafford Town Hall, Stafford Date of Meeting 05/16/2018
Meeting location and town MM/DD/YYYY

About the candidate

Print candidate name in block letters as it will appear on the ballot

Candidate name KURT VAIL

Address 4 WEST END ST

City/town STAFFORD SPRINGS CT Zip Code 06076

I declare that

I was endorsed for office by the Party listed on this form

I authorize my name to appear on the ballot

Candidate Signature

Kurt Vail 05/16/2018
Date MM/DD/YYYY

Attested by

Must be signed by the chairman, presiding officer, OR secretary of convention

Select one of the following

- 4 Chairman/presiding officer of convention
- Secretary of Convention

Signature

[Signature]
2018 MAY 30 11:11

LEGISLATION & ELECTIONS
ADMINISTRATION DIVISION
SECRETARY OF THE STATE

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