



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.

Office

Select one of the following:

- 1 CT Assembly District # 93 US Congressional District # _____
- CT Senatorial District # _____ Probate 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 05/24/2018
- 200 Orange St, New Haven Date of Meeting MM/DD/YYYY
- Meeting location and town

About the candidate

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

- 3 Candidate name Grant Richardson
- Address 248 York St
- City/town New Haven CT Zip Code 06511

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

[Signature]

Date 05/25/18 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]

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 # 93 US Congressional District # _____
- CT Senatorial District # _____ Probate District # _____
- Municipal Office of _____ in the town of New Haven

Meeting of the Democratic party

Select one of the following:

- 2 Town Committee Meeting Caucus
- Town Convention Party Convention
- 150 Kimberly Ave, New Haven Meeting location and town 5/23/18 Date of Meeting MM/DD/YYYY

About the candidate

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

- 3 Candidate name Toni Walker
- Address 1643 Ella T. Grasso Blvd
- City/town New Haven CT Zip Code 06511

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

Toni Walker 5/23/18

Date MM/DD/YYYY

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 Secretary of Convention
- Signature [Signature]

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2018 MAY 24 A 9 48

SECRETARY OF THE STATE
LEGISLATION & ELECTIONS
ADMINISTRATION DIVISION