#### **APPLICATION FOR NOMINATING PETITION**

<b>P.O.</b> Box 1	of the State 150470 - 30 Trinity St CT 06115-0470, Tel. (		(D	Pate)	
	o §9-453b of the Gener candidates for the offic	•			_
		PLEASE TYPE OR	PRINT CLEARLY	2	
<u>Name</u>		Residence Address (incl. ZIP)	<u>01</u>	ffice (incl. District i	if applicable)
The party d	esignation of the above o	andidates on the petitio	n will be:		
e party a		-			
included in office(s) or	designation is specifienthis application, unless the same ballot as the TIC AS THE PARTY DE	ss the designation is the office(s) included in	ch party designation e name of a minor po n the application. *I	arty which is qualific DO NOT INSERT RE	ed for different PUBLICAN OR
or 40 signate the lesser of total number office will d	ou in determining the numbers; a particular page refers; a particular page refers of the fers of names checked as hetermine the exact signage which must be duplica	nay have only <u>one</u> circul total <u>votes cast for the s</u> aving voted) at the last ture requirement <u>at the</u>	lator; and the total nun <u>ame office</u> (or, if multi preceding election, or (	nber of signatures req ple-opening office, or (2) seven thousand fiv	uired is equal to be percent of the be hundred. This
				fro	ddress different m above, mail ms to:
	Phone # du	ring business hours	Phone # after busin	] ness hours	
		(Applica:	nt)	_	
	E MAY PROVIDE YOU W LL TO ARRANGE FOR A	ITH EXPEDITIOUS SERVI	ICE, IF YOU WISH TO R		
NOTE:	Be sure to enclose page signed by clerk of eac necessary); and Applicat	h candidate's town of	residence (multiple co	pies of page 3 may	

or to the Secretary of the State by 4:00 p.m. of <u>January 18, 2011</u>.

If this petition is filed under a party designation, <u>January 20, 2011 4 p.m.</u> is the last day that the party

Nominating petition pages must be submitted to the town clerk of the town of voting residence of the signers

designation committee or minor party may file with the Secretary of the State Statements of Endorsement of candidates petitioning under this designation.

### **Application for Nominating Petition**

# **CANDIDATES' STATEMENT OF CONSENT**

		tion, if any, of,			
<u>Signature</u>	Residence Address (incl. ZIP)	Office (Inc. District No. if applicable) Date			
	candidate for the office sp which office is to be conte has affixed the <u>date</u> of sig	has affixed the <u>date</u> of signing this statement.  Residence Address			

**CANDIDATES' NAMES** 

### **Application for Nominating Petition**

## **VERIFICATION OF NAMES OF NOMINATING PETITION CANDIDATES**

#### **APPLICANT FILL IN THIS PORTION**

RESIDENCE ADDRESSES (incl. ZIPS)

nes as they appear on the registry	that I compared the names of the ablist and I verify and/or correct the sames They Appear On Registry List Ever CANDIDATES' NAMES	ove individuals with the as follows:
he above candidates hereby certify nes as they appear on the registry	y that I compared the names of the ab list and I <u>verify</u> and/or <u>correct</u> the same s <u>They Appear On Registry List Ever</u>	ove individuals with the as follows:
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TOWN	CLERK FILL IN THIS PORTION	