

ED-606StPr [Rev. 10/07, g/forms/ED-600's/ed-606StPr.doc] Head Mod. Return, State Prim.

State of Connecticut  
Office of the Secretary of the State  
Election Services Division

PRESCRIBED FORM FOR RETURN OF VOTES CAST AT A STATE PRIMARY  
(C.G.S. §9-440 and §9-314(b))

Head moderator, or moderator in municipalities with only a single voting district, to complete, sign, and forthwith transmit one copy of this return, **BY FAX and MAIL** or by hand delivery, to **SECRETARY OF THE STATE**, Election Services Division, 30 Trinity Street, P.O. Box 150470, Hartford, CT 06115-0470. Use additional pages, if necessary. A duplicate return is to be filed with the municipal clerk.

Date of Primary: August 12, 2014

City  
Town of North Haven

Party:  REPUBLICAN  
 DEMOCRATIC

Part I - Candidates

Office or Position Designation  
(from ballot,  
including political  
subdivision, if  
applicable--e.g.,  
Assembly District,  
Ward, etc.)

<u>Office or Position Designation</u> (from ballot, including political subdivision, if applicable--e.g., Assembly District, Ward, etc.)	<u>Candidate</u> (from ballot)	<u>Number of</u> <u>Votes Received</u>
Governor	* Thomas C. Foley	269
Governor	John P. McKinney	359
Lieutenant Governor	* Penny Bacchiochi	169
Lieutenant Governor	Heather Somers	240
Lieutenant Governor	David M. Walker	206
Comptroller	* Sharon J. McLaughlin	372
Comptroller	Angel Cadena	191

ED-606StPr [Rev. 10/07, g/forms/ED-600's/ed-606StPr.doc] Head Mod. Return, State Prim..

Part I - Continued

Office or Position Designation

(from ballot,  
including political  
subdivision, if  
applicable--e.g.,  
Assembly District,  
Ward, etc.)

Candidate  
(from ballot)

Number of  
Votes Received

---

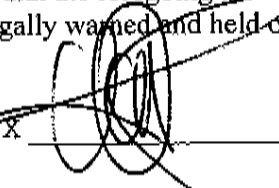
	<i>n/a</i>	

ED-606StPr [Rev. 10/07, g/forms/ED-600's/ed-606StPr.doc] Head Mod. Return, State Prim..

Part II - Official Check List Report

1. Entire Municipality: (Town, Borough, City)	A. Total number of names on official check list (include only the active enrollment list and names restored to it on primary day):	B. Total number of names checked as having voted, by machine and by absentee ballot (as counted on official check list):
	<u>3608</u>	<u>629</u>
2. Political Subdivision if applicable (e.g., Assembly District, Ward, etc.):	A. Total number of names on official check list (include only the active enrollment list and names restored to it on primary day):	B. Total number of names checked as having voted, by machine and by absentee ballot (as counted on official check list):
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I hereby certify that the foregoing are the returns of the primary of the above-named party in the above-named municipality, legally warned and held on AUGUST 12, 2014.

SIGN HERE: X 

8/12/2014  
Date

Head Moderator      Moderator  
[-check one-]

Head Moderator's/ Moderator's Telephone Numbers:  
203/234-1080     203/481-3330  
( Home )                                  ( Work )