2015 HAY -5 P 4: 47

State of Connecticut Office of the Secretary of the State

STEAMERARY OF THE Legislation & Elections Administration Division Station & FLECTIONS ACRIBITED TO STATION OF COMMISSION OF COMMISSI

PRESCRIBED FORM FOR RETURN OF VOTES CAST AT A MUNICIPAL ELECTION (C.G.S. §9-314(b))

ONE SET of return forms is enclosed. After all entries have been completed and proofread and any corrections made, the complete set of returns should be photocopied and both sets signed in the original by the Head Moderator, or moderator in municipalities with only a single voting district, at each place indicated and deliver one set of such returns either (1) by fax to the Secretary of the State by 12:00 midnight on Election Day and then deliver such return to the Secretary of the State, not later than the third day after the election, or (2) by hand delivery to the Secretary of the State, Legislation & Elections Administration Division, 30 Trinity Street, P.O. Box 150470, Hartford, CT 06115-0470 not later than 6:00 p.m. of the day after the election, or to the State Police not later than 4:00 p.m. of the day after the election and to deliver the other set to the Town Clerk. Use additional pages, if necessary.

FAX NUMBER: 1-866-392-4023

Gity Town of	<u> </u>	Date of Election: 4 MAY,			
	Part I - Candi	dates on Ballot			
Office Designation (from ballot label, including political subdivision, if applicablee.g., Council District, Ward, etc.)	<u>Candidate</u> ' (from ballot label)	<u>Party</u> (from ballot label)		Number of Votes Received (including write-in votes specified below)*	
WARDEN BURGESS BUIRGESS	LEON W. LOSEE DIRK C. PATTERSON PETER C. GAY	PETITIONING PETITIONING PETITIONING	19 20 18	(No unitimo necine)	
				.д.	

Part I - Continue 2015 HAY -5 P 4: 47

Office Designation (from ballot label, including political subdivision, if applicable--e.g., Council District,

SECRETARY OF THE STATE LENGS ATION & ELECTIONS ADMINISTRATION DIVISION

Number of
Votes Received
(including
write-in votes
specified
below)*

applicablee.g., Council District, Ward, etc.)	<u>Candidate</u> (from ballot label)	Party (from ballot label)	write-in votes specified below)*	

2015 HAY -5 P 4: 47

Part II - Write-In Votes for REGISTERED Write-in Candidates Only

STATE STATE
LEGISLATION & ELECTIONS
ABMINISTRATION DIVISION

Office Designation (from ballot label, including political subdivision, if applicable --e.g., Council District, Ward, etc.)

Registered Write-In Candidate's Name

Number of Write-in **Votes Cast**

(NONE)

Part III - Questions on Ballot

Question Number	Designation of Question (from ballot label)	Yes Votes	No Votes
	(NONE)		

Part IV - Official Check List Report

1.	Entire Municipality: (Tewn, Borough, City)	Α.	Total number of names on official check list (include only the active registry list and names restored to it on election day):	В.	Total number of names checked as having voted, by machine and by absentee ballot (as counted on official check list):
2.	Political Subdivision if applicable (e.g., Council District, Ward, etc.):	A.	Total number of names on official check list (include only the active registry list and names restored to it on election day):	В.	Total number of names checked as having voted, by machine and by absentee ballot (as counted on official check list):
	LITCHFIELD		774		20
-					
•					
•					TELL D
			With the second		
-			477.54.54		
-					
-	46-31-31-31-31-31-31-31-31-31-31-31-31-31-				

I hereby certify that the foregoing are the returns of the municipal election in the above-named municipality, legally warned and held on _________.

SIGN HERE: X Inen K. Boynton, Moderator

A MAY, 2015