

2018 MAY 25 A 10: 54



Certificate of Party Endorsement

November 6th, 2018 State Election

SECRETARY OF THE STATE
LEGISLATION & ELECTIONS
ADMINISTRATION DIVISION

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 # _____ US Congressional District # _____
- CT Senatorial District # 21
- Municipal Office of _____ in the town of _____

Meeting of the DEMOCRATIC party

Select one of the following:

- 2 Town Committee Meeting Caucus
- Town Convention Party Convention
- 7365 MAIN ST, STRATFORD, CT 06614 Date of Meeting 05/21/2018
Meeting location and town MM/DD/YYYY

About the candidate

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

- 3 Candidate name MONICA TUJAK BRILL
- Address 210 ANSON ST
- City/town STRATFORD CT Zip Code 06614

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

Monica Tujak Brill

Date 05/21/2018

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]

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



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 # _____ US Congressional District # _____
- CT Senatorial District # 21
- 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
- 4567 Main Street, Stratford CT 06614 Date of Meeting 05/14/2018
- Meeting location and town MM/DD/YYYY

About the candidate

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

- 3 Candidate name Kevin C. Kelly
- Address 240 York Street
- City/town Stratford CT Zip Code 06615

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

Kevin C. Kelly

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 office of convention
- Secretary of Convention
- Signature [Signature]

SECRETARY OF THE STATE
 LEGISLATION & ELECTIONS
 ADMINISTRATION DIVISION

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