



# Certificate of Party Endorsement

November 3rd, 2020 General Election

Who uses form? Endorsed candidates at caucus, town committee meeting or convention OR 15% Candidate at party convention.

Where do I file? File at the Secretary of State's Office: 165 Capitol Ave., Suite 1000, Hartford, CT 06106.

When do I file? Before 4pm on the 14<sup>th</sup> day after the meeting. If Saturday, Sunday, holiday, file next business day.

Electronic filing: Certificate of Endorsement can be scanned and e-mailed by deadline (original to follow by regular mail). Subject line in e-mail shall include Party, Office and District (Example: Wig Party, State Representative, Assembly District 3). The Certificate of Endorsement shall be scanned and e-mailed to: [Heather.Augeri@ct.gov](mailto:Heather.Augeri@ct.gov) or [Moriah.Moriarty@ct.gov](mailto:Moriah.Moriarty@ct.gov)

## Office *Select one of the following:*

- 1  CT Assembly District #       17        US Congressional District
- CT Senatorial District #
- 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
- Meeting location and town       ZOOM in AVON       Date of meeting 

0	5	1	8	2	0	2	0
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## About the candidate Endorsed 15% Eligibility for Primary (Multi-Town only)

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

- 3 Candidate name       ELENI KAVROS DeGRAW       E-Mail       eleni@teameleni.com
- Address       112 Westland Road       Phone       860-559-2093
- City/town       Avon       CT Zip Code 

0	6	0	0	1
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I declare that

- I was endorsed or received at least 15% of the vote for office and party listed on this form
- I authorize my name to appear on the ballot

Candidate Signature

      Eleni Kavros DeGraw      

Date 

0	5	1	8	2	0	2	0
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## Attested by

*Must be signed by the chairman, presiding officer, OR secretary of convention*

4 *Select one of the following:*

- Chairman/presiding officer of convention
- Secretary of convention

      *[Signature]*



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## Office *Select one of the following:*

- 1  CT Assembly District # 17  US Congressional District
- CT Senatorial 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
- Meeting location and town virtual Date of meeting 05/19/2020

## About the candidate Endorsed 15% Eligibility for Primary (Multi-Town only)

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

- 3 Candidate name LESLEE HILL E-Mail lesleehill@hotmail.com
- Address 91 Andrew Drive Phone 860-989-8151
- City/town Canton CT Zip Code 06019

I declare that

- I was endorsed or received at least 15% of the vote for office and party listed on this form
- I authorize my name to appear on the ballot

Candidate Signature

Leslee Hill

Date 0520202020

## Attested by

*Must be signed by the chairman, presiding officer, OR secretary of convention*

4 *Select one of the following:*

- Chairman/presiding officer of convention
- Secretary of convention

X

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



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## Office *Select one of the following:*

1

CT Assembly District # 17

US Congressional District

CT Senatorial District # \_\_\_\_\_

in the town of Avon/Canton

Municipal office of \_\_\_\_\_

## Meeting of the Republican party

*Select one of the following:*

2

Town Committee Meeting

Caucus

Town Convention

Party Convention

Meeting location and town Avon/Canton Date of meeting 05/19/2020

## About the candidate

Endorsed

3  15% Eligibility for Primary (Multi-Town only)

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

Candidate name Leslee Hill

E-Mail lesleehill@hotmail.com

Address 91 Andrew Drive

Phone (860) 989-8151

City/town Canton

CT Zip Code 016101191

I declare that

• I was endorsed or received at least 15% of the vote for office and party listed on this form

X

Candidate Signature

• I authorize my name to appear

on the ballot

Date

          

## Attested by

4 *Must be signed by the chairman, presiding officer, OR secretary of convention*

*Select one of the following:*

Chairman/presiding officer of convention

Secretary of convention

X Moriah Moriarty

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