ED-606 [Rev.10/09, g\forms\ED-600's\ed-606.doc] Head Mod. Return, Municipal

State of Connecticut Office of the Secretary of the State Legislation & Elections Administration Division

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

City	Date of Election: 5/4/2015								
Town of JEWETT CITY Borough									
Part I - Candidates 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 WARDEN	JOHN CONNELLY DONALD MORETTI	DEMOCRAT REPUBLICAN	6 S 9						
BURGESS BURGESS BURGESS BURGESS	LAURA LAIDLEY JAMES KRUEGER LAURIE SORDER BEN HULL TIMOTHY SHARKEY	DEMOCRAT DEMOCRAT DEMOCRAT, REPUBLICAN REPUBLICAN	58 56 64 76 36						
CLERK CLERK	VALERIE PUDVAH VALERIE PUDVAH	DEMOCRAT REPUBLICAN	64						
TREASURER TREASURER	LINDA COTE LINDA COTE	DEMOCRAT REPUBLICAN	63 Q						
TAX COLLECTOR TAX COLLECTOR	LEONA SHARKEY LEONA SHARKEY	DEMOCRAT REPUBLICAN	6 S						
BAILIFF BAILIFF	BLANK DONALD MORETTI	DEMOCRAT REPUBLICAN	39						

^{*}Include write-in votes cast for candidates for any office, provided the write-in vote on any single ballot doesn't result in two votes being cast for the same candidate for the same office.

ED-606 [Rev.10/07, g\forms\ED-600's] Head Mod. Return, Municipal

Part I - Continued

Office Designation (from ballot label, Number of Votes Received including political subdivision, if (including applicable--e.g., write-in votes Council District, specified <u>Candidate</u> <u>Party</u> Ward, etc.) (from ballot label) (from ballot label) below)*

^{*}Include write-in votes cast for candidates for any office, provided the write-in vote on any single ballot doesn't result in two votes being east for the same candidate for the same office.

ED-606 [Rev.10/07, g\forms\ED-600's]--Head Mod. Return, Municipal

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

Office Designation (from ballot label, including political subdivision, if applicablee.g., Council District, Ward, etc.)	Registered Write-In Candidate's Name	Number of Write-in Votes Cast	
		1	
		,	

Part III - Questions on Ballot

Fart III - Questions on Ballot					
<u>Question</u> <u>Number</u>	Designation of Question (from ballot label)	Yes Votes	No Votes		
	·				
	,				

ED-606 [Rev.10/07, g\forms\ED-600's]--Head Mod. Return, Municipal

Part IV - Official Check List Report

1.	Entire Municipality: (Town, Borough, City)		Total number of name on official check list (include only the active registry list and name restored to it on electing 1470	ve es	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.):		Total number of nam on official check list (include only the acti registry list and name restored to it on elect	ve es	Total number of names checked as having voted, by machine and by absentee ballot (as counted on official check list):		
					(v - 1 to 1		
					The state of the s		
	ercby certify that the foregorned and held on		of the municipal elec	tion in the above	-named municipality, legally		
SIC	GN HERE: X M	DIM	***	<u> </u>	1-15		
	Glen	Nomano printed namo)	Date		
	🛛 Head	Moderator	[-check one-]		Moderator		
	Head Moderator's Moderator's Telephone Numbers:						
	<u>(</u>	376-35 (Home)		(860) 376- (Work			