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.

<table>
<thead>
<tr>
<th>Office</th>
</tr>
</thead>
<tbody>
<tr>
<td>Select one of the following:</td>
</tr>
<tr>
<td>□ CT Assembly District #</td>
</tr>
<tr>
<td>✅ CT Senatorial District #</td>
</tr>
<tr>
<td>□ Municipal Office of</td>
</tr>
</tbody>
</table>

| Meeting of the Democratic party |
| Select one of the following: |
| □ Town Committee Meeting |
| □ Town Convention |
| ✅ North Haven Baptist jLingsley Street in North Haven |
| □ Caucus |
| □ Party Convention |
| Date of Meeting: 06/21/18 MM/DD/YYYY |

| About the candidate |
| Print candidate name in block letters as it will appear on the ballot |
| Candidate name: Aili McKeen |
| Address: 13 Burke Heights Dr |
| City/town: Wallingford CT |
| Zip Code: 06492 |
| 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: |
| Date: MM/DD/YYYY |

| Attested by |
| Must be signed by the chairman, presiding officer, OR secretary of convention |
| Select one of the following |
| ✅ Chairman/presiding office of convention |
| □ Secretary of Convention |
| Signature: |
| Date: MM/DD/YYYY |

If this form is not filed with the Office of the Secretary of the State, then this endorsement is invalid.
Certificate of Eligibility for Primary
November 6th, 2018 State Election

Who uses this form? Candidates who are running for multi-town district office, have not been endorsed by the party, and received 15% of the votes at the convention.

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 #
   [ ] CT Senatorial District #
   [X] CT Senatorial District #

   [ ] US Congressional District #

Convention of the Democratic party

Complete the following:

North Haven Rec Ctr, Linsley Street, North Haven, CT

Date of Convention

About the candidate

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

Candidate name: Josh Baller

Address: 35 Red Bluff Road

City/town: East Haven

Zip Code: 06513

Candidate Signature

I declare that

[X] I received at least 15% of the votes from the convention delegates voting.

[X] I am an enrolled member of the party in the district listed above.

[X] I consent to be a candidate for the office and party listed above.

[X] I authorize my name to appear on the ballot.

Attested by

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

Select one of the following

[ ] Chairman/presiding office of convention

[ ] Secretary of Convention

Signature

[ ] Signature

This form must be filed with the Office of the Secretary of the State to be a valid candidate for the primary.
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.
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Office
Select one of the following:

1 □ CT Assembly District #
☑ CT Senatorial District # 84th
□ US Congressional District #
□ Probate - Multi Town District #
□ Municipal Office of

Meeting of the Republican party
Select one of the following:

2 □ Town Committee Meeting
□ Town Convention
☑ Party Convention

PUBLIC LIBRARY, WALLINGFORD
Meeting location and town

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

Candidate name
Len Fusaro

Address
7 Sycamore Ln

City/town
North Haven CT

Zip Code
06473

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

Date
05/15/2018

Attested by
Must be signed by the chairman, presiding officer, or secretary of convention
Select one of the following

4 □ Chairman/presiding officer of convention
□ Secretary of Convention

Signature

Date

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