



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 14th 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 or Moriah.Moriarty@ct.gov

Office *Select one of the following:*

- 1 CT Assembly District # 113 _____ US Congressional District
- CT Senatorial District # _____
- Municipal office of _____ in the town of _____

2020 MAY 29 P 2:38
SECRETARY OF THE STATE
LEGISLATION AND ELECTION
ADMINISTRATION DIVISION

Meeting of the Democratic party

Select one of the following:

- 2 Town Committee Meeting Caucus
- Town Convention Party Convention

Meeting location and town Shelton Date of meeting 05/19/2020
virtual

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

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

Elaine Matto E-Mail ematto@aol.com

3 88 Audubon Lane Phone 203-257-5315

Shelton CT Zip Code 06484

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

Elaine Matto

Date 05/26/2020

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

Heather M. Goulet J

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 # 113 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 SHELTON Date of meeting 05|20|20|20

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 JASON PERILLO E-Mail _____
Address 454 CORAM AVE. Phone 203.627.3030
City/town SHELTON CT Zip Code 06484

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



Date 05|21|20|20

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

