



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 # _____ 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 Mesto Conference Date of meeting 05112020

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 JIM HIMES E-Mail jamesahimes@gmail.com
- Address 197 Valley Rd Phone (203) 524-2792
- City/town Cos Cob CT Zip Code 06807

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

James C. Himes

Date 05132020

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

Custin McCarthy Valley

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 # _____ US Congressional District 4
- 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 |0|5|1|3|2|0|2|0|

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

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

Candidate name Jonathan Riddle E-Mail riddleforcongress@gmail.com

3 Address _____ Phone _____

City/town _____ CT Zip Code | | | | | | | |

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

X

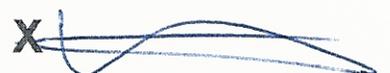
Date | | | | | | | |

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X  5/15/20

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Office Select one of the following

- 1 CT Assembly District # _____
 CT Senatorial District # _____ US Congressional District 4
 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 10 | 5 | 1 | 3 | 2 | 0 | 2 | 0 |

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

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

Candidate name Jonathan Riddle E-Mail riddleforcongress@gmail.com

- 3 Address 789 High Ridge Road Phone _____
City/town Stamford CT Zip Code 06905

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

Jonathan Riddle

Date 10 | 5 | 1 | 3 | 2 | 0 | 2 | 0 |

Attested by

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- Chairman/presiding officer of convention
 Secretary of convention

[Signature] 5/15/20

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Meeting of the _____ Republican _____ party

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- Meeting location and town _____ Virtual _____ Date of meeting 10 | 5 | 1 | 3 | 2 | 0 | 2 | 0 |

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

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

Candidate name Michael Goldstein E-Mail mgvissionny@aol.com

- 3 Address 10 Sandy Lane Phone 203-869-0045
- City/town Greenwich CT Zip Code 016181311

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

X

Date 10 | 5 | 1 | 4 | 2 | 0 | 2 | 0 |

Attested by

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- Chairman/presiding officer of convention
- Secretary of convention

X 5/14/20

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