



Certificate of Party Endorsement

November 6th, 2018 State Election

SECRETARY OF THE STATE
LEGISLATION & ELECTIONS
ADMINISTRATION DIVISION

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.

Office

Select one of the following:

- 1 CT Assembly District # _____ US Congressional District # _____
- CT Senatorial District # 27 Probate District # _____
- Municipal Office of _____ in the town of _____

Meeting of the Democrat party

Select one of the following:

- 2 Town Committee Meeting Caucus
- Town Convention 451 Stillwater Road, Stafford Party Convention
- Date of Meeting 5/21/18

Meeting location and town

About the candidate

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

Candidate name Carlo Leone

3 Address 88 Houston Terrace

City/town Stafford CT Zip Code 06902

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

X Carlo Leone

Date 5/21/18

Attested by

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

Select one of the following

- 4 Chairman/presiding office of convention
- Secretary of Convention

Signature

X Jonathan Rowland chair



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Office

Select one of the following:

- 1 CT Assembly District # _____ US Congressional District # _____
- CT Senatorial District # 27 Probate - Multi Town District # _____
- Municipal Office of _____ in the town of _____

Meeting of the REPUBLICAN PARTY party

Select one of the following:

- 2 Town Committee Meeting Caucus
- Town Convention Party Convention
- GOV CENTER, STAMFORD Meeting location and town Date of Meeting 05/14/18
MM/DD/YYYY

About the candidate

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

- 3 Candidate name JERRY BOSAK
- Address 453 SHIPPAN AVE
- City/town STAMFORD CT Zip Code 06902

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

[Signature] Date 05/14/2018
MM/DD/YYYY

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

[Signature]

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