



**Office of the Secretary of the State**

State of Connecticut

165 Capitol Avenue, Suite 1000

P.O. Box 150470, Hartford, CT 06115-0470

**Stephanie Thomas**

Secretary of the State

**Jennifer D. Barahona**

Deputy Secretary of the State

**Dear Applicant:**

**As requested, enclosed is the form which you should use to register as a write-in candidate for the September 15, 2026 Special Election. It is imperative that you fill out this form completely and follow the instructions. You should also carefully peruse C.G.S. § 9-373a, which is the section of the state statutes relating to write-in candidacies. You must file the enclosed form with this office in order to register your write-in candidacy by 4:00 p.m. on September 9, 2026, or the registration will be void.**

**If you have any questions regarding the above, do not hesitate to contact us at (860) 509-6100.**

**Legislative and Elections Administration Division**

**Encls.**

(ED-622a) (Rev. 8/26) (G:\write-in\2026\Special\writ-in appl.-Special Sept 15, 2026 – Ward 9 New Haven)

**Secretary of the State\*** ☎ 860-509-6200 🌐 [sots.ct.gov](https://sots.ct.gov)

**Business Services Division** ☎ 860-509-6002 ✉ [bsd@ct.gov](mailto:bsd@ct.gov) **Legislation & Election Administration Division** ☎ 860-509-6100 ✉ [lead@ct.gov](mailto:lead@ct.gov)

\*The State of Connecticut is an Affirmative Action/Equal Opportunity Employer.

**To the Secretary of the State of Connecticut  
Legislation and Elections Administration Division  
165 Capitol Avenue, Suite 1000  
Hartford, CT 06106**

**Registration of Write-In Candidacy for Special Election  
September 15, 2026**

**Pursuant to Section 9-373a of the General Statutes, I hereby register my write-in candidacy for the office indicated at the special election to be held in the town of:**

\_\_\_\_\_.

**\*\*\*Please Print\*\*\***

**Candidate's Name** \_\_\_\_\_

**Address** \_\_\_\_\_

**Town/Zip** \_\_\_\_\_

**Telephone** \_\_\_\_\_  
(During business hours) (After business hours)

**Email** \_\_\_\_\_

**Office (Including District, if applicable)** \_\_\_\_\_

**Term of Office** \_\_\_\_\_  
(mo, day, yr) TO (mo., day, yr.)

**The undersigned hereby consents to being a write-in candidate for the office indicated above to be contested at such election.**

\_\_\_\_\_  
**(Signature)**

\_\_\_\_\_  
**(Date)**

**Note:** This registration must be filed with the Secretary of the State by 4:00 p.m. on September 9, 2026, or the registration will be void.