WARNING: IT IS A CRIME TO SIGN THIS PETITION IN THE NAME OF ANOTHER PERSON WITHOUT LEGAL AUTHORITY TO DO SO AND YOU MAY NOT SIGN THIS PETITION IF YOU ARE NOT AN ELECTOR.

PRIMARY PETITION FOR STATE OFFICE(S)

retition Circulated in Town of(nan	ne of municipality) (To be fill	ed in before circulating)
A. SECRETARY MUST FILL OUT T	- +/	OUT THIS FORM
NAME OF PARTY / DATE OF PRIMA		_AUGUST 12, 2014(date of primary)
NAME(S) OF CANDIDATE(S)	<u>ADDRESS</u>	OFFICE(S) SOUGHT
MARK LAURETTI 14 DA	AVID DR. SHELTON, CT 06484	Lieutenant Governor
THE CONTRACT OF THE CONTRACT O		
THIS PETITION MUST BE FILED WI later than 4:00 p.m. on June 10, 2014.	TH THE REGISTRARS OF VOTE	ERS in the town of circulation not

B. We, the undersigned, being enrolled members of the above party in the above municipality, do hereby petition that there be printed on the voting machine ballot labels to be used in the primary of said party in said municipality to be held on the date above specified the names of the above individuals as candidates for nomination to the offices specified:

SIGNATURE OF ENROLLED ELECTOR	PRINTED NAME OF ELECTOR	BIRTH DATE	CTDEET ADDRESS
		DATE	STREET ADDRESS
}			
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STATEMENT BY REGISTRAR OF VOTERS AS TO CIRCULATOR'S STATUS AS ENROLLED PARTY MEMBER

	trar in town in which the signers are enrolled.
CIRCULATOR'S NAME	CIRCULATOR'S RESIDENCE ADDRESS (no., street, town)
I, Registrar of Voters of the party	named in Part A of this petition, in the town of
hereby attest that the above circu	lator is an enrolled member of said party in said town.
Date	
Date	Signature of Registrar of Voters
CIRCULA	TOR'S STATEMENT OF AUTHENTICITY OF SIGNATURES
D. Part D must be completed, b page and before filing it with	y Circulator and by Acknowledging Officer, after obtaining all signatures on party's Registrar in municipality in which the signers of the page are enrolled.
Conorai Digitutes of Confidenticiti.	m page and I make this statement pursuant to the provisions of Chapter 153 of My address is, in the town of
Each person whose name appear either know each such signer of candidates supported, offices so	in enrolled member of the political party designated on this petition in said to rs on this petition signatures page signed the same in person in my presence r such signer satisfactorily identified himself or herself to me. The spaces ought and the political party involved were filled in prior to my obtaining tures on this petition signatures page is
I hereby declare under the PEN Circulator's Statement of Authen	ALTIES OF FALSE STATEMENT, that the statements made in the foregoticity of Signatures are true.
	Signature of Circulator
State of Connecticut }	CERTIFICATION OF ACKNOWLEDGING OFFICER
County of }	(city or town)
On this the day of	, 20, before me, the undersigned officer, personally
(name of circulator	, 20, before me, the undersigned officer, personally, known to me (or satisfactorily proven) to be the person whose) ng Statement of Circulator and acknowledged that he executed the same for the
(name of circulator name is subscribed to the foregoi	, known to me (or satisfactorily proven) to be the person whose) ng Statement of Circulator and acknowledged that he executed the same for the
(name of circulator name is subscribed to the foregoi purpose contained therein.	, known to me (or satisfactorily proven) to be the person whose ng Statement of Circulator and acknowledged that he executed the same for the reunto set my hand. Judge of a court of record or family support
(name of circulator name is subscribed to the foregoi purpose contained therein.	, known to me (or satisfactorily proven) to be the person whose ng Statement of Circulator and acknowledged that he executed the same for the reunto set my hand.
(name of circulator name is subscribed to the foregoi purpose contained therein. In witness whereof, I have here of the commission expires:	Judge of a court of record or family support magistrate; clerk or deputy clerk of a court having a seal; commissioner of deeds or town clerk; notary public; justice of the person whose
(name of circulator name is subscribed to the foregoi purpose contained therein. In witness whereof, I have here My commission expires: (date) (Notary Public only)	Judge of a court of record or family support magistrate; clerk or deputy clerk of a court having a seal; commissioner of deeds or town clerk; notary public; justice of the Peace; or attorney admitted to the Connecticut Bar
(name of circulator name is subscribed to the foregoin purpose contained therein. In witness whereof, I have here My commission expires: (date) (Notary Public only)	Judge of a court of record or family support magistrate; clerk or deputy clerk of a court having a seal; commissioner of deeds or town clerk; notary public; justice of the person whose
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(name of circulator name is subscribed to the foregoin purpose contained therein. In witness whereof, I have here My commission expires: (date) (Notary Public only) ******* CERTIFICA E. The following is to be filled in signatures page are enrolled, I, Registrar of Voters of the process of the proce	ng Statement of Circulator and acknowledged that he executed the same for the reunto set my hand. Judge of a court of record or family support magistrate; clerk or deputy clerk of a court having a seal; commissioner of deeds or town clerk; notary public; justice of the peace; or attorney admitted to the Connecticut Bar ***********************************
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