

State of Connecticut  
Office of the Secretary of the State  
Election Services Division

**PREScribed FORM FOR RETURN OF VOTES CAST AT A STATE PRIMARY**  
(C.G.S. §9-440 and §9-314(b))

Head moderator, or moderator in municipalities with only a single voting district, to complete, sign, and forthwith transmit one copy of this return, **BY FAX and MAIL** or by hand delivery, to **SECRETARY OF THE STATE**, Election Services Division, 30 Trinity Street, P.O. Box 150470, Hartford, CT 06115-0470. Use additional pages if necessary. A duplicate return is to be filed with the municipal clerk.

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Date of Primary: August 12, 2014

**Party:** ☑ Republican  
☐ Democratic

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**City**  
**Town of:** STAMFORD

**Part 1 - Candidates**

<table>
<thead>
<tr>
<th>Office or Position Designation (from ballot, including political subdivision, if applicable—e.g., Assembly District, Ward, etc.)</th>
<th>Candidate (from ballot)</th>
<th>Number of Votes Received</th>
</tr>
</thead>
<tbody>
<tr>
<td>Governor</td>
<td>Thomas C Foley</td>
<td>1165</td>
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<tr>
<td></td>
<td>John P McKinney</td>
<td>1007</td>
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<tr>
<td>Lt. Governor</td>
<td>Penny Bacchiochi</td>
<td>597</td>
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<tr>
<td></td>
<td>Heather Somers</td>
<td>977</td>
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<tr>
<td></td>
<td>David M Walker</td>
<td>557</td>
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<tr>
<td>Comptroller</td>
<td>Sharon J McLaughlin</td>
<td>1375</td>
</tr>
<tr>
<td></td>
<td>Angel Cadena</td>
<td>572</td>
</tr>
</tbody>
</table>
### Part II - Official Check List Report

1. **Entire Municipality: STAMFORD (Town, Borough, City)**

   A. Total number of names on official check list (include only the active enrollment list and names restored to it on primary day):
   
   12470

   B. Total number of names checked as having voted, by machine and by absentee ballot (as counted on official check list):
   
   2000

2. **Political Subdivision (e.g., Assembly District, Ward, etc.):**

   A. Total number of names on official check list (include only the active enrollment list and names restored to it on primary day):
   
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   B. Total number of names checked as having voted, by machine and by absentee ballot (as counted on official check list):
   
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I hereby certify that the foregoing are the returns of the primary of the above-named party in the above-named municipality, legally warned and held on ______August 14, 2012_________.

**SIGN HERE:**  

XX☐ Head Moderator □ Moderator

[CHECK ONE]-

Head Moderator's/ Moderator's Telephone Numbers:

Home 203 358-4526    Work 203 228-5225

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