To the Town Clerk of t	he Town of			
cone	ducting and transacting bu	usiness in said Town of		
Under the full name of				
The Physical address is				
	person conducting or tran	sacting said business, together with the ma		
Name:		Address:		
Name:		Address:		
Name:		_ Address:		
Name:		Address:		
	Signature:			
State of Connecticut				
County of	ss.	Dated:	20	
Personally Appear				
who subscribed and sw same, before me.	ore to the truth of the fore	egoing certificate, and acknowledged that (h	ne/she/they) executed the	
Received and Filed20 Indexed in Book No		Town Clerk-Notary Public-Justice of the F Court	Peace-Commissioner of the Superior	
Town Clerk-	Assistant Town Clerk			