

To be filed with the SECRETARY OF THE STATE not later than 4 p.m. on the fourteenth day after close of the convention (or if such fourteenth day is a Saturday, Sunday, or legal holiday, not later than 4 p.m. on the next succeeding business day), in accordance with §§9-388 and 9-2 of the General Statutes. NOTE: This form is to be used only by party-endorsed candidates for multi-town district office (i.e, Representative in Congress; State Senator; State Representative from Assembly Districts which cross town lines; Judge of Probate from Probate Districts of two or more towns).

CERTIFICATE OF PARTY ENDORSEMENT

At a convention of the delegates of the Republican Party for the [check ONE only; insert appropriate Congressional, Senatorial, or Assembly District Number; or Probate District Name]

[X] 12th Congressional District (District number)

[] Senatorial District (District number)

[] Probate District of (Probate District Name)

[X] 61st Assembly District, (District number)

SECRETARY OF THE STATE LEGISLATION & ELECTIONS ADMINISTRATION DIVISION 2014 MAY 15 P 12:12

held at SUFFIELD on the 14th day of May, 2014, (location of convention) (date)

I was endorsed by such convention as candidate for nomination to the office of [check ONE]

[] Representative in Congress [] State Senator [X] State Representative [] Judge of Probate

for said district, for the State Election to be held on November 4, 2014; and

I authorize my name to appear on the ballot as printed or typed below:

TAMI ZAWISTOWSKI 11 SEYMOUR RD EAST GRANBY 06026 (Print or type name in (Full Residence Address--Street) (Town) (Zip)

exactly the form in which you authorize it to appear on ballot)

Dated at SUFFIELD, Connecticut, this 14th day of MAY, 2014.

[Signature] Signature of Candidate

ATTESTED BY:

[Signature] Signature of Chairman or Presiding Officer of Convention

OR [Signature] Signature of Secretary of Convention

IMPORTANT: If this certificate, properly completed, is not received by the SECRETARY OF THE STATE by the deadline indicated above, the party shall be deemed to have made NO ENDORSEMENT OF ANY CANDIDATE for the office. (§9-388) File with Secretary of the State, Legislation & Elections Administration Division, 30 Trinity Street, P.O. Box 150470, Hartford, CT 06115-0470.

6154

To be filed with the SECRETARY OF THE STATE not later than 4 p.m. on the fourteenth day after close of the convention (or if such fourteenth day is a Saturday, Sunday, or legal holiday, not later than 4 p.m. on the next succeeding business day), in accordance with §§9-388 and 9-2 of the General Statutes. NOTE: This form is to be used only by party-endorsed candidates for multi-town district office (i.e, Representative in Congress; State Senator; State Representative from Assembly Districts which cross town lines; Judge of Probate from Probate Districts of two or more towns).

CERTIFICATE OF PARTY ENDORSEMENT

At a convention of the delegates of the Democratic Party for the [check ONE only; insert appropriate Congressional, Senatorial, or Assembly District Number; or Probate District Name]

[] Congressional District (District number)

[] Senatorial District (District number)

[] Probate District of (Probate District Name)

[x] 6154 Assembly District, (District number)

SECRETARY OF THE STATE LEGISLATION & ELECTIONS ADMINISTRATION DIVISION 2014 MAY 23 4:09:37

held at 94 MOUNTAIN RD, SUFFIELD CT on the 20th day of May, 2014 (location of convention) (date)

I was endorsed by such convention as candidate for nomination to the office of [check ONE]

[] Representative in Congress [] State Senator [x] State Representative [] Judge of Probate

for said district, for the State Election to be held on November 4, 2014; and

I authorize my name to appear on the ballot as printed or typed below:

JOE DOERING 108 PEAK MOUNTAIN DR EAST GRANBY CT (Print or type name in exactly the form in which you authorize it to appear on ballot) (Full Residence Address--Street) (Town) (Zip) 06026

Dated at SUFFIELD, Connecticut, this 20 day of MAY, 2014.

ATTESTED BY: [Signature] Signature of Chairman or Presiding Officer of Convention

[Signature] Signature of Candidate OR [Signature] Signature of Secretary of Convention

IMPORTANT: If this certificate, properly completed, is not received by the SECRETARY OF THE STATE by the deadline indicated above, the party shall be deemed to have made NO ENDORSEMENT OF ANY CANDIDATE for the office. (§9-388) File with Secretary of the State, Legislation & Elections Administration Division, 30 Trinity Street, P.O. Box 150470, Hartford, CT 06115-0470.