

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]

_____ Congressional District
(District number)

_____ Senatorial District
(District number)

Probate District of _____
(Probate District Name)

63 Assembly District,
(District number)

held at Winsted on the 14 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 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:

Jay M. Case 167 West Wadfield Blvd Winsted CT
(Print or type name in (Full Residence Address--Street) (Town) (Zip) 06098)

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

Dated at Winsted, Connecticut, this 14 day of May 2014.

Jay M. Case
Signature of Candidate

SECRETARY OF THE STATE
LEGISLATION & ELECTION
ADMINISTRATION DIVISION
2014 MAY 16 P 2:49

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.

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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**]

2014 MAY 22 A 10:17
SECRETARY OF THE STATE
LEGISLATION & ELECTIONS
ADMINISTRATION DIVISION

 Congressional District
(District number)

 Senatorial District
(District number)

Probate District of
(Probate District Name)

63rd Assembly District,
(District number)

held at Goshen Town Hall on the 20 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 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:

MARIE P. SOLIANI 363 E. PEARL Road TORRINGTON 06790
(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 Goshen, Connecticut, this 20 day of May, 2014.

Marie P. Soliani
Signature of Candidate

ATTESTED BY:

Hensetta C. Horvay OR
Signature of Chairman or Presiding Officer of Convention

Att. Candy
Signature of Secretary of Convention

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