

To be filed with the SECRETARY OF THE STATE not later than 4 p.m. on the fourteenth day after the close of the town committee meeting, caucus, or 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 §§9-391 and 9-2 of the General Statutes. *NOTE:* this form is to be used only by the party-endorsed candidate for the municipal (single-town) office of State Representative (i.e., Assembly Districts which do not cross town lines).

CERTIFICATE OF PARTY ENDORSEMENT

At the [check one] town committee meeting caucus town convention

of the REPUBLICAN PARTY

for the [insert Assembly District Number] 87th Assembly District,
(District number)

held at 4442 Washington Ave, North Haven on the 22nd day of May, 2014,
(location of meeting) (date)

I was endorsed by such endorsing authority as candidate for nomination to the office of

State Representative 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:

David W. Yecarino 1804 Hertford Tpk North Haven 06473
(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 North Haven, Connecticut, this 22nd day of MAY, 2014.

David W. Yecarino
Signature of Candidate

ATTESTED BY:

[Signature]
Signature of Chairman or Presiding
Officer of Meeting

AND

[Signature]
Signature of Secretary of Meeting

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. (§9-391)

(File with Secretary of the State, Legislation & Elections Administration Division, 30 Trinity Street, P.O. Box 150470, Hartford, CT 06115-0470.)

SECRETARY OF THE STATE
LEGISLATION & ELECTIONS
ADMINISTRATION DIVISION
2014 MAY 27 P 16

North Haven 8714

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CERTIFICATE OF PARTY ENDORSEMENT

At the [check one] town committee meeting caucus town convention

of the DEMOCRATIC PARTY

for the [insert Assembly District Number] 87 Assembly District, (District number)

held at NORTH HAVEN REC CENTER, 7 LINSLEY ST on the 20th day of May, 2014, (location of meeting) (date)

I was endorsed by such endorsing authority as candidate for nomination to the office of State Representative 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:

ALDEN MEAD 220 RIMMON ROAD NORTH HAVEN 06473 (Print or type name in exactly the form in which you authorize it to appear on ballot) (Full Residence Address--Street) (Town) (Zip)

Dated at NORTH HAVEN, Connecticut, this 20th day of MAY, 2014.

[Signature of Alden Mead] Signature of Candidate

ATTESTED BY:

[Signature] Signature of Chairman or Presiding Officer of Meeting

AND

[Signature] Signature of Secretary of Meeting

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. (§9-391)

2014 MAY 22 P 3:03 SECRETARY OF THE STATE LEGISLATION & ELECTIONS ADMINISTRATION DIVISION