

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

2016 MAY 27 P 1:01

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

of the **REPUBLICAN PARTY**

for the [insert Assembly District Number] 12 Assembly District ,
(District number)

held at Manchester, 494 Main Street on the 17th day of May, 2016,
(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 8, 2016; and **I authorize my name to appear on the ballot as printed or typed below:**

John D. Topping 190 Hewitt Street Manchester 06042
(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 Manchester, Connecticut, this 27th day of May, 2016.

John Topping
Signature of Candidate

ATTESTED BY:

Timothy...
Signature of Chairman or Presiding Officer of Meeting

OR

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)



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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] 12th Assembly District,
(District number)

held at Lincoln Center, 494 Main St. on the 19th day of May, 2016,
(location of meeting) (date)

2016 MAY 24 A 8:30

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 8, 2016; and **I authorize my name to appear on the ballot as printed or typed below:**

Kelly JS Luxenberg 45 Chatham Dr. Manchester 06042
(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 Manchester, Connecticut, this 19th day of May, 2016.

Kelly Luxenberg
Signature of Candidate

ATTESTED BY:
Michael E. Pahl
Signature of Chairman or Presiding Officer of Meeting

OR [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**