

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 the **party-endorsed candidate** for **multi-town district office** (i.e. Representative in Congress; State Senator and State Representative from districts which cross town lines).

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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]

5th Congressional District  
(District number)

\_\_\_\_\_ Senatorial District  
(District number)

\_\_\_\_\_ Assembly District,  
(District number)

2016 MAY 10 A 11: 33  
SECRETARY OF THE STATE  
LEGISLATION & ELECTIONS  
ADMINISTRATION DIVISION  
30 TRINITY STREET  
HARTFORD, CT 06115-0470

held at the Waterbury Career Academy on the 9th day of May, 2016,  
(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

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:**

Elizabeth Esty    213 Preston Ter.    Cheshire    06410  
(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 Waterbury, Connecticut, this 9 day of May, 2016.

Elizabeth H. Esty  
Signature of Candidate

ATTESTED BY:

\_\_\_\_\_  
Signature of Chairman or Presiding  
Officer of Convention

OR Alice M. Hutchinson  
Signature of Secretary of Convention

Alice M. Hutchinson  
Alice M. Hutchinson

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**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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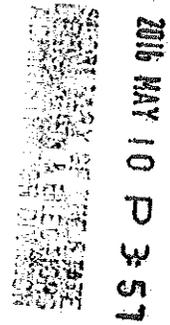
**CERTIFICATE OF PARTY ENDORSEMENT**

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

5 Congressional District  
(District number)

\_\_\_\_\_ Senatorial District  
(District number)

\_\_\_\_\_ Assembly District,  
(District number)



held at 100 Columbus Blvd, Hartford, Ct (Ct Convention Center) on the 9 day of May, 2016,  
(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

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:**

CLAY COVE 1 BRINSON O E W SHEPARD 06784  
(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 Hartford, Connecticut, this 9 day of May, 2016.

[Signature]  
Signature of Candidate

**ATTESTED BY:**

[Signature]  
Signature of Chairman or Presiding Officer of Convention

OR

\_\_\_\_\_  
Signature of Secretary of Convention

\*\*\*\*\*

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