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

☐ _____ Congressional District
(District number)

☐ _____ Senatorial District
(District number)

☑ _32 nd_ Assembly District,
(District number)

held at _Cromwell Town Hall, 41 West Street_ on the _16th_ 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
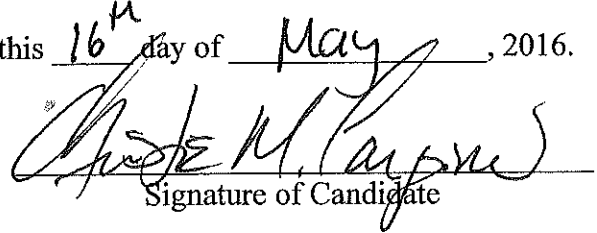**I authorize my name to appear on the ballot as printed or typed below:**

Christie M. Carpino   _29 Sovereign Ridge_   _Cromwell_   _06416_
(Print or type name in   (Full Residence Address--Street)   (Town)   (Zip)
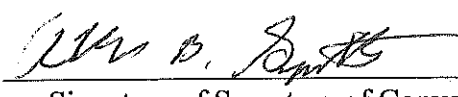**exactly the form in which you**
authorize it to appear on ballot)

Dated at _Cromwell_____, Connecticut, this _16th_ day of _May_____, 2016.

_____
Signature of Candidate

ATTESTED BY:

_____   OR   _____
Signature of Chairman or Presiding   Signature of Secretary of Convention
Officer 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.

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]*

☐ _____ Congressional District
(District number)

☐ _____ Senatorial District
(District number)

☒ _3 2_ Assembly District,
(District number)

held at _Cromwell Town Hall, Cromwell, CT_ on the _17_ 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:

Myron P. Johnson   _16 Pleasant Street_   _Cromwell_   _06416_ .
(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 _Cromwell_, Connecticut, this _17th_ day of _May_, 2016.

_____
Signature of Candidate

ATTESTED BY:

_____   OR   _____
Signature of Chairman or Presiding   Signature of Secretary of Convention
Officer of Convention

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