

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)

[X] 35th Senatorial District (District number)

[] Probate District of _____ (Probate District Name)

[] _____ Assembly District, (District number)

held at Willington Pizza on the 21 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 [X] 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:

TONY Guglielmo 100 STAFFORD ST STAFFORD SPRING, CT (Print or type name in (Full Residence Address--Street) (Town) (Zip) 06076

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

Dated at 5-21 Willington, Connecticut, this 21 day of May, 2014.

[Signature of Candidate] Signature of Candidate

ATTESTED BY:

[Signature of Bill Francis] Signature of Chairman or Presiding Officer of Convention

OR [Signature of Secretary of Convention] 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]

[] Congressional District (District number)

[x] 35th Senatorial District (District number)

[] Probate District of (Probate District Name)

[] Assembly District, (District number)

held at Stafford Community Center, Stafford, CT on the 19th 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 [x] 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:

Bill Loftus 104 Pulpit Rock Rd. Woodstock 06281 (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 Stafford, Connecticut, this 19th day of May, 2014.

[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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