

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

SECRETARY OF THE STATE  
LEGISLATION & ELECTIONS  
ADMINISTRATION DIVISION  
2014 MAY 22 P 2:46

\_\_\_\_\_ Congressional District  
(District number)

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

\_\_\_\_\_ Probate District of \_\_\_\_\_  
(Probate District Name)

69<sup>th</sup> Assembly District,  
(District number)

held at Southbury Town Hall, 501 Main St. S. Southbury on the 14 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     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:

Arthur O'Neill 617 Bucks Hill Rd Southbury 06488  
(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 Southbury, Connecticut, this 14<sup>th</sup> day of May, 2014.

Arthur O'Neill  
Signature of Candidate

ATTESTED BY:

Jean M. Lodwin  
Signature of Chairman or Presiding Officer of Convention

OR

Art L. Walk  
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.