

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).

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**CERTIFICATE OF PARTY ENDORSEMENT**

At the [check one]  town committee meeting     caucus     town convention  
of the **REPUBLICAN PARTY**

for the [insert Assembly District Number] 97<sup>th</sup> Assembly District,  
(District number)

held at 200 ORANGE ST, NEW HAVEN on the 20<sup>th</sup> day of May, 2014,  
(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 4, 2014; and **I authorize my name to appear on the ballot as printed or typed below:**

John Cirello    42 Ley Street    New Haven CT    06572  
(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 New Haven, Connecticut, this 20<sup>th</sup> day of MAY, 2014.

[Signature]  
Signature of Candidate

ATTESTED BY:

[Signature]  
Signature of Chairman or Presiding  
Officer of Meeting

AND [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 CANDIDATE** for the office. (§9-391)

(File with Secretary of the State, Legislation & Elections Administration Division, 30 Trinity Street, P.O. Box 150470, Hartford, CT 06115-0470.)

SECRETARY OF THE STATE  
LEGISLATION & ELECTIONS  
ADMINISTRATION DIVISION  
2014 MAY 23 P 12:17

New Haven 9714

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SECRETARY OF THE STATE  
LEGISLATION & ELECTIONS  
ADMINISTRATION DIVISION  
2014 MAY 27 A 10:18

CERTIFICATE OF PARTY ENDORSEMENT

At the [check one]  town committee meeting  caucus  town convention  
of the DEMOCRATIC PARTY

for the [insert Assembly District Number] 97 <sup>Nineteen</sup> Assembly District,  
(District number)

held at 150 Kimberly Ave New Haven Ct on the 22 day of May, 2014,  
(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 4, 2014; and I authorize my name to appear on the ballot as printed or typed below:

Robert MEGNA 40 Foxon Hill Rd 54 N.H. 06513  
(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 New Haven, Connecticut, this 22<sup>nd</sup> day of May, 2014.

Robert Megna  
Signature of Candidate

ATTESTED BY:  
[Signature]  
Signature of Chairman or Presiding Officer of Meeting

AND Rosemarie DeMatteo  
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)