

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)

[] _____ Senatorial District (District number)

[] _____ Assembly District, (District number)

[x] Probate District of Saybrook (Probate District Name)

2014 MAY 15 P 2
SECRETARY OF THE STATE
LEGISLATION & ELECTIONS
ADMINISTRATION DIVISION
3310

held at the Old Saybrook Town Hall, 302 Main St on the 8th 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 [x] 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:

ANSELMO DELIA 33 KELSEY TOWN RD. CLINTON, CT 06413
(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 Old Saybrook, Connecticut, this 8th day of May, 2014.

[Signature]
Signature of Candidate

ATTESTED BY:
[Signature]
Signature of Chairman or Presiding Officer of Convention
Paul M. Carver

OR
[Signature]
Signature of Secretary of Convention
Beraldine Lewis

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)

[] _____ Senatorial District (District number)

[X] Probate District of SAYBROOK (#33RD) (Probate District Name)

[] _____ Assembly District, (District number)

held at ESSEX TOWN HALL, 29 WEST AVENUE, ESSEX, CT on the 21st 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 [X] 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:

TERRANCE D LOMME 15 NOVELTY LANE ESSEX 06426 (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 ESSEX, Connecticut, this 21st day of MAY, 2014.

[Signature] Signature of Candidate

ATTESTED BY:

[Signature] Signature of Chairman or Presiding Officer of Convention PAT LABBADIA, III

OR

[Signature] Signature of Secretary of Convention Stephen Anderson

2014 MAY 22 9:11 AM SECRETARY OF THE STATE LEGISLATION & ELECTIONS ADMINISTRATION DIVISION

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