

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]

135 Congressional District  
(District number)

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

135 Assembly District,  
(District number)

2016 MAY 23 P 4:13  
SECRETARY OF THE STATE  
LEGISLATION & ELECTIONS ADMINISTRATION DIVISION

held at Easton Senior Center 650 Warehouse Rd 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:**

Bonnie Troy    123 Georgetown Rd    Weston Ct    06883  
(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 Easton, Connecticut, this 17 day of May, 2016.

Bonnie Troy  
Signature of Candidate

**ATTESTED BY:**

[Signature]  
Signature of Chairman or Presiding  
Officer of Convention

OR

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

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

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

135 Assembly District,  
(District number)

2016 MAY 20 A 9:32

held at Easton Public Library on the 16 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:**

Adam Dunsby    65 Redding Rd    Easton    06612  
(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 Easton, Connecticut, this 16 day of May, 2016.

Adam Dunsby  
Signature of Candidate

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

OR

[Signature]  
Signature of Secretary of Convention

\*\*\*\*\*

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