



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 municipal office, except for the municipal office of State Representative (single-town district).

CERTIFICATE OF PARTY ENDORSEMENT

At the [check one] town committee meeting caucus town convention

of the DEMOCRATIC PARTY

held at Bloomfield Senior Center Bingo Room
330 Park Avenue, Bloomfield CT 06002 on the 18th day of May, 2016,
(location of meeting) (date)

2016 MAY 23 P 2:48
SECRETARY OF STATE
ADMINISTRATIVE SERVICES

I was endorsed by such endorsing authority as candidate for nomination to the office of Democratic Registrar of Voters, 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:

Anne E. Wall 6 Marquerite Avenue Bloomfield 06002
(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 Bloomfield, Connecticut, this 18th day of May, 2016.

Anne E. Wall
Signature of Candidate

ATTESTED BY:

[Signature]
Signature of Chairman or Presiding
Officer of Meeting

OR

[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)

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CERTIFICATE OF PARTY ENDORSEMENT

SECRETARY OF THE STATE
RECORDS SECTION
2016 MAY 23 P 2:18

At the [check one] town committee meeting caucus town convention

of the **REPUBLICAN PARTY**

held at Bloomfield Town Hall on the 17 day of May, 2016,
(location of meeting) (date)

I was endorsed by such endorsing authority as candidate for nomination to the office of

REGISTRAR OF VOTERS, 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:

BARBARA L. REISNER 43 CLIFFMOUNT DRIVE Bloomfield Ct 06002
(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 Bloomfield, Connecticut, this 17th day of MAY, 2016.

Barbara L. Reisner
Signature of Candidate

ATTESTED BY:

[Signature]
Signature of Chairman or Presiding
Officer of Meeting

OR

[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)