

IMPORTANT:
The Name(s), Address(es), and Designation of the Candidate(s) on this petition must be printed or typed. If not complied with, petition will be returned to be properly filled out.

Candidate(s) must meet residency and registration requirements as per NJSA 40A:9-1.13.

A. NOMINATION BY PETITION FOR PRIMARY ELECTION TO THE HONORABLE COUNTY CLERK:
We the undersigned, hereby certify that we reside in the County of Gloucester of the State of New Jersey, and that we are qualified voters therein; that we are members of the _____ PARTY, and that at the last election for members of the General Assembly preceding the execution of this petition we voted for a majority of the candidates of the political party herein named, and that we intend to affiliate with the said party at the ensuing election; that we endorse the person(s) hereinafter mentioned as candidate(s) for nomination to the office therein named, and we request that you cause to be printed upon the official Primary Ballot of said party the name(s) of said person(s) as the candidate(s) for such nomination. We certify that the said person so endorsed is legally qualified under the laws of this State to be nominated for said office.
We further certify that the residence(s) and post office address(es) of the said person(s) so endorsed is or are as follows (19:23-7):

<i>Office to Be Filled</i>	<i>Name of Candidate</i>	<i>Residence</i>	<i>P.O. Address</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

EMAIL: _____
We certify that the names and post office address(es) of the three members named as a committee on vacancies are as follows:

<i>Name</i>	<i>Residence</i>	<i>P.O. Address</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____

B. REQUEST FOR DESIGNATION ON THE OFFICIAL PRIMARY BALLOT
The candidate(s), having been endorsed for the office mentioned in this petition, hereby request(s) that there be printed opposite his/her/their name on the said primary ticket the following designation:

(Must not exceed six words) (19:23-17)

C. SIGNATURE SHEET
SIGNATURE MUST BE IN SIGNER’S OWN HANDWRITING
AND NAME MUST BE **PRINTED** ON THE LINE PROVIDED.

PRINTED NAME	ADDRESS	SIGNATURE (MUST BE IN SIGNER’S OWN HANDWRITING)
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

SIGNATURE SHEET
SIGNATURE MUST BE IN SIGNER'S OWN HANDWRITING
AND NAME MUST BE **PRINTED** ON THE LINE PROVIDED.

PRINTED NAME

ADDRESS

SIGNATURE
(MUST BE IN SIGNER'S OWN HANDWRITING)

9.		
10.		
11.		
12.		
13.		
14.		
15.		
16.		
17.		
18.		
19.		
20.		
21.		
22.		
23.		
24.		
25.		
26.		
27.		
28.		
29.		
30.		
31.		
32.		

SIGNATURE SHEET
SIGNATURE MUST BE IN SIGNER'S OWN HANDWRITING
AND NAME MUST BE **PRINTED** ON THE LINE PROVIDED.

PRINTED NAME

ADDRESS

SIGNATURE
(MUST BE IN SIGNER'S OWN HANDWRITING)

33.		
34.		
35.		
36.		
37.		
38.		
39.		
40.		
41.		
42.		
43.		
44.		
45.		
46.		
47.		
48.		
49.		
50.		
51.		
52.		
53.		
54.		
55.		
56.		

SIGNATURE SHEET
SIGNATURE MUST BE IN SIGNER'S OWN HANDWRITING
AND NAME MUST BE **PRINTED** ON THE LINE PROVIDED.

PRINTED NAME

ADDRESS

SIGNATURE
(MUST BE IN SIGNER'S OWN HANDWRITING)

57.		
58.		
59.		
60.		
61.		
62.		
63.		
64.		
65.		
66.		
67.		
68.		
69.		
70.		
71.		
72.		
73.		
74.		
75.		
76.		
77.		
78.		
79.		
80.		

SIGNATURE SHEET
SIGNATURE MUST BE IN SIGNER'S OWN HANDWRITING
AND NAME MUST BE **PRINTED** ON THE LINE PROVIDED.

PRINTED NAME	ADDRESS	SIGNATURE (MUST BE IN SIGNER'S OWN HANDWRITING)
81. _____	_____	_____
82. _____	_____	_____
83. _____	_____	_____
84. _____	_____	_____
85. _____	_____	_____
86. _____	_____	_____
87. _____	_____	_____
88. _____	_____	_____
89. _____	_____	_____
90. _____	_____	_____
91. _____	_____	_____
92. _____	_____	_____
93. _____	_____	_____
94. _____	_____	_____
95. _____	_____	_____
96. _____	_____	_____
97. _____	_____	_____
98. _____	_____	_____
99. _____	_____	_____
100. _____	_____	_____
101. _____	_____	_____
102. _____	_____	_____
103. _____	_____	_____

SIGNATURE SHEET
SIGNATURE MUST BE IN SIGNER'S OWN HANDWRITING
AND NAME MUST BE **PRINTED** ON THE LINE PROVIDED.

PRINTED NAME	ADDRESS	SIGNATURE (MUST BE IN SIGNER'S OWN HANDWRITING)
104. _____	_____	_____
105. _____	_____	_____
106. _____	_____	_____
107. _____	_____	_____
108. _____	_____	_____
109. _____	_____	_____
110. _____	_____	_____
111. _____	_____	_____
112. _____	_____	_____
113. _____	_____	_____
114. _____	_____	_____
115. _____	_____	_____
116. _____	_____	_____
117. _____	_____	_____
118. _____	_____	_____
119. _____	_____	_____
120. _____	_____	_____
121. _____	_____	_____
122. _____	_____	_____
123. _____	_____	_____
124. _____	_____	_____
125. _____	_____	_____
126. _____	_____	_____

SIGNATURE SHEET
SIGNATURE MUST BE IN SIGNER'S OWN HANDWRITING
AND NAME MUST BE **PRINTED** ON THE LINE PROVIDED.

PRINTED NAME	ADDRESS	SIGNATURE (MUST BE IN SIGNER'S OWN HANDWRITING)
127. _____	_____	_____
128. _____	_____	_____
129. _____	_____	_____
130. _____	_____	_____
131. _____	_____	_____
132. _____	_____	_____
133. _____	_____	_____
134. _____	_____	_____
135. _____	_____	_____
136. _____	_____	_____
137. _____	_____	_____
138. _____	_____	_____
139. _____	_____	_____
140. _____	_____	_____
141. _____	_____	_____
142. _____	_____	_____
143. _____	_____	_____
144. _____	_____	_____
145. _____	_____	_____
146. _____	_____	_____
147. _____	_____	_____
148. _____	_____	_____
149. _____	_____	_____

SIGNATURE SHEET
SIGNATURE MUST BE IN SIGNER'S OWN HANDWRITING
AND NAME MUST BE **PRINTED** ON THE LINE PROVIDED.

PRINTED NAME	ADDRESS	SIGNATURE (MUST BE IN SIGNER'S OWN HANDWRITING)
150. _____	_____	_____
151. _____	_____	_____
152. _____	_____	_____
153. _____	_____	_____
154. _____	_____	_____
155. _____	_____	_____
156. _____	_____	_____
157. _____	_____	_____
158. _____	_____	_____
159. _____	_____	_____
160. _____	_____	_____
161. _____	_____	_____
162. _____	_____	_____
163. _____	_____	_____
164. _____	_____	_____
165. _____	_____	_____
166. _____	_____	_____
167. _____	_____	_____
168. _____	_____	_____
169. _____	_____	_____
170. _____	_____	_____
171. _____	_____	_____
172. _____	_____	_____

SIGNATURE SHEET
SIGNATURE MUST BE IN SIGNER'S OWN HANDWRITING
AND NAME MUST BE **PRINTED** ON THE LINE PROVIDED.

PRINTED NAME	ADDRESS	SIGNATURE (MUST BE IN SIGNER'S OWN HANDWRITING)
173. _____	_____	_____
174. _____	_____	_____
175. _____	_____	_____
176. _____	_____	_____
177. _____	_____	_____
178. _____	_____	_____
179. _____	_____	_____
180. _____	_____	_____
181. _____	_____	_____
182. _____	_____	_____
183. _____	_____	_____
184. _____	_____	_____
185. _____	_____	_____
186. _____	_____	_____
187. _____	_____	_____
188. _____	_____	_____
189. _____	_____	_____
190. _____	_____	_____
191. _____	_____	_____
192. _____	_____	_____
193. _____	_____	_____
194. _____	_____	_____
195. _____	_____	_____

D. VERIFICATION

The Circulator/Witness taking the affidavit below must be the person who obtained the names on this set of signatures or several sets of signatures. The witness must take the affidavit for each set he/she/they solicit(s) and sign in the presence of a person authorized to administer affidavits. Although the signature sheets are solicited separately, the entire petition must be bound together before submitting to the County Clerk.

State of New Jersey }
County of Gloucester } ss.

_____, being duly sworn upon his/her/their oath saith that he/she/they personally circulated the petition; that the petition is signed by each of the signers thereof in his/her/their proper handwriting; that the signers are to the best knowledge and belief of the affiant legal voters of the County of Gloucester of the State of New Jersey, as stated in the petition, and belong to the political party named in the petition, and that the petition is prepared and filed in absolute good faith for the sole purpose of endorsing the person or persons therein named in order to secure his/her/their nomination or selection as stated in the petition. The person who circulates the petition shall be a registered voter in this State whose party affiliation is of the same political party named in the petition.

Subscribed and sworn to before me

the _____ day of _____, 20_____

(Officer Authorized to Administer Oath)

(Signature of Circulator/Witness)

(Printed Name of Circulator/Witness)

(Address of Circulator/Witness)

E. CERTIFICATE OF ACCEPTANCE

I, the undersigned, hereby certify that I am qualified for the office mentioned in said petition; that I am a member of the _____ PARTY, the political party named herein; that I am a resident of and a legal voter in the jurisdiction of the office for which the nomination is to be made; that I consent to stand at the ensuing primary election, and that if nominated I agree to accept the nomination.

Candidate's Signature

Candidate's Signature

Candidate's Signature

Candidate's Signature

Candidate's Signature

Candidate's Signature

F. OATH, AFFIRMATION, OR DECLARATION OF ALLEGIANCE

State of New Jersey }
County of Gloucester } ss.

I, the undersigned, do solemnly swear (or affirm) that I will support the Constitution of the United States and the Constitution of the State of New Jersey, and that I will bear true faith and allegiance to the same and to the Governments established in the United States and in this State, under the authority of the people. So help me God.*

* No individual is required to swear that part of an oath which states "So help me God" and may instead state "I do solemnly, sincerely and truly declare and affirm" or "I, do declare, in the presence of Almighty God, the witness of the truth of what I say".

Subscribed and sworn to before me

the _____ day of _____, 20_____

(Officer Authorized to Administer Oath)

Candidate's Signature

Candidate's Signature

Candidate's Signature

Candidate's Signature

Candidate's Signature

Candidate's Signature

NOTICE

ALL CANDIDATES ARE REQUIRED BY LAW TO COMPLY WITH THE PROVISIONS OF THE NEW JERSEY CAMPAIGN CONTRIBUTIONS AND EXPENDITURES REPORTING ACT. FOR FURTHER INFORMATION, PLEASE CALL ELEC AT (609) 292-8700.

