

**Atlantic County Clerk's Office
EDWARD P. McGETTIGAN, COUNTY CLERK
5901 Main St
Mays Landing, NJ 08330-1797
609-625-4011 – FAX 609-909-5111
WWW.ATLANTICCOUNTYCLERK.ORG**



**COUNTY OFFICE
PETITION NOMINATING CANDIDATE FOR PUBLIC OFFICE
FOR
PRIMARY ELECTION**

REQUIRED NUMBER OF SIGNATURES:

Please contact the Atlantic County Clerk's Elections Department (609)641-7867, extension 5231, for candidate petition information. The required number of signatures on petitions may vary according to districts and office sought.

**COUNTY OFFICE
PETITION NOMINATING CANDIDATE FOR PUBLIC OFFICE
FOR
PRIMARY ELECTION**

NOTE: This petition may be copied to circulate for voters' signatures, but every petition shall have attached to it the affidavit of at least one signer stating that the other signers have signed the petition in good faith and that he or she actually saw the voters sign the petition (NJSA 19:13-7).

NOTE: 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 (609) 292-8700, New Jersey Election Law Enforcement Commission (NJSA 19:23-7).

NOTE: "...no persons shall... be eligible to become a candidate for any local elective office, or be appointed to any local elective office, unless he is registered to vote in the local unite to which the office pertains, and has been a resident of that local unit for at least **1 year immediately** prior to the date upon which the election for the office is to be held, or prior to the date upon which the appointment is made, as the case may be." (NJSA 40A:9-1.13).

TO THE HONORABLE _____, CLERK:

We, the undersigned, hereby certify that we reside in the County of Atlantic, State of New Jersey, and that we are qualified voters therein; that we are members of the _____ party; that we intend to affiliate with the same political party at the ensuing election; that we endorse the person hereinafter mentioned as candidate for nomination to the office of _____, and we request that you cause to be printed upon the official primary ballot of said party the name of said person as the candidate of such nomination . We further certify that the office for which said person is named, the residence and post office address of said person so endorsed is as follows:

TITLE OF OFFICE SOUGHT _____

NAME _____

STREET ADDRESS _____

POST OFFICE ADDRESS _____

MUNICIPALITY _____

We further certify that the said person so endorsed is legally qualified under the laws of this State to be nominated for said office.

ATTENTION: PETITION SIGNERS

**YOUR PRINTED NAME AND ADDRESS AS WELL AS YOUR SIGNATURE
MUST APPEAR ON THE FOLLOWING PAGE FOR VERIFICATION PURPOSES.**

NAME OF CANDIDATE: _____

TITLE OF OFFICE SOUGHT: _____

**PETITION SIGNERS:
YOU MUST PRINT YOUR NAME AND ADDRESS AFTER YOUR SIGNATURE!**

1. Signature _____ Printed Name _____

Street Address _____ Municipality _____

2. Signature _____ Printed Name _____

Street Address _____ Municipality _____

3. Signature _____ Printed Name _____

Street Address _____ Municipality _____

4. Signature _____ Printed Name _____

Street Address _____ Municipality _____

5. Signature _____ Printed Name _____

Street Address _____ Municipality _____

6. Signature _____ Printed Name _____

Street Address _____ Municipality _____

7. Signature _____ Printed Name _____

Street Address _____ Municipality _____

8. Signature _____ Printed Name _____

Street Address _____ Municipality _____

9. Signature _____ Printed Name _____

Street Address _____ Municipality _____

10. Signature _____ Printed Name _____

Street Address _____ Municipality _____

NAME OF CANDIDATE: _____

TITLE OF OFFICE SOUGHT: _____

**PETITION SIGNERS:
YOU MUST PRINT YOUR NAME AND ADDRESS AFTER YOUR SIGNATURE!**

11. Signature _____ Printed Name _____

Street Address _____ Municipality _____

12. Signature _____ Printed Name _____

Street Address _____ Municipality _____

13. Signature _____ Printed Name _____

Street Address _____ Municipality _____

14. Signature _____ Printed Name _____

Street Address _____ Municipality _____

15. Signature _____ Printed Name _____

Street Address _____ Municipality _____

16. Signature _____ Printed Name _____

Street Address _____ Municipality _____

17. Signature _____ Printed Name _____

Street Address _____ Municipality _____

18. Signature _____ Printed Name _____

Street Address _____ Municipality _____

19. Signature _____ Printed Name _____

Street Address _____ Municipality _____

20. Signature _____ Printed Name _____

Street Address _____ Municipality _____

“NOTICE”

All candidates are required by law to comply with the provisions of the NJ Campaign Contributions and Expenditures Reporting Act. For further information, please call the Election Law Enforcement Commission at (609) 292-8700.

COUNTY OFFICE

State of New Jersey
County of Atlantic } ss

_____ being duly sworn, upon his oath says that he is one of the signers of the petition hereto annexed; that such petition is signed by each of the signers thereof in his own proper handwriting; that each of the signers are, to the best of knowledge and belief of deponent, legal voters of the County of Atlantic, of the State of New Jersey, as stated in said petition and belong to the political party named in said petition, and that said petition is prepared and filed in absolute good faith for the sole purpose of endorsing the person of persons therein named in order to secure his or their nomination or selection as stated in said petition.

Signature of Signer

Subscribed and sworn to before me at this
_____ day of _____ 20____

Notary Public

CANDIDATE’S REQEUST FOR DESIGNATION ON OFFICIAL PRIMARY BALLOT

The above candidate, having been endorsed for the office mentioned in this petition does hereby request that there be printed opposite his name on the said primary ticket, the following designation:

Must not exceed 6 words – Must not exceed 46 total spaces

CERTIFICATE OF ACCEPTANCE

I, the undersigned, hereby certify that I am a resident of and legal voter in the jurisdiction of the office for which I have been nominated (NJSA 19:13-8).

Signature of Candidate

OATH OF ALLEGIANCE

I, _____, do sincerely profess and swear, that I do and will bear true faith and allegiance to the government established in this State, under the authority of the people. So help me God.

Signature of Candidate

Subscribed and sworn to before me at this
_____ day of _____ 20____

Notary Public

**COMMITTEE ON VACANCIES
(APPLIES ONLY TO COUNTY OFFICES)**

List below the name and address of three (3) petition signers whom the candidate authorizes to designate a replacement candidate for him/her in the event that he/she cannot serve as a candidate.

(NJSA 19:23-12)

Name _____ Address (Please include City, State & Zip Code) _____

1. _____

2. _____

3. _____