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 COMMITTEE PETITION

REQUIRED NUMBER OF SIGNATURES:

Please contact the Municipal Clerk's Elections Department, for candidate petition information. The required number of signatures on petitions may vary according to districts and office sought.

COUNTY COMMITTEE PETITION

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 Act". For further information, please call (609) 292-8700, New Jersey Election Law Enforcement Commission (NJSA 19:23-7).

NOTE: "...no person 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 unit 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". (NJSA 40A:9-1.13)

TO THE HONORABLE	
County of Atlantic, State of New Jersey the Pa preceding the execution of this petition herein named; and that we intend to aff the man and woman hereinafter mentio Committee Unit #(Unit	hat we reside in the Municipality of, y, and that we are qualified voters therein; that we are members of arty, and at the last election for Members of the General Assembly we voting for a majority of the candidates of the political party filiate with the said party at the ensuing election; that we endorse ned as candidates for nomination to the office of County of Representation), and we request that you cause to be printed party the names of said persons as candidates for such nomination.
We further certify that the	e candidates' correct names and addresses are as follows:
COMMITTEEMAN:	COMMITTEEWOMAN:
Name:	Name:
Street Address	Street Address
P.O. Address	P.O. Address
Municipality	Municipality

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NAME OF CANDIDATE:	
TITLE OF OFFICE SOUGHT: _	

ATTENTION: 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
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

NAME OF CANDIDATE(S):
TITLE OF OFFICE SOUGHT:

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

	TOU MUST TRIVE TOUR NAME	AND ADDRESS AFTER TOUR SIGNATURE:
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
21.	Signature	Printed Name
	Street Address_	_Municipality
22.	Signature	Printed Name
	Street Address_	_Municipality
23.	Signature	Printed Name
	Street Address	_Municipality
24.	Signature_	Printed Name
	Street Address_	_Municipality
25.	Signature	Printed Name
	Street Address_	Municipality
26.	Signature_	Printed Name
	Street Address_	_Municipality
27.	Signature_	Printed Name
	Street Address_	_Municipality
28.	Signature	Printed Name
	Street Address	Municipality
29.	Signature	_Printed Name
-	Street Address	Municipality
30.	Signature_	_Printed Name
•	Street Address_	_Municipality

COUNTY COMMITTEE

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 knowledge and belief of deponent, legal voters of the municipality of ____ _____, 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 or persons therein named in order to secure his or their nominations or selection as stated in said petition. Subscribed and sworn to before me at Signature of Signer day of Notary Public ****** CANDIDATE'S REQUEST FOR DESIGNATION ON OFFICIAL PRIMARY BALLOT The above candidates, having been endorsed for the office mentioned in this petition do hereby request that there be printed opposite their names on the said primary ticket, the following designation: Must not exceed 6 words – Must not exceed 46 total spaces ***** CERTIFICATE OF ACCEPTANCE We, the undersigned, hereby certify that we are members of the _ _Party and qualified for the office mentioned in said petition; that we are residents of and legal voters in the jurisdiction for the office for which the nomination is to be made; that we consent to stand at the ensuing Primary Election, and that if nominated, we agree to accept the nomination. Signature of Candidate Signature of Candidate ****** **OATH OF ALLEGIANCE** , 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___ Notary Public ***** OATH OF ALLEGIANCE _, 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 day of

Notary Public

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