

# NOMINATING PETITION FOR GENERAL ELECTION INDEPENDENT CANDIDATES

## 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 the Election Law Enforcement Commission at 609-292-8700 or toll free within New Jersey at 1-888-313-ELEC (3532).** *(N.J.S.A. 19:13-4)*

### **INSTRUCTIONS FOR INDEPENDENT PETITION** *(N.J.S.A. 19:13-4)*

One or more petitions may be circulated and filed on behalf of Candidate(s) providing:

1. This petition is to be used by Independent Candidates for County and Municipal Offices.
2. No person shall be eligible to become a candidate for any local elective office unless he/she 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 prior to the date upon the election is to be held, or prior to the date upon which the appointment is to be made. *(N.J.S.A. 40A:9-1.13)*  
NOTE: No person shall be eligible to the office of sheriff of any county unless he shall have been a citizen of the United States and a resident of the county for at least 3 years next preceding his/her election. *(N.J.S.A. 40A:9-94)*
3. Please contact the election department at 609-625-7000 ext. 5232 for the required number of signatures. The signers of the petition are qualified voters and reside in the County or Municipality for which the Candidate is the nominee for office. *(N.J.S.A. 19:13-5)*
4. The circulator of the petition must complete affidavit portion, and must witness signatures he/she is gathering. *(N.J.S.A. 19:13-7)*
5. The Circulator must sign their name & address, and attest that they collected all of the signatures for the Candidate; and have it notarized. The circulator does not have to be a signer of the petition, but must be 18 years of age or older, a citizen of the United States; and reside within the State of New Jersey. *(N.J.S.A. 19:13-7)*
6. The Candidate must take the Oath of Allegiance before an officer authorized by law to take oaths. The Candidate must sign the certificate of acceptance stating that they are qualified for the office. *(N.J.S.A. 19:13-8)*
7. The Independent Petition must be filed with the Atlantic County Clerk, by 4:00 pm of the day of the primary election. *(N.J.S.A. 19:13-9)*

(COMPLETE ALL INFORMATION ON THIS PAGE PRIOR TO CIRCULATION)

INDEPENDENT PETITION NOMINATING CANDIDATE FOR  
ATLANTIC COUNTY OR MUNICIPAL OFFICE

Petition for: \_\_\_\_\_ Term of Office: \_\_\_\_\_  
Title of Office

I, the undersigned, hereby certify the following statements are true:

1. I reside in Atlantic County, State of New Jersey;
2. I am a qualified voter;
3. I endorse the person(s) hereinafter mentioned as candidates for nomination for the office of:

\_\_\_\_\_

**Please print clearly or type in this section:**

We further certify that the name, place of residence and post office address, and the title for which said candidate is named, are as follows: *(N.J.S.A. 19:13-4)*

Name of Candidate

Street Residence/Post Office Address

City

Zip Code

\_\_\_\_\_

**SLOGAN DESIRED:**

\_\_\_\_\_

Must not exceed 3 words – Must not exceed 46 total spaces *(N.J.S.A. 19:13-4)*

**Candidate:** \_\_\_\_\_

**Office:** \_\_\_\_\_

1. \_\_\_\_\_  
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**Candidate:** \_\_\_\_\_

**Office:** \_\_\_\_\_

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**Candidate:** \_\_\_\_\_

**Office:** \_\_\_\_\_

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**Candidate:** \_\_\_\_\_

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**Candidate:** \_\_\_\_\_

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**Candidate:** \_\_\_\_\_

**Office:** \_\_\_\_\_

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**Candidate:** \_\_\_\_\_

**Office:** \_\_\_\_\_

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Residence Address (Number & Street)

\_\_\_\_\_  
Print Name  
\_\_\_\_\_  
City

118. \_\_\_\_\_  
Signature  
\_\_\_\_\_  
Residence Address (Number & Street)

\_\_\_\_\_  
Print Name  
\_\_\_\_\_  
City

119. \_\_\_\_\_  
Signature  
\_\_\_\_\_  
Residence Address (Number & Street)

\_\_\_\_\_  
Print Name  
\_\_\_\_\_  
City

120. \_\_\_\_\_  
Signature  
\_\_\_\_\_  
Residence Address (Number & Street)

\_\_\_\_\_  
Print Name  
\_\_\_\_\_  
City

**Candidate:** \_\_\_\_\_

**Office:** \_\_\_\_\_

121. \_\_\_\_\_  
Signature

\_\_\_\_\_  
Residence Address (Number & Street)

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
City

122. \_\_\_\_\_  
Signature

\_\_\_\_\_  
Residence Address (Number & Street)

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
City

123. \_\_\_\_\_  
Signature

\_\_\_\_\_  
Residence Address (Number & Street)

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
City

124. \_\_\_\_\_  
Signature

\_\_\_\_\_  
Residence Address (Number & Street)

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
City

125. \_\_\_\_\_  
Signature

\_\_\_\_\_  
Residence Address (Number & Street)

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
City

126. \_\_\_\_\_  
Signature

\_\_\_\_\_  
Residence Address (Number & Street)

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
City

127. \_\_\_\_\_  
Signature

\_\_\_\_\_  
Residence Address (Number & Street)

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
City

128. \_\_\_\_\_  
Signature

\_\_\_\_\_  
Residence Address (Number & Street)

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
City

129. \_\_\_\_\_  
Signature

\_\_\_\_\_  
Residence Address (Number & Street)

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
City

130. \_\_\_\_\_  
Signature

\_\_\_\_\_  
Residence Address (Number & Street)

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
City

**AFFIDAVIT OF PERSON WHO CIRCULATES THIS PETITION**

***Note: A candidate may sign and circulate his/her own petition. The circulator does not have to be a signer on the petition, but must be 18 years of age or older, a resident and of New Jersey, a citizen of the United States, and not otherwise disqualified under the New Jersey Constitution.***

State of New Jersey    }  
County of Atlantic    }    SS.

I, \_\_\_\_\_, being duly sworn upon my oath, depose that I circulated this petition and saw all the signatures made hereto and that each of the signers signed in his/her own proper handwriting; that each of such signers is, to the best of my knowledge and belief, a legal voter of the County of Atlantic in the State of New Jersey, as stated in said petition, and that such petition is prepared and filed in absolute good faith for the sole purpose of endorsing the person therein named in order to secure his/her nomination or selection as stated in said petition; and further affirms that he/she is a registered voter in the State of New Jersey.

Subscribed and sworn to before me at:

\_\_\_\_\_, N.J.,

\_\_\_\_\_  
Signature of Circulator

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ A.D.

\_\_\_\_\_  
Notary Public



**OATH OF ALLEGIANCE**

State of New Jersey }  
County of Atlantic } SS.

I, \_\_\_\_\_, do solemnly swear (or affirm) that I will support the Constitution of the United States and the Constitution of the State of New Jersey; 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.

Subscribed and sworn to before me at:

\_\_\_\_\_, N.J.,

\_\_\_\_\_  
Signature of Candidate

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ A.D.

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Signature of Candidate

**CERTIFICATE OF ACCEPTANCE**

To Be Signed by Candidate

I, the undersigned, hereby certify that I or we am/are a resident of and a legal voter in the jurisdiction of the office for which the nomination is made, and that I or we have not signed an acceptance for the primary nomination or any other petition of nomination under this chapter for such office. (R.S. 19:13-8)

\_\_\_\_\_  
Signature of Candidate

\_\_\_\_\_  
Type of Print Name of Candidate

\_\_\_\_\_  
Residence/Street Address

\_\_\_\_\_  
City/Town

\_\_\_\_\_  
Zip Code

**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 the Election Law Enforcement Commission at 609-292-8700 or toll-free within New Jersey at 1-888-313-ELEC (3532) (N.J.S.A. 19:13-4).***