

PETITION FOR MEMBER(S) OF COUNTY COMMITTEE

TO: The Municipal Clerk of _____

Political Party _____ Ward (if any) _____ District _____

CANDIDATE(S) INFORMATION

NAME	
RESIDENCE ADDRESS	
P.O. ADDRESS (if different)	
EMAIL ADDRESS	

NAME	
RESIDENCE ADDRESS	
P.O. ADDRESS (if different)	
EMAIL ADDRESS	

CANDIDATE REQUEST FOR DESIGNATION ON THE OFFICIAL PRIMARY BALLOT (optional)

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

(Must not exceed six words)

We the undersigned, hereby certify that we reside in the above indicated municipality, ward, if any and election district of the State of New Jersey, and that we are qualified voters therein; that we are members of the above indicated Party, and that we intend to affiliate with the said party at the ensuing election; that we endorse the above mentioned person as a candidate for election in the position of Member of the County Committee and that we request that you print upon the official Primary Ballot of said party the name of said person as the candidate for such position; we further certify that the residence and Post Office address of the said person so endorsed is as above set forth, and that the said person so endorsed is legally qualified under the laws of the State of New Jersey to be elected to said position and is a member of the political party named in this petition.

SIGNATURE SHEET

Signature, name and residence address of registered voter:

1.	Signature		Print Name
	Residence Address (Number and Street)		City
2.	Signature		Print Name
	Residence Address (Number and Street)		City
3.	Signature		Print Name
	Residence Address (Number and Street)		City

SIGNATURE SHEET

Signature, name and residence address of registered voter:

4.	_____ Signature	_____ Print Name
	_____ Residence Address (Number and Street)	_____ City
5.	_____ Signature	_____ Print Name
	_____ Residence Address (Number and Street)	_____ City
6.	_____ Signature	_____ Print Name
	_____ Residence Address (Number and Street)	_____ City
7.	_____ Signature	_____ Print Name
	_____ Residence Address (Number and Street)	_____ City
8.	_____ Signature	_____ Print Name
	_____ Residence Address (Number and Street)	_____ City
9.	_____ Signature	_____ Print Name
	_____ Residence Address (Number and Street)	_____ City
10.	_____ Signature	_____ Print Name
	_____ Residence Address (Number and Street)	_____ City
11.	_____ Signature	_____ Print Name
	_____ Residence Address (Number and Street)	_____ City
12.	_____ Signature	_____ Print Name
	_____ Residence Address (Number and Street)	_____ City
13.	_____ Signature	_____ Print Name
	_____ Residence Address (Number and Street)	_____ City

SIGNATURE SHEET

Signature, name and residence address of registered voter:

14.	Signature	Print Name
	Residence Address (Number and Street)	City
15.	Signature	Print Name
	Residence Address (Number and Street)	City
16.	Signature	Print Name
	Residence Address (Number and Street)	City
17.	Signature	Print Name
	Residence Address (Number and Street)	City
18.	Signature	Print Name
	Residence Address (Number and Street)	City
19.	Signature	Print Name
	Residence Address (Number and Street)	City
20.	Signature	Print Name
	Residence Address (Number and Street)	City
21.	Signature	Print Name
	Residence Address (Number and Street)	City
22.	Signature	Print Name
	Residence Address (Number and Street)	City
23.	Signature	Print Name
	Residence Address (Number and Street)	City

CERTIFICATE OF ACCEPTANCE

I, the undersigned hereby certify that I am qualified for the position of Member of County Committee mentioned in the foregoing petition, that I am a member of the political party named in the foregoing petition, and that I consent to stand at the ensuing Primary Election as a candidate for the election and that if elected, I agree to accept the position; and I do further certify that I am a resident of and a legal voter in the municipality, ward, if any and election district hereinbefore mentioned.

Signature of Candidate

Type/Print Name of Candidate

AFFIDAVIT OF PERSON WHO CIRCULATES THIS PETITION AND WITNESSES SIGNATURES

The 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 solicits and sign in the presence of a person authorized to administer affidavits (e.g., Notary Public).

State of New Jersey }
 } SS.
County of Morris }

The undersigned being duly sworn upon his or her oath deposes that the petition is signed by each of the signers thereto in his own proper handwriting; that each of said signers is to the best of the knowledge and belief of deponent a legal voter of the Municipality, Ward, if any and election district as stated in said petition, and belongs to the political party named in said petition, and that such petition is prepared and filed in absolute good faith for the sole purpose on endorsing the person therein named in order to secure his or her election to the position of Member of the County Committee as stated in said petition.

Subscribed and sworn to before me

the _____ day of _____

Signature of Circulator

A.D. _____

Type/Print Name of Circulator

Signature of Notary or Attorney

Street Address of Circulator

INSTRUCTIONS

1. Read petition carefully and fill in all the information where required.
2. Contact your Municipal Clerk for the number of signatures required or, alternatively, obtain at least 10.
3. The petition must be signed by legally qualified voters residing in the above indicated municipality, ward, if any, and election district.
4. Signers must sign in their own handwriting in the presence of one other signer.
5. The person (circulator) in whose presence the petition was signed must make the affidavit before an officer authorized by law to take affidavits.

**PETITION MUST BE FILED WITH YOUR MUNICIPAL CLERK
ON OR BEFORE 4:00 P.M.
71 DAYS PRIOR TO THE PRIMARY ELECTION**