

Primary Petition Nominating Candidate(s) For County Office(s)

TO THE CLERK OF THE COUNTY OF CAPE MAY:

We, the undersigned, hereby certify that we reside in the County of Cape May, of the 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 said party at the ensuing election; that we endorse the person(s) hereinafter mentioned as candidate(s) for nomination to the office named below, and we request that you cause to be printed upon the Official Primary Ballot of said party the name(s) of the said person(s) as candidate(s) for such nomination.

We further certify that the office for which said person(s) is or are named, the residence and post-office address(es) of said person(s) so endorsed are as follows:

FOR THE OFFICE OF _____

CANDIDATES

<u>Name</u>	<u>Residence Address</u>	<u>Mailing Address</u>	<u>E-mail Address</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

We further certify that the said persons so endorsed are legally qualified under the laws of this State to be nominated for said offices, and are members of the political party named in this petition.

We do further certify that the names and post-office addresses of the three members named as a **COMMITTEE ON VACANCIES** are as follows:

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

**CANDIDATES REQUEST FOR DESIGNATION
ON THE OFFICIAL PRIMARY BALLOT**

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

(Must not exceed six words)

SIGNATURES OF PETITIONERS

SIGNATURE & PRINTED NAME

RESIDENCE & MAILING ADDRESS

1.	<hr/> <hr/>
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5.	<hr/> <hr/>
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SIGNATURE & PRINTED NAME

RESIDENCE & MAILING ADDRESS

8. _____

9. _____

10. _____

11. _____

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13. _____

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18. _____

SIGNATURE & PRINTED NAME

RESIDENCE & MAILING ADDRESS

19. _____

20. _____

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SIGNATURE & PRINTED NAME

RESIDENCE & MAILING ADDRESS

30. _____

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SIGNATURE & PRINTED NAME

RESIDENCE & MAILING ADDRESS

41. _____

42. _____

43. _____

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SIGNATURE & PRINTED NAME

RESIDENCE & MAILING ADDRESS

52. _____

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SIGNATURE & PRINTED NAME

RESIDENCE & MAILING ADDRESS

63. _____

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SIGNATURE & PRINTED NAME

RESIDENCE & MAILING ADDRESS

74. _____

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SIGNATURE & PRINTED NAME

RESIDENCE & MAILING ADDRESS

85. _____

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SIGNATURE & PRINTED NAME

RESIDENCE & MAILING ADDRESS

96. _____

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100. _____

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 OR TOLL FREE WITHIN NJ AT 1-888-313-ELEC (3532).

CERTIFICATE OF ACCEPTANCE

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

_____ (Signature of Candidate)

_____ (Signature of Candidate)

_____ (Signature of Candidate)

_____ (Signature of Candidate)

AFFIDAVIT

STATE OF NEW JERSEY, COUNTY OF CAPE MAY, ss.

_____ being duly sworn, upon his/her oath deposes and says that said petition is signed by each of the signers thereto in his/her own proper handwriting; that each of the signers thereto is, to the best of the knowledge and belief of this deponent, a legal voter of the Municipality and Ward, if applicable, as stated in said petition, and belongs to the political party named in said petition, and that this petition is prepared and filed in absolute good faith for the sole purpose of endorsing the person(s) therein named in order to secure his, her or their nomination as candidate(s) for office, as therein stated.

Sworn to before me this _____ day
of _____ 20 ____

Signature of Officer

Signature of Deponent

Title of Officer

OATH OF ALLEGIANCE

"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, 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."

Signature of Candidate

Printed Name of Candidate

Signature of Candidate

Printed Name of Candidate

Signature of Candidate

Printed Name of Candidate

Signature of Candidate

Printed Name of Candidate

Sworn to before me this _____ day
of _____ 20 ____

Signature of Officer

Title of Officer

INSTRUCTIONS

1. Read Petition carefully and fill in all blank spaces where required.
2. **The number of signatures required is 100 for County Office.** For questions please contact the Cape May County Clerk's office at 465-1014
3. Petitioners must sign in their own handwriting, giving their printed name and residence address under the words "Signatures of Petitioners", in the presence of someone.
4. The person in whose presence the Petition was signed must make the affidavit before an officer authorized by law to take affidavits.
5. The Candidate or Candidates must sign the Certificate of Acceptance, stating that he/she or they is/are qualified for the office and a member of the political party mentioned in the Petition.
6. The Candidate or Candidates must take the Oath of Allegiance before an officer authorized by law to administer oaths.
7. File the Petition with the County Clerk not later than 4:00 p.m. 64 days prior to the date of the Primary Election.