

INSTRUCTIONS / GUIDELINES
PETITION FOR MUNICIPAL CANDIDATE(S)

1. Read Petition carefully and fill in all blank spaces where required.
2. Petitioners must sign in their own handwriting matching the signature in the voter registry records. They must provide their correct residence or post office address in the presence of the Affiant/Circulator. The circulator/witness must sign the inside of the petition and check the line where his/her signature appears.
3. For local elections, the Mayor must file a separate petition from Council.
4. For a joint petition, place the names in the order they are to appear on the ballot.
5. The person in whose presence the Petition was signed MUST be one of the signers of the petition and make an affidavit as Affiant before a notary or other officer authorized by law to take affidavits.
6. The Candidate(s) must sign the Certificate of Acceptance stating that he/she/they is/are qualified for the office in the Petition. Candidate must be a registered voter and resident of Salem County one year prior to the date of the next General Election. (Chapter 94 Laws of 1980)
7. The Petition must be signed by legally qualified voters of the State of NJ residing in the County of Salem. The Petition must be signed by at least 2% of the legally qualified voters of the votes cast for Members of the General Assembly at the last preceding General Election for which nominations for the General Assembly were made in the County in the case of County Officers or in the Municipality in the case of Municipal Officers provided that no more than 100 signers are required in any case. (N.J.S.A. 19:13-5).
8. No individual shall be eligible to be a Candidate unless individual is a registered voter in that Municipality and or Ward. Individual was or will be a resident of the Municipality and or Ward one year prior to the date of the election and must be 18 years of age or older.

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).

**PETITION FOR PRIMARY ELECTION
MUNICIPAL CANDIDATE(S)**

**PETITION MUST BE FILED WITH THE MUNICIPAL CLERK'S OFFICE BY 4:00PM OF THE 64TH DAY BEFORE
PRIMARY ELECTION (MONDAY, APRIL 5TH, 2021) – subject to change due to COVID**

TO: Municipal Clerk

Each signer of this petition certifies that the following statements are true:

- 1) I reside in the State of New Jersey in the County of Salem _____
(Borough/City/Township)
- 2) I am a qualified voter therein;
- 3) I am a member of the _____ Party;
- 4) I endorse the person hereinafter mentioned as candidate for the nomination for the
office of _____;
- 5) I have not signed any other petition of nomination for the primary or the general election for such office;
- 6) I request that you cause to be printed upon the official primary ballot of the said party the name of said person(s) as the
candidate(s) for such nomination (N.J.S.A. 19:23-7).

CANDIDATE(S)

NAME

RESIDENCE ADDRESS, CITY AND ZIP CODE

Telephone

Email address

NAME

RESIDENCE ADDRESS, CITY AND ZIP CODE

Telephone

Email address

CANDIDATES REQUEST FOR SLOGAN

The candidate endorsed for the office mentioned in this petition, does hereby request that there be printed below his/her name on the said Primary ticket the following designation:

(Must Not Exceed Six Words)

We, the undersigned, hereby certify that we reside in the above indicated municipality 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 person hereinafter mentioned as candidate for election to 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.

ALL SIGNERS MUST SIGN AND PRINT NAMES IN COMPLIANCE WITH NJRS 19:23-7, EFF. 01/01/1995

CANDIDATE NAMES: _____

OFFICE: _____

Signature

Print Name

Resident Address

City, State and Zip Code

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Resident Address

City, State and Zip Code

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CIRCULATOR AFFIDAVIT

I, _____,

(Circulator Printed Name)

being duly sworn upon oath, depose that I saw all the signatures made hereto and that each of the signers signed in his or her own proper handwriting, that each of the said signers is to the best of my knowledge and belief and legal voter in the municipality and election district as stated in this petition and belongs to the political party named in this 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 or her nomination as candidate for the office as stated in this petition.

I further depose that I am registered to vote in the State of New Jersey and I am affiliated with the political party of the candidate named in this position.

**NOTARY REQUIREMENT SUSPENDED DURING COVID-19 EMERGENCY
(P.L. 2020 CH 55)**

STATE OF NEW JERSEY:

SS.

COUNTY OF SALEM

Subscribed and sworn to before me this _____ day of _____ 2021.

(Officer authorized to take oaths in New Jersey)

(Printed name of Officer)

(Commission Expiration Date)

(Signature of Circulator)

(Street Address of Circulator/Witness)

(City, State)

(Zip Code)

CANDIDATE CERTIFICATE OF ACCEPTANCE

I or we 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 under this chapter for such office. (R.S. 19:13-8)

Signature of Candidate

Type or Print Name of Candidate

Signature of Candidate

Type or Print Name of Candidate

OATH OF ALLEGIANCE

**State of New Jersey
County of Salem**

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.

**NOTARY REQUIREMENT SUSPENDED DURING COVID-19 EMERGENCY
(P.L. 2020 CH 55)**

Sworn and subscribed to before me this

_____ day of _____ 20____.

(Signature of Candidate #1)

(Notary, Attorney, or Officer taking Oath)

**State of New Jersey
County of Salem**

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.

**NOTARY REQUIREMENT SUSPENDED DURING COVID-19 EMERGENCY
(P.L. 2020 CH 55)**

Sworn and subscribed to before me this

_____ day of _____ 20____.

(Signature of Candidate #2)

(Notary, Attorney, or Officer taking Oath)