

PRIMARY PETITION FOR MEMBER OF COUNTY COMMITTEE

TO: The MUNICIPAL CLERK of the _____ of _____
(Town, Township, Borough)

CANDIDATE NAME: _____

CANDIDATE RESIDENCE: _____

CANDIDATE MAILING ADDRESS: _____

Party Affiliation: <input type="checkbox"/> Rep <input type="checkbox"/> Dem	Municipality: _____	Election District: _____
Member of: <input type="checkbox"/> Male <input type="checkbox"/> Female		

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
(Further instructions on Page 3 of this petition)

1.	_____ Signature	_____ Print Name
	_____ Residence Address (Number & Street)	_____ (Town & Zip Code)
2.	_____ Signature	_____ Print Name
	_____ Residence Address (Number & Street)	_____ (Town & Zip Code)
3.	_____ Signature	_____ Print Name
	_____ Residence Address (Number & Street)	_____ (Town & Zip Code)
4.	_____ Signature	_____ Print Name
	_____ Residence Address (Number & Street)	_____ (Town & Zip Code)

(Continued)

