

CANDIDATE'S REQUEST FOR SLOGAN ON THE OFFICIAL PRIMARY BALLOT

The candidate herein having been endorsed for the office mentioned in this petition, does hereby request that there be printed opposite the name of the candidate on the said primary ballot the following slogan:

(Slogan must not exceed six words and must be in accord with N.J.S.A. 19:23-17. If slogan includes the name of any person other than the candidate or any incorporated association of this State, written consent must be attached.)

County	Slogan (Please Print or Type)
1. ATLANTIC	_____
2. BERGEN	_____
3. BURLINGTON	_____
4. CAMDEN	_____
5. CAPE MAY	_____
6. CUMBERLAND	_____
7. ESSEX	_____
8. GLOUCESTER	_____
9. HUDSON	_____
10. HUNTERDON	_____
11. MERCER	_____
12. MIDDLESEX	_____
13. MONMOUTH	_____
14. MORRIS	_____
15. OCEAN	_____
16. PASSAIC	_____
17. SALEM	_____
18. SOMERSET	_____
19. SUSSEX	_____
20. UNION	_____
21. WARREN	_____

SIGNATURE SHEET

Signature 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)

4. _____
Signature Print Name

Residence Address(Number and Street) (City)

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Residence Address(Number and Street) (City)

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Signature Print Name

Residence Address(Number and Street) (City)

10. _____
Signature Print Name

Residence Address(Number and Street) (City)

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Signature and residence address of registered voter:

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Residence Address(Number and Street) (City)

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Residence Address(Number and Street) (City)

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Signature Print Name

Residence Address(Number and Street) (City)

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Signature Print Name

Residence Address(Number and Street) (City)

19. _____
Signature Print Name

Residence Address(Number and Street) (City)

20. _____
Signature Print Name

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SIGNATURE SHEET

Signature and residence address of registered voter:

21. _____
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Residence Address(Number and Street) (City)

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Signature Print Name

Residence Address(Number and Street) (City)

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Signature Print Name

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Residence Address(Number and Street) (City)

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Residence Address(Number and Street) (City)

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Signature Print Name

Residence Address(Number and Street) (City)

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Signature Print Name

Residence Address(Number and Street) (City)

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Signature and residence address of registered voter:

31. _____
Signature Print Name

Residence Address(Number and Street) (City)

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Signature Print Name

Residence Address(Number and Street) (City)

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Signature Print Name

Residence Address(Number and Street) (City)

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Signature Print Name

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Signature Print Name

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Signature and residence address of registered voter:

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Signature Print Name

Residence Address(Number and Street) (City)

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Signature Print Name

Residence Address(Number and Street) (City)

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Signature Print Name

Residence Address(Number and Street) (City)

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Residence Address(Number and Street) (City)

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Signature and residence address of registered voter:

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Signature and residence address of registered voter:

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Signature Print Name

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Signature Print Name

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Signature and residence address of registered voter:

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Signature Print Name

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Signature Print Name

Residence Address(Number and Street) (City)

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Signature Print Name

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Residence Address(Number and Street) (City)

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Residence Address(Number and Street) (City)

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Signature Print Name

Residence Address(Number and Street) (City)

SIGNATURE SHEET

Signature and residence address of registered voter:

81. _____
Signature Print Name

Residence Address(Number and Street) (City)

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Signature Print Name

Residence Address(Number and Street) (City)

83. _____
Signature Print Name

Residence Address(Number and Street) (City)

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Signature Print Name

Residence Address(Number and Street) (City)

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Signature Print Name

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Residence Address(Number and Street) (City)

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Signature Print Name

Residence Address(Number and Street) (City)

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Signature Print Name

Residence Address(Number and Street) (City)

89. _____
Signature Print Name

Residence Address(Number and Street) (City)

90. _____
Signature Print Name

Residence Address(Number and Street) (City)

**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 sign an affidavit in the presence of a person authorized to administer affidavits (e.g., notary public), and sign one signature sheet endorsing the candidate.

State of New Jersey :
: ss.
County of _____ :

I, _____
(Print Name of Circulator/Witness)

being duly sworn, upon my oath say that I am one of the signers of this petition; that such petition was signed by each of the signers thereof 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 State of New Jersey, 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 of endorsing the person herein named in order to secure his or her nomination or selection.

Sworn and subscribed to before me at

_____, N.J., _____
(Signature of Circulator/Witness)
this _____ day of _____
(Day) (Street Address of Circulator/Witness)
_____, 20_____
(Month) (Year) _____ (City or Town) (Zip Code)

OATH OF ALLEGIANCE

State of New Jersey :

: SS.

County of _____:

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.

Sworn and subscribed to before me at

_____, N.J., _____
Signature of Candidate

this _____ day of
(Day)

_____, 20_____
(Month) (Year)

CERTIFICATE OF ACCEPTANCE TO BE SIGNED BY CANDIDATE

(Candidate need only sign this page once for all petitions)

I, the undersigned, hereby certify that I accept the nomination herein and that I am a resident of and a legal voter in the jurisdiction of the office for which the nomination is being made, and that I am qualified for the office mentioned in this petition and I consent to stand as a candidate for this nomination.

(Signature of Candidate)

(Printed or Typewritten Name of Candidate)

(Residence Address)

(City or Town)

(Zip Code)

QUALIFICATIONS FOR GOVERNOR

Minimum Age: 30 years

Citizen of the United States for 20 years

A resident of New Jersey for 7 years next before nominee's election (N.J. Constitution, Article V, Section 1, Para. 2)

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 (609) 292-8700.

Each candidate must sign an Oath of Allegiance and Certificate of Acceptance