## PETITION FOR MEMBER OF THE UNITED STATES HOUSE OF REPRESENTATIVES

100 Signatures Required (N.J.S.A. 19:13-5)

PETITION OF DIRECT NOMINATION FOR THE GENERAL ELECTION			For Division of Elections Use:	
CONGRESSIONAL DISTRICT  To the Honorable Secretary of State: (N.J.S.A. 19:13-3)			Total Number of Signatures on this Petition	
			Total Number of Signatures on all Petitions	
Each signer of this petition certifies that the follo	wing statements are true:			
1) I reside in the State of New Jersey in the 2) I am a qualified voter therein; 3) I have not signed any other petition of nomi 4) I request that you cause to be printed upon  Name of Candidate:  (Name must appear the same on all petition booklets to be filed.)	nation for the primary or for the o	general election for su		
(Name must appear the same on an pention bookiets to be filed.)	(гтеаѕе риш от туре паше)			
Residential Address	City	Zip Code		
Post Office Address	City	Zip Code		
(Candidate Email Address)				

ALL INFORMATION ABOVE MUST BE COMPLETED PRIOR TO CIRCULATION

Petition filing deadline - Before 4 p.m. on June 4, 2024 (N.J.S.A.19:13-9)

Signature	Print Name	Residence Address (Number, Street, City, Zip Code)
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Signature	Print Name	Residence Address (Number, Street, City, Zip Code)
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12.		
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20.		

Signature	Print Name	Residence Address (Number, Street, City, Zip Code)
21.		
22.		
23.		
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26.		
27.		
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30.		

Signature	Print Name	Residence Address (Number, Street, City, Zip Code)
31.		
32.		
52.		
33.		
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Signature	Print Name	Residence Address (Number, Street, City, Zip Code)
41.		
42.		
43.		
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Signature	Print Name	Residence Address (Number, Street, City, Zip Code)
51.		
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Signature	Print Name	Residence Address (Number, Street, City, Zip Code)
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Signature	Print Name	Residence Address (Number, Street, City, Zip Code)
71.		
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Signature	Print Name	Residence Address (Number, Street, City, Zip Code)
81.		
82.		
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Signature	Print Name	Residence Address (Number, Street, City, Zip Code)
91.		
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## AFFIDAVIT OF PERSON WHO CIRCULATES THIS PETITION AND WITNESSES SIGNATURES

(N.J.S.A. 19:13-7)

The circulator/witness taking the affidavit below must be the person who obtained the names on this set of signatures or several sets of signatures. The circular/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	:			
(Print Name of Circ the petition and saw all the	culator/Witness) signatures made thereto and veo		qualified voters. I a	good faith, that I personally circulated am at least 18 years of age, a citizen of ersey.
	N.J., on			
(List County where Affidavit v	· · · · · · · · · · · · · · · · · · ·	(Signature of Circulator/Witness)		
this	day of			
(Da	•	(Residence Address of Circulator/Witness)		
	, 20			
(Month)	(Year)	(City or Town of Circulator/Witness)	(Zip Code)	
(Notary S	Signature)			
(My Commiss	sion Expires)			(Place Notary Stamp in the area above)

#### CANDIDATE'S REQUEST FOR SLOGAN ON THE OFFICIAL GENERAL ELECTION BALLOT

The candidate named in this petition requests that there be printed on the general election ballot the following slogan: (Slogan must not exceed three words and must be in accord with N.J.S.A. 19:13-4. If slogan includes the name of any person other than the candidate or any incorporated association of this State, written consent of such person or incorporated association of this State must be attached.)

<u>County</u>	<u>Slogan</u> (Please Print or Type)
1	
2	
3	
4	
4	
5	
6	

**NOTE:** There are up to six counties in a congressional district, so enough lines are provided above for the purpose of identifying slogans in each county where the nominee is a candidate.

# OATH OF ALLEGIANCE Candidate Need Only Sign This Page Once for All Petitions

#### QUALIFICATIONS FOR CANDIDATE FOR THE OFFICE OF MEMBER OF THE UNITED STATES HOUSE OF REPRESENTATIVES

Shall have attained the age of 25 years by the day of the swearing into office
United States Citizen for 7 years by the day of the swearing into office
Resident of New Jersey as of the day of the General Election

State of New Jersey	:				
County of	: SS. :				
(Print Name of House of Representative Candi State of New Jersey; that I will be ne authority of the people. So h	date) ear true faith and a			ted States and the Constitution of the he United States and in this State, und	ret
Subscribed and sworn before me	e at:				
(List County where Oath was signed	N.J.,	(Signature of House of Rep	presentative Candidate)		
This day of		-			
(Signature of Notary or Attorney at Law	of New Jersey)				
(Print Name of Notary or Attorney at Lav	w of New Jersey)				

ALL INFORMATION IS REQUIRED TO BE COMPLETED PAGE 14

(Place Notary Stamp in the area above)

(Commission Expiration Date of Notary)

# AFFIRMATION OF ALLEGIANCE Candidate Need Only Sign This Page Once for All Petitions

#### QUALIFICATIONS FOR CANDIDATE FOR THE OFFICE OF MEMBER OF THE UNITED STATES HOUSE OF REPRESENTATIVES

Shall have attained the age of 25 years by the day of the swearing into office
United States Citizen for 7 years by the day of the swearing into office
Resident of New Jersey as of the day of the General Election

State of New Jersey	:		
County of	: SS. :		
I,	sey; that I will bear true fait	and truly declare and affirm that I will support th	
Subscribed and affirmed before me	at:		
(List County where Oath was signed and	N.J.,	(Signature of House of Representative Candidate)	
This day of(Mont	, 20 h) (Year)		
(Signature of Notary or Attorney at Law of Ne	w Jersey)		
(Print Name of Notary or Attorney at Law of N	lew Jersey)		

ALL INFORMATION IS REQUIRED TO BE COMPLETED PAGE 15

(Place Notary Stamp in the area above)

(Commission Expiration Date of Notary)

#### **DECLARATION OF ALLEGIANCE**

**Candidate Need Only Sign This Page Once for All Petitions** 

#### QUALIFICATIONS FOR CANDIDATE FOR THE OFFICE OF MEMBER OF THE UNITED STATES HOUSE OF REPRESENTATIVES

Shall have attained the age of 25 years by the day of the swearing into office
United States Citizen for 7 years by the day of the swearing into office
Resident of New Jersey as of the day of the General Election

ate of New Jerse	y :		
ounty of	:	<b>:</b> SS.	
onstitution of the	of Representative Candidate) e United States and the (	Constitution of the	resence of Almighty God, the witness of the truth of what I say, that I will support the State of New Jersey; that I will bear true faith and allegiance to the same and to the State, under the authority of the people.
ubscribed and d	leclared before me at:		
(List County	where Oath was signed and notarized	N.J.,	(Signature of House of Representative Candidate)
This	day of	, 20	
(Day)	(Month)	(Year)	
(Signature of No	otary or Attorney at Law of New Jersey	))	
(Print Name of I	Notary or Attorney at Law of New Jerse	ey)	
(Commission Ex	xpiration Date of Notary)		(Place Notary Stamp in the area above)

## CERTIFICATE OF ACCEPTANCE TO BE SIGNED BY CANDIDATE

(N.J.S.A. 19: 13-8)

, the undersigned, hereby certify that I accept the nomina he nomination is being made.	tion herein and that I am a resident of and a legal vo	ter in the jurisdiction of the office for which
	(Signature of House of Representative Candidate)	
	(Printed or Typewritten Name of House of Representative Candidate)	
	(Residence Address of House of Representative Candidate)	

Candidate Must Sign an Oath of Allegiance, Affirmation of Allegiance or Declaration of Allegiance and Certificate of Acceptance

(City or Town & Zip Code of House of Representative Candidate)