Municipality:	Ward/District
I,	, the undersigned, a registered voter of the
municipality of	, New Jersey residing at
	certify that I do hereby joir
in a petition of the nomination of	whose
residence is at	
and email address is	
For the office of	
to be voted for at the election to be held in the Mu	unicipality on the day of
(Month),	(Year) and I further certify that I know this
candidate to be a registered voter for the period r	equired by law, of the municipality and a
person of good moral character, and qualified, in	my judgment, to perform the duties of the
office and I further certify that I have not signed n	nore petitions or certificates of nominations
than there are places to be filled for the above off	ice.
SIGNATURE SHEET:	
Signature	
Name	

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.

Residence Address (Number, Street, City, Zip Code)