

**NOMINATION BY PETITION FOR PRIMARY ELECTION  
FOR COUNTY, MUNICIPAL, AND COUNTY COMMITTEE OFFICES  
19:23-5 – PRIMARY ELECTION  
19:23-17 - DESIGNATION**

**OFFICE:** County Committee **TERM OF OFFICE:** 4

(IF APPLICABLE) **WARD** \_\_\_\_\_ **DISTRICT** 2

**Democratic**

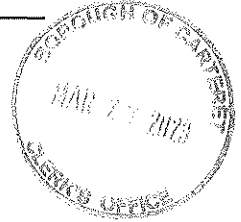
**PARTY**

**Lucretia Skinner-Walker**

(Candidate Name)

(Candidate Name)

(Candidate Name)



*Candidates must be listed in the order they wish to appear on the ballot,  
or submit an additional letter, signed by all candidates indicating the order.*

**CANDIDATE'S REQUEST FOR DESIGNATION ON THE OFFICIAL PRIMARY BALLOT**

The above candidate(s), having been endorsed for the office in this petition, does hereby request that there be printed opposite his/her name on the said primary ticket the following designation:

**Middlesex County Democratic Organization**

Must not exceed six words (R.S. 19:23-17) (19:49-2)

No person may be a **candidate** for or **appointed** to any local elective office unless he/she is a **registered voter** in the ward or municipality depending upon the office involved and has been a **resident** of the ward or municipality involved for at least **one year prior to the date of election** or the date of appointment. **40A:9-1.13** (or three years for Sheriff. **40A:9-94**)

- For **Local and County Committee offices** this petition shall be filed with your **Municipal Clerk**.
- For **County offices** this petition shall be filed with your **County Clerk**.

**CONTACT YOUR MUNICIPAL OR COUNTY CLERK FOR NUMBER OF SIGNATURES REQUIRED (19:23-8)**

**NOTICE TO ALL CANDIDATES**

**ALL CANDIDATES ARE REQUIRED BY LAW TO COMPLY WITH THE PROVISIONS OF THE NEW JERSEY CAMPAIGN CONTRIBUTION AND EXPENDITURE REPORTING ACT 19:44A-1 THRU 44. FOR FURTHER INFORMATION, PLEASE CALL (609) 292-8700 OR TOLL FREE WITHIN NJ AT 1-888-313-ELEC (3532).**

TO: Municipal Clerk (✓) County Clerk ( ) of the County of Middlesex, Municipality of Carteret  
Of the State of New Jersey.

We, the undersigned, hereby certify that we are qualified voters and that we reside in the above County and Municipality, (For Ward and County Committee Candidates fill in Ward/District) → District # 2, and that we are members of the Democratic Party and intend to affiliate with the political party at the ensuing election.

We endorse the candidate(s) nomination to the office of Committeeperson and we request that you print upon the official primary ballot for this party the name(s) of the candidate(s) for such nomination.

We further certify that the said person(s) so endorsed is legally qualified under the laws of this State to be nominated for said office (N.J.S.A. 19:23-7)

| CANDIDATE NAME                                       | RESIDENCE & POST OFFICE ADDRESS IF DIFFERENT & E-MAIL                                                                                                                         |
|------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. <u>Skinner</u><br>Lucretia Walker<br>(Print Name) | 2219 Emily Lane / Carteret, NJ 07008<br>Street Number, Street Name / Municipality, and Zip Code<br>Post Office if different from Residence address _____ E-mail Address _____ |
| 2.<br>(Print Name)                                   | Street Number, Street Name / Municipality, and Zip Code<br>Post Office if different from Residence address _____ E-mail Address _____                                         |
| 3.<br>(Print Name)                                   | Street Number, Street Name / Municipality, and Zip Code<br>Post Office if different from Residence address _____ E-mail Address _____                                         |

ALL SIGNERS MUST SIGN AND PRINT THEIR NAME ON THE LINES PROVIDED IN COMPLIANCE WITH N.J.S.A (19:23-7)

| NAME                                                                                        | ADDRESS                                                                               |
|---------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| 1. <u>Lucretia Walker Skinner</u><br>(Signature)<br>Lucretia Walker Skinner<br>(Print Name) | 2219 Emily Lane<br>Carteret, NJ 07008<br>Residence Address Including Post Office      |
| 2. <u>Kevin Skinner</u><br>(Signature)<br>KEVIN SKINNER<br>(Print Name)                     | 2219 Emily LN<br>Carteret NJ 07008<br>Residence Address Including Post Office         |
| 3. <u>Nidia Pagan</u><br>(Signature)<br>Nidia Pagan<br>(Print Name)                         | 253 Romanows ki st 3B<br>Carteret NJ 07008<br>Residence Address Including Post Office |
| 4. <u>Joseph L DeDomenico</u><br>(Signature)<br>Joseph L DeDomenico<br>(Print Name)         | 26 LOCUST ST<br>CARTERET NJ 07008<br>Residence Address Including Post Office          |
| 5.<br>(Signature)<br>(Print Name)                                                           | <br><br>Residence Address Including Post Office                                       |

| NAME                                   | ADDRESS                                         |
|----------------------------------------|-------------------------------------------------|
| 6.<br>(Signature)<br><br>(Print Name)  | <br><br>Residence Address including Post Office |
| 7.<br>(Signature)<br><br>(Print Name)  | <br><br>Residence Address including Post Office |
| 8.<br>(Signature)<br><br>(Print Name)  | <br><br>Residence Address including Post Office |
| 9.<br>(Signature)<br><br>(Print Name)  | <br><br>Residence Address including Post Office |
| 10.<br>(Signature)<br><br>(Print Name) | <br><br>Residence Address including Post Office |

### WITNESS SECTION:

The witness taking the affidavit below must be the person who obtains the names on this set of signatures or several sheets of signatures. The witness must take the affidavit for each set he/she solicits & sign it in the presence of the Notary public, or Attorney. The witness may sign one set of signatures **endorsing** the candidate. Note that if the witness/circulator is not a qualified voter of the political subdivision for which the candidate stands for office, then he/she is permitted to circulate said petition, but is not permitted to sign as petitioner. Although signature sheets are solicited separately, the entire petition must be bound together before submitting.

STATE OF NEW JERSEY  
COUNTY OF MIDDLESEX

SS

I, Peter Agliata, being duly sworn or affirmed upon his/her oath, depose, and say that  
Name of the Witness/ Circulator

he/she is the one who gather the signatures of the petition; that said petition is signed by each of the signers thereof in his/her own proper handwriting; that each of the signers is, to the best knowledge and belief of deponent, a legal voter of the Municipality of Carteret in the County of Middlesex of the State of New Jersey, as stated in said petition, and belongs to the political party named in said petition, and that such a petition is prepared and filed in absolute good faith for the sole purpose of endorsing the person(s) therein named in order to secure their nomination or selection as stated in this petition; and further affirms that he/she is a registered voter in the State of New Jersey, who's party affiliation is of the same political party named in the petition.

Sworn to before me this 23rd day

of March, 2023

Notary/ Attorney.

Peter Agliata  
Witness Signature

P-26

JOSEPH W. NORRIS  
NOTARY PUBLIC OF NEW JERSEY  
My Commission Expires 6/6/2025

Each Candidate must complete a separate Oath of allegiance and Certificate of acceptance form.

## CANDIDATE OATH OF ALLEGIANCE

STATE OF NEW JERSEY  
COUNTY OF MIDDLESEX

SS

I, Lucretia Walker

(Print Candidate's Name)

, 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; and that I will faithfully, impartially and justly perform all the duties of the office of County Committeeperson \_\_\_\_\_, according to the best of my ability (So help me God)\*.

Sworn and subscribed to before me

This 23rd day  
of Mar A.D. 2023

Joseph W. Norris  
Notary Attorney

JOSEPH W. NORRIS  
NOTARY PUBLIC OF NEW JERSEY  
My Commission Expires 5/6/2025

Lucretia Walker  
(Signature of Candidate)

Address 559 Roosevelt Ave

Post Office Carteret, NJ 07008

\*Person taking oath has the option of including "So help me God", if he/she so desires.

## CERTIFICATE OF ACCEPTANCE

I hereby certify that I am a member of the Democratic Party and that I am legally qualified for the office for which I have been endorsed in the foregoing petition; that I consent to stand as a candidate for nomination at the ensuing primary election, and that if nominated I agree to accept the nomination, and that I am a resident and legal voter in

District #2

(Municipality- Ward and District)

Lucretia Walker  
Candidate's Signature

## FOR COUNTY OFFICES

We do further certify that the names and Post Office addresses of the three members named as a committee on Vacancies are as follows (19:23-12).

| PRINT NAME               | ADDRESS | POST OFFICE |
|--------------------------|---------|-------------|
| 1. _____<br>(Print Name) | _____   | _____       |
| 2. _____<br>(Print Name) | _____   | _____       |
| 3. _____<br>(Print Name) | _____   | _____       |

The signers to petitions for County office may name three persons in their petition as committee on vacancies.

**NOMINATION BY PETITION FOR PRIMARY ELECTION  
FOR COUNTY, MUNICIPAL, AND COUNTY COMMITTEE OFFICES  
19:23-5 – PRIMARY ELECTION  
19:23-17 - DESIGNATION**



**OFFICE:** County Committee **TERM OF OFFICE:** 4

(IF APPLICABLE) **WARD**        **DISTRICT** 3

**Democratic**

**PARTY**

**Barbara Guiliano**

(Candidate Name)

(Candidate Name)

(Candidate Name)

*Candidates must be listed in the order they wish to appear on the ballot,  
or submit an additional letter, signed by all candidates indicating the order.*

**CANDIDATE'S REQUEST FOR DESIGNATION ON THE OFFICIAL PRIMARY BALLOT**

The above candidate(s), having been endorsed for the office in this petition, does hereby request that there be printed opposite his/her name on the said primary ticket the following designation:

**Middlesex County Democratic Organization**

Must not exceed six words (R.S. 19:23-17) (19:49-2)

No person may be a **candidate** for or **appointed** to any local elective office unless he/she is a **registered voter** in the ward or municipality depending upon the office involved and has been a **resident** of the ward or municipality involved for at least **one year prior to the date of election** or the date of appointment. **40A:9-1.13** (or three years for Sheriff. **40A:9-94**)

- For **Local and County Committee offices** this petition shall be filed with your **Municipal Clerk**.
- For **County offices** this petition shall be filed with your **County Clerk**.

**CONTACT YOUR MUNICIPAL OR COUNTY CLERK FOR NUMBER OF SIGNATURES REQUIRED (19:23-8)**

**NOTICE TO ALL CANDIDATES**

**ALL CANDIDATES ARE REQUIRED BY LAW TO COMPLY WITH THE PROVISIONS OF THE NEW JERSEY CAMPAIGN CONTRIBUTION AND EXPENDITURE REPORTING ACT 19:44A-1 THRU 44. FOR FURTHER INFORMATION, PLEASE CALL (609) 292-8700 OR TOLL FREE WITHIN NJ AT 1-888-313-ELEC (3532).**

TO: Municipal Clerk (✓) County Clerk ( ) of the County of Middlesex, Municipality of Carteret  
Of the State of New Jersey.

We, the undersigned, hereby certify that we are qualified voters and that we reside in the above County and Municipality, (For Ward and County Committee Candidates fill in Ward/District) → District # 3, and that we are members of the Democratic Party and intend to affiliate with the political party at the ensuing election.

We endorse the candidate(s) nomination to the office of Committeeperson and we request that you print upon the official primary ballot for this party the name(s) of the candidate(s) for such nomination.

We further certify that the said person(s) so endorsed is legally qualified under the laws of this State to be nominated for said office (N.J.S.A. 19:23-7)

| CANDIDATE NAME                             | RESIDENCE & POST OFFICE ADDRESS IF DIFFERENT & E-MAIL                                                                                                                             |
|--------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. <u>Barbara Guiliano</u><br>(Print Name) | <u>F 3 Union St / Carteret, NJ 07008</u><br>Street Number, Street Name / Municipality, and Zip Code<br>Post Office if different from Residence address _____ E-mail Address _____ |
| 2. _____<br>(Print Name)                   | _____<br>Street Number, Street Name / Municipality, and Zip Code<br>Post Office if different from Residence address _____ E-mail Address _____                                    |
| 3. _____<br>(Print Name)                   | _____<br>Street Number, Street Name / Municipality, and Zip Code<br>Post Office if different from Residence address _____ E-mail Address _____                                    |

ALL SIGNERS **MUST** SIGN AND PRINT THEIR NAME ON THE LINES PROVIDED IN COMPLIANCE WITH N.J.S.A (19:23-7)

| NAME                                                                                       | ADDRESS                                                                                     |
|--------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|
| 1. <u>Barbara A. Guiliano</u><br>(Signature)<br><u>BARBARA A. GUILIANO</u><br>(Print Name) | <u>F 3 Union St</u><br><u>Carteret, NJ 07008</u><br>Residence Address including Post Office |
| 2. <u>Joan A. Guiliano</u><br>(Signature)<br><u>JOAN A. GUILIANO</u><br>(Print Name)       | <u>F 3 Union St</u><br><u>Carteret, NJ 07008</u><br>Residence Address including Post Office |
| 3. _____<br>(Signature)<br>_____<br>(Print Name)                                           | _____<br>Residence Address including Post Office                                            |
| 4. _____<br>(Signature)<br>_____<br>(Print Name)                                           | _____<br>Residence Address including Post Office                                            |
| 5. _____<br>(Signature)<br>_____<br>(Print Name)                                           | _____<br>Residence Address including Post Office                                            |

| NAME                                   | ADDRESS                                         |
|----------------------------------------|-------------------------------------------------|
| 6.<br>(Signature)<br><br>(Print Name)  | <br><br>Residence Address including Post Office |
| 7.<br>(Signature)<br><br>(Print Name)  | <br><br>Residence Address including Post Office |
| 8.<br>(Signature)<br><br>(Print Name)  | <br><br>Residence Address including Post Office |
| 9.<br>(Signature)<br><br>(Print Name)  | <br><br>Residence Address including Post Office |
| 10.<br>(Signature)<br><br>(Print Name) | <br><br>Residence Address including Post Office |

### WITNESS SECTION:

The witness taking the affidavit below must be the person who obtains the names on this set of signatures or several sheets of signatures. The witness must take the affidavit for each set he/she solicits & sign it in the presence of the Notary public, or Attorney. The witness may sign one set of signatures **endorsing** the candidate. Note that if the witness/circulator is not a qualified voter of the political subdivision for which the candidate stands for office, then he/she is permitted to circulate said petition, but is not permitted to sign as petitioner. Although signature sheets are solicited separately, the entire petition must be bound together before submitting.

STATE OF NEW JERSEY  
COUNTY OF MIDDLESEX

SS

I, Peter Agliata, being duly sworn or affirmed upon his/her oath, depose, and say that

Name of the Witness / Circulator

he/she is the one who gather the signatures of the petition; that said petition is signed by each of the signers thereof in his/her own proper handwriting; that each of the signers is, to the best knowledge and belief of deponent, a legal voter of the Municipality of Carteret in the County of Middlesex of the State of New Jersey, as stated in said petition, and belongs to the political party named in said petition, and that such a petition is prepared and filed in absolute good faith for the sole purpose of endorsing the person(s) therein named in order to secure their nomination or selection as stated in this petition; and further affirms that he/she is a registered voter in the State of New Jersey, who's party affiliation is of the same political party named in the petition.

Sworn to before me this 03/01 day  
of March, 2023

Notary / Attorney Joseph W. Norris

JOSEPH W. NORRIS  
NOTARY PUBLIC OF NEW JERSEY  
My Commission Expires 6/10/2025

Each Candidate must complete a separate Oath of allegiance and Certificate of acceptance form.

### CANDIDATE OATH OF ALLEGIANCE

STATE OF NEW JERSEY  
COUNTY OF MIDDLESEX

SS

I, Barbara Guiliano  
(Print Candidate's Name)

, 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; and that I will faithfully, impartially and justly perform all the duties of the office of County Committeeperson \_\_\_\_\_, according to the best of my ability (So help me God)\*.

Sworn and subscribed to before me

This 28<sup>th</sup> day  
of March A.D. 2023

Joseph W. Norris  
Notary / Attorney

JOSEPH W. NORRIS  
NOTARY PUBLIC OF NEW JERSEY  
My Commission Expires 6/6/2026

Barbara A. Guiliano  
(Signature of Candidate)

Address F 3 Union St.

Post Office Carteret, NJ 07008

\*Person taking oath has the option of including "So help me God", if he/she so desires.

### CERTIFICATE OF ACCEPTANCE

I hereby certify that I am a member of the Democratic Party and that I am legally qualified for the office for which I have been endorsed in the foregoing petition; that I consent to stand as a candidate for nomination at the ensuing primary election, and that if nominated I agree to accept the nomination, and that I am a resident and legal voter in

District #3

(Municipality- Ward and District)

Barbara A. Guiliano  
Candidate's Signature.

### FOR COUNTY OFFICES

We do further certify that the names and Post Office addresses of the three members named as a committee on Vacancies are as follows (19:23-12).

| PRINT NAME               | ADDRESS | POST OFFICE |
|--------------------------|---------|-------------|
| 1. _____<br>(Print Name) | _____   | _____       |
| 2. _____<br>(Print Name) | _____   | _____       |
| 3. _____<br>(Print Name) | _____   | _____       |

The signers to petitions for County office may name three persons in their petition as committee on vacancies.

**NOMINATION BY PETITION FOR PRIMARY ELECTION  
FOR COUNTY, MUNICIPAL, AND COUNTY COMMITTEE OFFICES  
19:23-5 – PRIMARY ELECTION  
19:23-17 - DESIGNATION**

OFFICE: County Committee TERM OF OFFICE: 4

(IF APPLICABLE) WARD \_\_\_\_\_ DISTRICT 4

**Democratic**

**PARTY**

**Joel Weissman**

\_\_\_\_\_  
(Candidate Name)

\_\_\_\_\_  
(Candidate Name)

\_\_\_\_\_  
(Candidate Name)



*Candidates must be listed in the order they wish to appear on the ballot,  
or submit an additional letter, signed by all candidates indicating the order.*

**CANDIDATE'S REQUEST FOR DESIGNATION ON THE OFFICIAL PRIMARY BALLOT**

The above candidate(s), having been endorsed for the office in this petition, does hereby request that there be printed opposite his/her name on the said primary ticket the following designation:

**Middlesex County Democratic Organization**

\_\_\_\_\_  
Must not exceed six words (R.S. 19:23-17) (19:49-2)

No person may be a **candidate** for or **appointed** to any local elective office unless he/she is a **registered voter** in the ward or municipality depending upon the office involved and has been a **resident** of the ward or municipality involved for at least **one year prior to the date of election** or the date of appointment. **40A:9-1.13** (or three years for Sheriff, **40A:9-94**)

- For **Local and County Committee offices** this petition shall be filed with your **Municipal Clerk**.
- For **County offices** this petition shall be filed with your **County Clerk**.

**CONTACT YOUR MUNICIPAL OR COUNTY CLERK FOR NUMBER OF SIGNATURES REQUIRED (19:23-8)**

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TO: Municipal Clerk (✓) County Clerk ( ) of the County of Middlesex, Municipality of Carteret  
Of the State of New Jersey.

We, the undersigned, hereby certify that we are qualified voters and that we reside in the above County and Municipality, (For Ward and County Committee Candidates fill in Ward/District) → District # 4, and that we are members of the Democratic Party and intend to affiliate with the political party at the ensuing election.

We endorse the candidate(s) nomination to the office of Committeeperson and we request that you print upon the official primary ballot for this party the name(s) of the candidate(s) for such nomination.

We further certify that the said person(s) so endorsed is legally qualified under the laws of this State to be nominated for said office (N.J.S.A. 19:23-7)

| CANDIDATE NAME                   | RESIDENCE & POST OFFICE ADDRESS IF DIFFERENT & E-MAIL                                                                                                                                             |  |
|----------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| 1. Joel Weissman<br>(Print Name) | <u>29 Mercer St / Carteret, NJ 07008</u><br>Street Number, Street Name / Municipality, and Zip Code<br><u>Joel Weissman, NJ</u><br>Post Office if different from Residence address E-mail Address |  |
| 2.<br>(Print Name)               | Street Number, Street Name / Municipality, and Zip Code<br>Post Office if different from Residence address E-mail Address                                                                         |  |
| 3.<br>(Print Name)               | Street Number, Street Name / Municipality, and Zip Code<br>Post Office if different from Residence address E-mail Address                                                                         |  |

ALL SIGNERS **MUST** SIGN AND PRINT THEIR NAME ON THE LINES PROVIDED IN COMPLIANCE WITH N.J.S.A (19:23-7)

| NAME                                                                                       | ADDRESS                                                            |
|--------------------------------------------------------------------------------------------|--------------------------------------------------------------------|
| 1. <u>Joel Weissman</u><br>(Signature)<br><u>Joel Weissman</u><br>(Print Name)             | <u>29 Mercer St</u><br>Residence Address including Post Office     |
| 2. <u>Jonathan Dershowitz</u><br>(Signature)<br><u>Jonathan Dershowitz</u><br>(Print Name) | <u>31 Mercer street</u><br>Residence Address including Post Office |
| 3.<br>(Signature)<br>(Print Name)                                                          | Residence Address including Post Office                            |
| 4.<br>(Signature)<br>(Print Name)                                                          | Residence Address including Post Office                            |
| 5.<br>(Signature)<br>(Print Name)                                                          | Residence Address including Post Office                            |

| NAME                                              | ADDRESS                                                   |
|---------------------------------------------------|-----------------------------------------------------------|
| 6. _____<br>(Signature)<br>_____<br>(Print Name)  | _____<br>_____<br>Residence Address including Post Office |
| 7. _____<br>(Signature)<br>_____<br>(Print Name)  | _____<br>_____<br>Residence Address including Post Office |
| 8. _____<br>(Signature)<br>_____<br>(Print Name)  | _____<br>_____<br>Residence Address including Post Office |
| 9. _____<br>(Signature)<br>_____<br>(Print Name)  | _____<br>_____<br>Residence Address including Post Office |
| 10. _____<br>(Signature)<br>_____<br>(Print Name) | _____<br>_____<br>Residence Address including Post Office |

### WITNESS SECTION:

The witness taking the affidavit below must be the person who obtains the names on this set of signatures or several sheets of signatures. The witness must take the affidavit for each set he/she solicits & sign it in the presence of the Notary public, or Attorney. The witness may sign one set of signatures **endorsing** the candidate. Note that if the witness/circulator is not a qualified voter of the political subdivision for which the candidate stands for office, then he/she is permitted to circulate said petition, but is not permitted to sign as petitioner. Although signature sheets are solicited separately, the entire petition must be bound together before submitting.

STATE OF NEW JERSEY  
COUNTY OF MIDDLESEX

SS

I, Peter Agliata, being duly sworn or affirmed upon his/her oath, depose, and say that  
Name of the Witness / Circulator

he/she is the one who gather the signatures of the petition; that said petition is signed by each of the signers thereof in his/her own proper handwriting; that each of the signers is, to the best knowledge and belief of deponent, a legal voter of the Municipality of Carteret in the County of Middlesex of the State of New Jersey, as stated in said petition, and belongs to the political party named in said petition, and that such a petition is prepared and filed in absolute good faith for the sole purpose of endorsing the person(s) therein named in order to secure their nomination or selection as stated in this petition; and further affirms that he/she is a registered voter in the State of New Jersey, who's party affiliation is of the same political party named in the petition.

Sworn to before me this 22nd day  
of March, 2023

Notary/Attorney [Signature]

P-26

JOSEPH W. NORRIS  
NOTARY PUBLIC OF NEW JERSEY  
My Commission Expires 5/6/2025

Page 3

Revised 1-5-2023

Peter Agliata  
Witness Signature

Each Candidate must complete a separate Oath of allegiance and Certificate of acceptance form.

## CANDIDATE OATH OF ALLEGIANCE

STATE OF NEW JERSEY  
COUNTY OF MIDDLESEX

SS

I, Joel Weissman

(Print Candidate's Name)

, 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; and that I will faithfully, impartially and justly perform all the duties of the office of County Committeeperson \_\_\_\_\_, according to the best of my ability (So help me God)\*.

Sworn and subscribed to before me

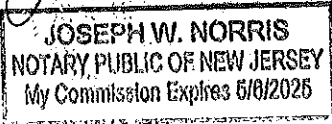
This 23rd day  
of March A.D. 2023

Joseph W. Norris  
Notary Attorney

Joel Weissman  
(Signature of Candidate)  
Address 29 Mercer St

Post Office Carteret, NJ 07008

\*Person taking oath has the option of including "So help me God", if he/she so desires.



## CERTIFICATE OF ACCEPTANCE

I hereby certify that I am a member of the Democratic Party and that I am legally qualified for the office for which I have been endorsed in the foregoing petition; that I consent to stand as a candidate for nomination at the ensuing primary election, and that if nominated I agree to accept the nomination, and that I am a resident and legal voter in

District #4

(Municipality- Ward and District)

Joel Weissman  
Candidate's Signature.

## FOR COUNTY OFFICES

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| PRINT NAME               | ADDRESS | POST OFFICE |
|--------------------------|---------|-------------|
| 1. _____<br>(Print Name) | _____   | _____       |
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**NOMINATION BY PETITION FOR PRIMARY ELECTION  
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19:23-5 – PRIMARY ELECTION  
19:23-17 - DESIGNATION**

**OFFICE:** County Committee **TERM OF OFFICE:** 4

(IF APPLICABLE) **WARD** \_\_\_\_\_ **DISTRICT** 4

**Democratic**

**PARTY**

**Ruth Dershowitz**

(Candidate Name)

(Candidate Name)

(Candidate Name)



*Candidates must be listed in the order they wish to appear on the ballot,  
or submit an additional letter, signed by all candidates indicating the order.*

**CANDIDATE'S REQUEST FOR DESIGNATION ON THE OFFICIAL PRIMARY BALLOT**

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**CONTACT YOUR MUNICIPAL OR COUNTY CLERK FOR NUMBER OF SIGNATURES REQUIRED (19:23-8)**

**NOTICE TO ALL CANDIDATES**

**ALL CANDIDATES ARE REQUIRED BY LAW TO COMPLY WITH THE PROVISIONS OF THE NEW JERSEY CAMPAIGN CONTRIBUTION AND EXPENDITURE REPORTING ACT 19:44A-1 THRU 44. FOR FURTHER INFORMATION, PLEASE CALL (609) 292-8700 OR TOLL FREE WITHIN NJ AT 1-888-313-ELEC (3532).**

TO: Municipal Clerk (✓) County Clerk ( ) of the County of Middlesex, Municipality of Carteret  
Of the State of New Jersey.

We, the undersigned, hereby certify that we are qualified voters and that we reside in the above County and Municipality, (For Ward and County Committee Candidates fill in Ward/District) → District # 4, and that we are members of the Democratic Party and intend to affiliate with the political party at the ensuing election.

We endorse the candidate(s) nomination to the office of Committeeperson and we request that you print upon the official primary ballot for this party the name(s) of the candidate(s) for such nomination.

We further certify that the said person(s) so endorsed is legally qualified under the laws of this State to be nominated for said office (N.J.S.A. 19:23-7)

| CANDIDATE NAME                     | RESIDENCE & POST OFFICE ADDRESS IF DIFFERENT & E-MAIL                                                                                                              |
|------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. Ruth Dershowitz<br>(Print Name) | 31 Mercer Street / Carteret, NJ 07008<br>Street Number, Street Name / Municipality, and Zip Code<br>Post Office if different from Residence address E-mail Address |
| 2.<br>(Print Name)                 | Street Number, Street Name / Municipality, and Zip Code<br>Post Office if different from Residence address E-mail Address                                          |
| 3.<br>(Print Name)                 | Street Number, Street Name / Municipality, and Zip Code<br>Post Office if different from Residence address E-mail Address                                          |

ALL SIGNERS **MUST** SIGN AND PRINT THEIR NAME ON THE LINES PROVIDED IN COMPLIANCE WITH N.J.S.A (19:23-7)

| NAME                                                                                       | ADDRESS                                                                                    |
|--------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|
| 1. <u>Ruth Dershowitz</u><br>(Signature)<br><u>Ruth Dershowitz</u><br>(Print Name)         | <u>31 Mercer St</u><br><u>Carteret NJ 07008</u><br>Residence Address including Post Office |
| 2. <u>Jonathan Dershowitz</u><br>(Signature)<br><u>Jonathan Dershowitz</u><br>(Print Name) | <u>31 Mercer St</u><br><u>Carteret NJ 07008</u><br>Residence Address including Post Office |
| 3.<br>(Signature)<br><br>(Print Name)                                                      | <br><br>Residence Address including Post Office                                            |
| 4.<br>(Signature)<br><br>(Print Name)                                                      | <br><br>Residence Address including Post Office                                            |
| 5.<br>(Signature)<br><br>(Print Name)                                                      | <br><br>Residence Address including Post Office                                            |

| NAME                                              | ADDRESS                                                   |
|---------------------------------------------------|-----------------------------------------------------------|
| 6. _____<br>(Signature)<br>_____<br>(Print Name)  | _____<br>_____<br>Residence Address including Post Office |
| 7. _____<br>(Signature)<br>_____<br>(Print Name)  | _____<br>_____<br>Residence Address including Post Office |
| 8. _____<br>(Signature)<br>_____<br>(Print Name)  | _____<br>_____<br>Residence Address including Post Office |
| 9. _____<br>(Signature)<br>_____<br>(Print Name)  | _____<br>_____<br>Residence Address including Post Office |
| 10. _____<br>(Signature)<br>_____<br>(Print Name) | _____<br>_____<br>Residence Address including Post Office |

### WITNESS SECTION:

The witness taking the affidavit below must be the person who obtains the names on this set of signatures or several sheets of signatures. The witness must take the affidavit for each set he/she solicits & sign it in the presence of the Notary public, or Attorney. The witness may sign one set of signatures **endorsing** the candidate. Note that if the witness/circulator is not a qualified voter of the political subdivision for which the candidate stands for office, then he/she is permitted to circulate said petition, but is not permitted to sign as petitioner. Although signature sheets are solicited separately, the entire petition must be bound together before submitting.

STATE OF NEW JERSEY  
COUNTY OF MIDDLESEX

SS

I, Peter Agliata, being duly sworn or affirmed upon his/her oath, depose, and say that  
Name of the Witness / Circulator

he/she is the one who gather the signatures of the petition; that said petition is signed by each of the signers thereof in his/her own proper handwriting; that each of the signers is, to the best knowledge and belief of deponent, a legal voter of the Municipality of Carteret in the County of Middlesex of the State of New Jersey, as stated in said petition, and belongs to the political party named in said petition, and that such a petition is prepared and filed in absolute good faith for the sole purpose of endorsing the person(s) therein named in order to secure their nomination or selection as stated in this petition; and further affirms that he/she is a registered voter in the State of New Jersey, who's party affiliation is of the same political party named in the petition.

Sworn to before me this 27th day  
of March 2023

Notary / Attorney

P-26

JOSEPH W. NORRIS  
NOTARY PUBLIC OF NEW JERSEY  
My Commission Expires 6/30/2026

Page 3

Revised 1-5-2023

Peter Agliata  
Witness Signature

Each Candidate must complete a separate Oath of allegiance and Certificate of acceptance form.

### CANDIDATE OATH OF ALLEGIANCE

STATE OF NEW JERSEY  
COUNTY OF MIDDLESEX

SS

I, Ruth Dershowitz

(Print Candidate's Name)

, 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; and that I will faithfully, impartially and justly perform all the duties of the office of County Committeeperson \_\_\_\_\_, according to the best of my ability (So help me God)\*.

Sworn and subscribed to before me

This 23rd day  
of March A.D. 2023

Notary / Attorney

JOSEPH W. NORRIS  
NOTARY PUBLIC OF NEW JERSEY  
My Commission Expires 6/6/2025

Ruth Dershowitz  
(Signature of Candidate)  
Address 31 Mercer St  
Post Office Carteret, NJ 07008

\*Person taking oath has the option of including "So help me God", if he/she so desires.

### CERTIFICATE OF ACCEPTANCE

I hereby certify that I am a member of the Democratic Party and that I am legally qualified for the office for which I have been endorsed in the foregoing petition; that I consent to stand as a candidate for nomination at the ensuing primary election, and that if nominated I agree to accept the nomination, and that I am a resident and legal voter in

District #4

(Municipality- Ward and District)

Ruth Dershowitz  
Candidate's Signature.

### FOR COUNTY OFFICES

We do further certify that the names and Post Office addresses of the three members named as a committee on Vacancies are as follows (19:23-12).

| PRINT NAME               | ADDRESS | POST OFFICE |
|--------------------------|---------|-------------|
| 1. _____<br>(Print Name) | _____   | _____       |
| 2. _____<br>(Print Name) | _____   | _____       |
| 3. _____<br>(Print Name) | _____   | _____       |

The signers to petitions for County office may name three persons in their petition as committee on vacancies.

**NOMINATION BY PETITION FOR PRIMARY ELECTION  
FOR COUNTY, MUNICIPAL, AND COUNTY COMMITTEE OFFICES  
19:23-5 – PRIMARY ELECTION  
19:23-17 - DESIGNATION**

**OFFICE:** County Committee **TERM OF OFFICE:** 4

(IF APPLICABLE) **WARD** \_\_\_\_\_ **DISTRICT** 5

**Democratic**

**PARTY**

**Ricardo Llanos**

(Candidate Name)

**Kelly Llanos**

(Candidate Name)

(Candidate Name)



*Candidates must be listed in the order they wish to appear on the ballot,  
or submit an additional letter, signed by all candidates indicating the order.*

**CANDIDATE'S REQUEST FOR DESIGNATION ON THE OFFICIAL PRIMARY BALLOT**

The above candidate(s), having been endorsed for the office in this petition, does hereby request that there be printed opposite his/her name on the said primary ticket the following designation:

**Middlesex County Democratic Organization**

Must not exceed six words (R.S. 19:23-17) (19:49-2)

No person may be a **candidate** for or **appointed** to any local elective office unless he/she is a **registered voter** in the ward or municipality depending upon the office involved and has been a **resident** of the ward or municipality involved for at least **one year prior to the date of election** or the date of appointment. **40A:9-1.13** (or three years for Sheriff. **40A:9-94**)

- For **Local and County Committee offices** this petition shall be filed with your **Municipal Clerk**.
- For **County offices** this petition shall be filed with your **County Clerk**.

**CONTACT YOUR MUNICIPAL OR COUNTY CLERK FOR NUMBER OF SIGNATURES REQUIRED (19:23-8)**

**NOTICE TO ALL CANDIDATES**

**ALL CANDIDATES ARE REQUIRED BY LAW TO COMPLY WITH THE PROVISIONS OF THE NEW JERSEY CAMPAIGN CONTRIBUTION AND EXPENDITURE REPORTING ACT 19:44A-1 THRU 44. FOR FURTHER INFORMATION, PLEASE CALL (609) 292-8700 OR TOLL FREE WITHIN NJ AT 1-888-313-ELEC (3532).**

TO: Municipal Clerk (✓) County Clerk ( ) of the County of Middlesex, Municipality of Carteret  
Of the State of New Jersey.

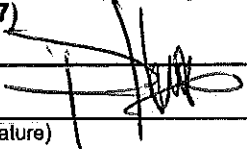
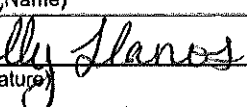
We, the undersigned, hereby certify that we are qualified voters and that we reside in the above County and Municipality, (For Ward and County Committee Candidates fill in Ward/District) → District #, and that we are members of the Democratic Party and intend to affiliate with the political party at the ensuing election.

We endorse the candidate(s) nomination to the office of Committeeperson and we request that you print upon the official primary ballot for this party the name(s) of the candidate(s) for such nomination.

We further certify that the said person(s) so endorsed is legally qualified under the laws of this State to be nominated for said office (N.J.S.A. 19:23-7)

| CANDIDATE NAME                    | RESIDENCE & POST OFFICE ADDRESS IF DIFFERENT & E-MAIL                                                                                                               |
|-----------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. Ricardo Llanos<br>(Print Name) | 55 S. Whittier St./ Carteret, NJ 07008<br>Street Number, Street Name / Municipality, and Zip Code<br>Post Office If different from Residence address E-mail Address |
| 2. Kelly Llanos<br>(Print Name)   | 55 S. Whittier St./ Carteret, NJ 07008<br>Street Number, Street Name / Municipality, and Zip Code<br>Post Office If different from Residence address E-mail Address |
| 3.<br>(Print Name)                | Street Number, Street Name / Municipality, and Zip Code<br>Post Office If different from Residence address E-mail Address                                           |

ALL SIGNERS **MUST** SIGN AND PRINT THEIR NAME ON THE LINES PROVIDED IN COMPLIANCE WITH N.J.S.A (19:23-7)

| NAME                                                                                                                                    | ADDRESS                                                                             |
|-----------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| 1. <br>(Signature)<br>Ricardo Llanos<br>(Print Name) | 55 S. Whittier St.<br>Carteret NJ 07008<br>Residence Address including Post Office  |
| 2. <br>(Signature)<br>Kelly Llanos<br>(Print Name)   | 55 S. Whittier St.<br>Carteret, NJ 07008<br>Residence Address including Post Office |
| 3.<br>(Signature)<br><br>(Print Name)                                                                                                   | <br><br>Residence Address including Post Office                                     |
| 4.<br>(Signature)<br><br>(Print Name)                                                                                                   | <br><br>Residence Address including Post Office                                     |
| 5.<br>(Signature)<br><br>(Print Name)                                                                                                   | <br><br>Residence Address including Post Office                                     |

| NAME                                              | ADDRESS                                                   |
|---------------------------------------------------|-----------------------------------------------------------|
| 6. _____<br>(Signature)<br>_____<br>(Print Name)  | _____<br>_____<br>Residence Address including Post Office |
| 7. _____<br>(Signature)<br>_____<br>(Print Name)  | _____<br>_____<br>Residence Address including Post Office |
| 8. _____<br>(Signature)<br>_____<br>(Print Name)  | _____<br>_____<br>Residence Address including Post Office |
| 9. _____<br>(Signature)<br>_____<br>(Print Name)  | _____<br>_____<br>Residence Address including Post Office |
| 10. _____<br>(Signature)<br>_____<br>(Print Name) | _____<br>_____<br>Residence Address including Post Office |

### WITNESS SECTION:

The witness taking the affidavit below must be the person who obtains the names on this set of signatures or several sheets of signatures. The witness must take the affidavit for each set he/she solicits & sign it in the presence of the Notary public, or Attorney. The witness may sign one set of signatures **endorsing** the candidate. Note that if the witness/circulator is not a qualified voter of the political subdivision for which the candidate stands for office, then he/she is permitted to circulate said petition, but is not permitted to sign as petitioner. Although signature sheets are solicited separately, the entire petition must be bound together before submitting.

STATE OF NEW JERSEY  
COUNTY OF MIDDLESEX

SS

I, JOSEPH GASPARO, being duly sworn or affirmed upon his/her oath, depose, and say that

Name of the Witness / Circulator

he/she is the one who gather the signatures of the petition; that said petition is signed by each of the signers thereof in his/her own proper handwriting; that each of the signers is, to the best knowledge and belief of deponent, a legal voter of the Municipality of Carteret in the County of Middlesex of the State of New Jersey, as stated in said petition, and belongs to the political party named in said petition, and that such a petition is prepared and filed in absolute good faith for the sole purpose of endorsing the person(s) therein named in order to secure their nomination or selection as stated in this petition; and further affirms that he/she is a registered voter in the State of New Jersey, who's party affiliation is of the same political party named in the petition.

Sworn to before me this 23rd day  
of March, 2023

Joseph W. Norris  
Notary / Attorney

Joseph Gasparo  
Witness Signature

P-26 **JOSEPH W. NORRIS**  
NOTARY PUBLIC OF NEW JERSEY  
My Commission Expires 5/8/2025

Each Candidate must complete a separate Oath of allegiance and Certificate of acceptance form.

### CANDIDATE OATH OF ALLEGIANCE

STATE OF NEW JERSEY  
COUNTY OF MIDDLESEX

SS

I, Kelly Llanos

(Print Candidate's Name)

, 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; and that I will faithfully, impartially and justly perform all the duties of the office of County Committeeperson \_\_\_\_\_, according to the best of my ability (So help me God)\*.

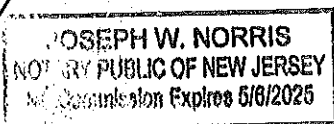
Sworn and subscribed to before me

This 23rd day

of March A.D. 2023

[Signature]

Notary/ Attorney



Kelly Llanos  
(Signature of Candidate)

Address 55 S. Whittier St.

Post Office Carteret, NJ 07008

\*Person taking oath has the option of including "So help me God", if he/she so desires.

### CERTIFICATE OF ACCEPTANCE

I hereby certify that I am a member of the Democratic Party and that I am legally qualified for the office for which I have been endorsed in the foregoing petition; that I consent to stand as a candidate for nomination at the ensuing primary election, and that if nominated I agree to accept the nomination, and that I am a resident and legal voter in

District #5

(Municipality- Ward and District)

Kelly Llanos  
Candidate's Signature.

### FOR COUNTY OFFICES

We do further certify that the names and Post Office addresses of the three members named as a committee on Vacancies are as follows (19:23-12).

| PRINT NAME               | ADDRESS | POST OFFICE |
|--------------------------|---------|-------------|
| 1. _____<br>(Print Name) | _____   | _____       |
| 2. _____<br>(Print Name) | _____   | _____       |
| 3. _____<br>(Print Name) | _____   | _____       |

The signers to petitions for County office may name three persons in their petition as committee on vacancies.

Each Candidate must complete a separate Oath of allegiance and Certificate of acceptance form.

## CANDIDATE OATH OF ALLEGIANCE

STATE OF NEW JERSEY  
COUNTY OF MIDDLESEX

SS

I, Ricardo Llanos

(Print Candidate's Name)

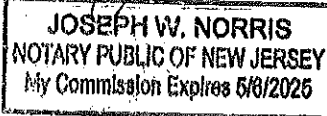
, do solemnly swear (or affirm) that I will support the Constitution of the United States and the Constitution of the State of New Jersey; that I will bear true faith and allegiance to the same and to the governments established in the United States and in this State, under the authority of the people; and that I will faithfully, impartially and justly perform all the duties of the office of County Committeeperson \_\_\_\_\_, according to the best of my ability (So help me God)\*.

Sworn and subscribed to before me

This 23<sup>rd</sup> day

of March A.D. 2020

[Signature]  
Notary / Attorney



(Signature of Candidate)

Address 55 S. Whittier St.

Post Office Carteret, NJ 07008

\*Person taking oath has the option of including "So help me God", if he/she so desires.

## CERTIFICATE OF ACCEPTANCE

I hereby certify that I am a member of the Democratic Party and that I am legally qualified for the office for which I have been endorsed in the foregoing petition; that I consent to stand as a candidate for nomination at the ensuing primary election, and that if nominated I agree to accept the nomination, and that I am a resident and legal voter in

District #5

(Municipality- Ward and District)

[Signature]  
Candidate's Signature.

## FOR COUNTY OFFICES

We do further certify that the names and Post Office addresses of the three members named as a committee on Vacancies are as follows (19:23-12).

| PRINT NAME               | ADDRESS | POST OFFICE |
|--------------------------|---------|-------------|
| 1. _____<br>(Print Name) | _____   | _____       |
| 2. _____<br>(Print Name) | _____   | _____       |
| 3. _____<br>(Print Name) | _____   | _____       |

The signers to petitions for County office may name three persons in their petition as committee on vacancies.

**NOMINATION BY PETITION FOR PRIMARY ELECTION  
FOR COUNTY, MUNICIPAL, AND COUNTY COMMITTEE OFFICES  
19:23-5 – PRIMARY ELECTION  
19:23-17 - DESIGNATION**

OFFICE: County Committee TERM OF OFFICE: 4

(IF APPLICABLE) WARD \_\_\_\_\_ DISTRICT 6

Democratic

PARTY

Mohammad Janjua

(Candidate Name)

(Candidate Name)

(Candidate Name)

*Candidates must be listed in the order they wish to appear on the ballot,  
or submit an additional letter, signed by all candidates indicating the order.*

**CANDIDATE'S REQUEST FOR DESIGNATION ON THE OFFICIAL PRIMARY BALLOT**

The above candidate(s), having been endorsed for the office in this petition, does hereby request that there be printed opposite his/her name on the said primary ticket the following designation:

Middlesex County Democratic Organization

Must not exceed six words (R.S. 19:23-17) (19:49-2)

No person may be a **candidate** for or **appointed** to any local elective office unless he/she is a **registered voter** in the ward or municipality depending upon the office involved and has been a **resident** of the ward or municipality involved for at least **one year prior to the date of election** or the date of appointment. **40A:9-1.13** (or three years for Sheriff, **40A:9-94**)

- For **Local and County Committee offices** this petition shall be filed with your **Municipal Clerk**.
- For **County offices** this petition shall be filed with your **County Clerk**.

**CONTACT YOUR MUNICIPAL OR COUNTY CLERK FOR NUMBER OF SIGNATURES REQUIRED (19:23-8)**

**NOTICE TO ALL CANDIDATES**

**ALL CANDIDATES ARE REQUIRED BY LAW TO COMPLY WITH THE PROVISIONS OF THE NEW JERSEY CAMPAIGN CONTRIBUTION AND EXPENDITURE REPORTING ACT 19:44A-1 THRU 44. FOR FURTHER INFORMATION, PLEASE CALL (609) 292-8700 OR TOLL FREE WITHIN NJ AT 1-888-313-ELEC (3532).**

TO: Municipal Clerk ( ) County Clerk ( ) of the County of Middlesex, Municipality of Carteret  
Of the State of New Jersey.

We, the undersigned, hereby certify that we are qualified voters and that we reside in the above County and Municipality, (For Ward and County Committee Candidates fill in Ward/District) → District # 6, and that we are members of the Democratic Party and intend to affiliate with the political party at the ensuing election.

We endorse the candidate(s) nomination to the office of Committeeperson and we request that you print upon the official primary ballot for this party the name(s) of the candidate(s) for such nomination.

We further certify that the said person(s) so endorsed is legally qualified under the laws of this State to be nominated for said office (N.J.S.A. 19:23-7)

| CANDIDATE NAME                            | RESIDENCE & POST OFFICE ADDRESS IF DIFFERENT & E-MAIL                                                                                                                            |
|-------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. <u>Mohammad Janjua</u><br>(Print Name) | <u>75 Heald St / Carteret, NJ 07008</u><br>Street Number, Street Name / Municipality, and Zip Code<br>Post Office If different from Residence address _____ E-mail Address _____ |
| 2. _____<br>(Print Name)                  | _____<br>Street Number, Street Name / Municipality, and Zip Code<br>Post Office If different from Residence address _____ E-mail Address _____                                   |
| 3. _____<br>(Print Name)                  | _____<br>Street Number, Street Name / Municipality, and Zip Code<br>Post Office If different from Residence address _____ E-mail Address _____                                   |

ALL SIGNERS **MUST** SIGN AND PRINT THEIR NAME ON THE LINES PROVIDED IN COMPLIANCE WITH N.J.S.A (19:23-7)

| NAME                                                                                  | ADDRESS                                                                                             |
|---------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|
| 1. <u>Mohammad Janjua</u><br>(Signature)<br><u>MOHAMMAD A. JANJUA</u><br>(Print Name) | <u>75 Heald Street #1FL</u><br><u>Carteret, NJ 07008</u><br>Residence Address including Post Office |
| 2. <u>Munaza Arshad</u><br>(Signature)<br><u>MUNAZA ARSHAD</u><br>(Print Name)        | <u>75 Heald St.</u><br><u>Carteret, NJ 07008</u><br>Residence Address including Post Office         |
| 3. <u>Mudassar Janjua</u><br>(Signature)<br><u>MUDASSAR JANJUA</u><br>(Print Name)    | <u>75 Heald St.</u><br><u>Carteret, NJ 07008</u><br>Residence Address including Post Office         |
| 4. <u>Jamila Mudassar</u><br>(Signature)<br><u>JAMILA MUDASSAR</u><br>(Print Name)    | <u>75 Heald Street,</u><br><u>Carteret, NJ 07008</u><br>Residence Address including Post Office     |
| 5. <u>Faizan Janjua</u><br>(Signature)<br><u>FAIZAN JANJUA</u><br>(Print Name)        | <u>75 Heald St</u><br><u>Carteret NJ 07008</u><br>Residence Address including Post Office           |

| NAME                                                                       | ADDRESS                                                                                             |
|----------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|
| 6. <u>[Signature]</u><br>(Signature)<br><u>IQRA FAIZAN</u><br>(Print Name) | <u>75 HEALD ST. 1ST FL.</u><br><u>CARTERET, NJ 07008</u><br>Residence Address including Post Office |
| 7. _____<br>(Signature)<br>_____<br>(Print Name)                           | _____<br>Residence Address including Post Office                                                    |
| 8. _____<br>(Signature)<br>_____<br>(Print Name)                           | _____<br>Residence Address including Post Office                                                    |
| 9. _____<br>(Signature)<br>_____<br>(Print Name)                           | _____<br>Residence Address including Post Office                                                    |
| 10. _____<br>(Signature)<br>_____<br>(Print Name)                          | _____<br>Residence Address including Post Office                                                    |

### WITNESS SECTION:

The witness taking the affidavit below must be the person who obtains the names on this set of signatures or several sheets of signatures. The witness must take the affidavit for each set he/she solicits & sign it in the presence of the Notary public, or Attorney. The witness may sign one set of signatures **endorsing** the candidate. Note that if the witness/circulator is not a qualified voter of the political subdivision for which the candidate stands for office, then he/she is permitted to circulate said petition, but is not permitted to sign as petitioner. Although signature sheets are solicited separately, the entire petition must be bound together before submitting.

STATE OF NEW JERSEY  
COUNTY OF MIDDLESEX

SS

I, Peter Agliata, being duly sworn or affirmed upon his/her oath, depose, and say that  
Name of the Witness / Circulator

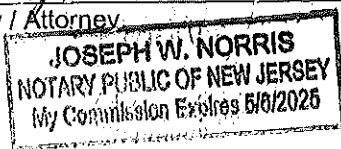
he/she is the one who gather the signatures of the petition; that said petition is signed by each of the signers thereof in his/her own proper handwriting; that each of the signers is, to the best knowledge and belief of deponent, a legal voter of the Municipality of Carteret in the County of Middlesex of the State of New Jersey, as stated in said petition, and belongs to the political party named in said petition, and that such a petition is prepared and filed in absolute good faith for the sole purpose of endorsing the person(s) therein named in order to secure their nomination or selection as stated in this petition; and further affirms that he/she is a registered voter in the State of New Jersey, who's party affiliation is of the same political party named in the petition.

Sworn to before me this 23rd day

of March, 2023

[Signature]  
Notary / Attorney

P-26



Page 3

Peter Agliata  
Witness Signature

Revised 1-5-2023

Each Candidate must complete a separate Oath of allegiance and Certificate of acceptance form.

### CANDIDATE OATH OF ALLEGIANCE

STATE OF NEW JERSEY  
COUNTY OF MIDDLESEX

SS

I, Mohammad Janjua

(Print Candidate's Name)

, 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; and that I will faithfully, impartially and justly perform all the duties of the office of County Committeeperson \_\_\_\_\_, according to the best of my ability (So help me God)\*.

Sworn and subscribed to before me

This 23rd day  
of March A.D. 2023

Joseph W. Norris  
Notary / Attorney

JOSEPH W. NORRIS  
NOTARY PUBLIC OF NEW JERSEY  
Commission Expires 5/3/2025

Mohammad A. Janjua  
(Signature of Candidate)

Address 75 Heald Street

Post Office Carteret, NJ 07008

\*Person taking oath has the option of including "So help me God", if he/she so desires.

### CERTIFICATE OF ACCEPTANCE

I hereby certify that I am a member of the Democratic Party and that I am legally qualified for the office for which I have been endorsed in the foregoing petition; that I consent to stand as a candidate for nomination at the ensuing primary election, and that if nominated I agree to accept the nomination, and that I am a resident and legal voter in

District #6

(Municipality- Ward and District)

Mohammad A. Janjua  
Candidate's Signature.

### FOR COUNTY OFFICES

We do further certify that the names and Post Office addresses of the three members named as a committee on Vacancies are as follows (19:23-12).

| PRINT NAME               | ADDRESS | POST OFFICE |
|--------------------------|---------|-------------|
| 1. _____<br>(Print Name) | _____   | _____       |
| 2. _____<br>(Print Name) | _____   | _____       |
| 3. _____<br>(Print Name) | _____   | _____       |

The signers to petitions for County office may name three persons in their petition as committee on vacancies.

**NOMINATION BY PETITION FOR PRIMARY ELECTION  
FOR COUNTY, MUNICIPAL, AND COUNTY COMMITTEE OFFICES  
19:23-5 – PRIMARY ELECTION  
19:23-17 - DESIGNATION**

OFFICE: County Committee TERM OF OFFICE: 4

(IF APPLICABLE) WARD \_\_\_\_\_ DISTRICT 6

Democratic

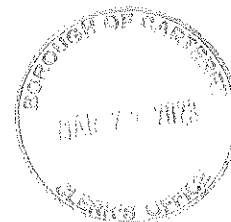
PARTY

Iris Colon

(Candidate Name)

(Candidate Name)

(Candidate Name)



*Candidates must be listed in the order they wish to appear on the ballot,  
or submit an additional letter, signed by all candidates indicating the order.*

**CANDIDATE'S REQUEST FOR DESIGNATION ON THE OFFICIAL PRIMARY BALLOT**

The above candidate(s), having been endorsed for the office in this petition, does hereby request that there be printed opposite his/her name on the said primary ticket the following designation:

Middlesex County Democratic Organization

Must not exceed six words (R.S. 19:23-17) (19:49-2)

No person may be a **candidate** for or **appointed** to any local elective office unless he/she is a **registered voter** in the ward or municipality depending upon the office involved and has been a **resident** of the ward or municipality involved for at least **one year prior to the date of election** or the date of appointment. **40A:9-1.13** (or three years for Sheriff. **40A :9-94**)

- For **Local and County Committee offices** this petition shall be filed with your **Municipal Clerk**.
- For **County offices** this petition shall be filed with your **County Clerk**.

**CONTACT YOUR MUNICIPAL OR COUNTY CLERK FOR NUMBER OF SIGNATURES REQUIRED (19:23-8)**

**NOTICE TO ALL CANDIDATES**

**ALL CANDIDATES ARE REQUIRED BY LAW TO COMPLY WITH THE PROVISIONS OF THE NEW JERSEY CAMPAIGN CONTRIBUTION AND EXPENDITURE REPORTING ACT 19:44A-1 THRU 44. FOR FURTHER INFORMATION, PLEASE CALL (609) 292-8700 OR TOLL FREE WITHIN NJ AT 1-888-313-ELEC (3532).**

County Clerk ( ☒ ) County Clerk ( ) of the County of Middlesex, Municipality of Carteret  
State of New Jersey.

I, the undersigned, hereby certify that we are qualified voters and that we reside in the above County  
Municipality, (For Ward and County Committee Candidates fill in Ward/District) → District # 6  
and that we are members of the Democratic Party and intend to affiliate with the political party at the  
ensuing election.

We endorse the candidate(s) nomination to the office of Committeeperson and we  
request that you print upon the official primary ballot for this party the name(s) of the candidate(s) for such  
nomination.

We further certify that the said person(s) so endorsed is legally qualified under the laws of this State to be  
nominated for said office (N.J.S.A. 19:23-7)

| CANDIDATE NAME                | RESIDENCE & POST OFFICE ADDRESS IF DIFFERENT & E-MAIL                                                                                                                      |
|-------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. Iris Colon<br>(Print Name) | 21 Noe St C3 / Carteret, NJ 07008<br>Street Number, Street Name / Municipality, and Zip Code<br>Post Office If different from Residence address _____ E-mail Address _____ |
| 2. _____<br>(Print Name)      | _____<br>Street Number, Street Name / Municipality, and Zip Code<br>Post Office If different from Residence address _____ E-mail Address _____                             |
| 3. _____<br>(Print Name)      | _____<br>Street Number, Street Name / Municipality, and Zip Code<br>Post Office If different from Residence address _____ E-mail Address _____                             |

ALL SIGNERS **MUST** SIGN AND PRINT THEIR NAME ON THE LINES PROVIDED IN COMPLIANCE WITH N.J.S.A  
(19:23-7)

| NAME                                                                                             | ADDRESS                                                                                         |
|--------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|
| 1. <u>Iris Colon</u><br>(Signature)<br><u>Iris Colon</u><br>(Print Name)                         | <u>21 NOE ST APT C-3</u><br><u>CARTERET NJ 07008</u><br>Residence Address including Post Office |
| 2. <u>Rosa M. Paredes</u><br>(Signature)<br><u>Rosa Paredes</u><br>(Print Name)                  | <u>21 NOE ST apt F1 Carteret NJ</u><br>Residence Address including Post Office                  |
| 3. <u>Ramona Condelesio</u><br>(Signature)<br><u>RAMONA Condelesio</u><br>(Print Name)           | <u>21 NOE ST APT F8</u><br><u>Carteret NJ</u><br>Residence Address including Post Office        |
| 4. <u>Paramjit Singh Sawhney</u><br>(Signature)<br><u>PARAMJIT SINGH SAWHNEY</u><br>(Print Name) | <u>21 NOE ST #E-4</u><br><u>CARTERET, NJ 07008</u><br>Residence Address including Post Office   |
| 5. <u>Rafaela Rivera</u><br>(Signature)<br><u>Rafaela Rivera</u><br>(Print Name)                 | <u>21 Noe St #C2</u><br><u>Carteret NJ 07008</u><br>Residence Address including Post Office     |

| NAME                                              | ADDRESS                                                   |
|---------------------------------------------------|-----------------------------------------------------------|
| 6. _____<br>(Signature)<br>_____<br>(Print Name)  | _____<br>_____<br>Residence Address including Post Office |
| 7. _____<br>(Signature)<br>_____<br>(Print Name)  | _____<br>_____<br>Residence Address including Post Office |
| 8. _____<br>(Signature)<br>_____<br>(Print Name)  | _____<br>_____<br>Residence Address including Post Office |
| 9. _____<br>(Signature)<br>_____<br>(Print Name)  | _____<br>_____<br>Residence Address including Post Office |
| 10. _____<br>(Signature)<br>_____<br>(Print Name) | _____<br>_____<br>Residence Address including Post Office |

### WITNESS SECTION:

The witness taking the affidavit below must be the person who obtains the names on this set of signatures or several sheets of signatures. The witness must take the affidavit for each set he/she solicits & sign it in the presence of the Notary public, or Attorney. The witness may sign one set of signatures **endorsing** the candidate. Note that if the witness/circulator is not a qualified voter of the political subdivision for which the candidate stands for office, then he/she is permitted to circulate said petition, but is not permitted to sign as petitioner. Although signature sheets are solicited separately, the entire petition must be bound together before submitting.

STATE OF NEW JERSEY  
COUNTY OF MIDDLESEX

SS

I, Peter Agliata, being duly sworn or affirmed upon his/her oath, depose, and say that  
Name of the Witness/Circulator

he/she is the one who gather the signatures of the petition; that said petition is signed by each of the signers thereof in his/her own proper handwriting; that each of the signers is, to the best knowledge and belief of deponent, a legal voter of the Municipality of Carteret in the County of Middlesex of the State of New Jersey, as stated in said petition, and belongs to the political party named in said petition, and that such a petition is prepared and filed in absolute good faith for the sole purpose of endorsing the person(s) therein named in order to secure their nomination or selection as stated in this petition; and further affirms that he/she is a registered voter in the State of New Jersey, who's party affiliation is of the same political party named in the petition.

Sworn to before me this 8<sup>th</sup> day  
of March, 2023

Notary/Attorney: Joseph W. Norris

JOSEPH W. NORRIS  
P-26 NOTARY PUBLIC OF NEW JERSEY  
My Commission Expires 6/30/2025

Peter Agliata  
Witness Signature

Each Candidate must complete a separate Oath of allegiance and Certificate of acceptance form.

## CANDIDATE OATH OF ALLEGIANCE

STATE OF NEW JERSEY  
COUNTY OF MIDDLESEX

SS

I, Iris Colon

(Print Candidate's Name)

, 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; and that I will faithfully, impartially and justly perform all the duties of the office of County Committeeperson \_\_\_\_\_, according to the best of my ability (So help me God)\*.

Sworn and subscribed to before me

This 8/2 day  
of March A.D. 2023

Joseph W. Norris  
Notary / Attorney

Iris Colon  
(Signature of Candidate)

Address 21 Noe St Apt C3

Post Office Carteret, NJ 07008

\*Person taking oath has the option of including "So help me God", if he/she so desires.

JOSEPH W. NORRIS  
NOTARY PUBLIC OF NEW JERSEY  
My Commission Expires 5/6/2025

## CERTIFICATE OF ACCEPTANCE

I hereby certify that I am a member of the Democratic Party and that I am legally qualified for the office for which I have been endorsed in the foregoing petition; that I consent to stand as a candidate for nomination at the ensuing primary election, and that if nominated I agree to accept the nomination, and that I am a resident and legal voter in

District #6

(Municipality- Ward and District)

Iris Colon  
Candidate's Signature.

## FOR COUNTY OFFICES

We do further certify that the names and Post Office addresses of the three members named as a committee on Vacancies are as follows (19:23-12).

| PRINT NAME               | ADDRESS | POST OFFICE |
|--------------------------|---------|-------------|
| 1. _____<br>(Print Name) | _____   | _____       |
| 2. _____<br>(Print Name) | _____   | _____       |
| 3. _____<br>(Print Name) | _____   | _____       |

The signers to petitions for County office may name three persons in their petition as committee on vacancies.

**NOMINATION BY PETITION FOR PRIMARY ELECTION  
FOR COUNTY, MUNICIPAL, AND COUNTY COMMITTEE OFFICES  
19:23-5 – PRIMARY ELECTION  
19:23-17 - DESIGNATION**

**OFFICE:** County Committee **TERM OF OFFICE:** 4

(IF APPLICABLE) **WARD** \_\_\_\_\_ **DISTRICT** 7

**Democratic**

**PARTY**

**James Cairns**

(Candidate Name)

(Candidate Name)

(Candidate Name)



*Candidates must be listed in the order they wish to appear on the ballot,  
or submit an additional letter, signed by all candidates indicating the order.*

**CANDIDATE'S REQUEST FOR DESIGNATION ON THE OFFICIAL PRIMARY BALLOT**

The above candidate(s), having been endorsed for the office in this petition, does hereby request that there be printed opposite his/her name on the said primary ticket the following designation:

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TO: Municipal Clerk (✓) County Clerk ( ) of the County of Middlesex, Municipality of Carteret  
Of the State of New Jersey.

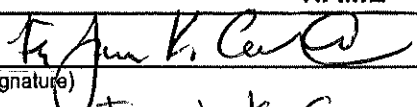
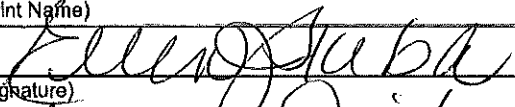
We, the undersigned, hereby certify that we are qualified voters and that we reside in the above County and Municipality, (For Ward and County Committee Candidates fill in Ward/District) → District # 7, and that we are members of the Democratic Party and intend to affiliate with the political party at the ensuing election.

We endorse the candidate(s) nomination to the office of Committeeperson and we request that you print upon the official primary ballot for this party the name(s) of the candidate(s) for such nomination.

We further certify that the said person(s) so endorsed is legally qualified under the laws of this State to be nominated for said office (N.J.S.A. 19:23-7)

| CANDIDATE NAME                  | RESIDENCE & POST OFFICE ADDRESS IF DIFFERENT & E-MAIL                                                                                                                           |
|---------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. James Cairns<br>(Print Name) | 641 Roosevelt Ave / Carteret, NJ 07008<br>Street Number, Street Name / Municipality, and Zip Code<br>Post Office if different from Residence address _____ E-mail Address _____ |
| 2.<br>(Print Name)              | Street Number, Street Name / Municipality, and Zip Code<br>Post Office if different from Residence address _____ E-mail Address _____                                           |
| 3.<br>(Print Name)              | Street Number, Street Name / Municipality, and Zip Code<br>Post Office if different from Residence address _____ E-mail Address _____                                           |

ALL SIGNERS **MUST** SIGN AND PRINT THEIR NAME ON THE LINES PROVIDED IN COMPLIANCE WITH N.J.S.A (19:23-7)

| NAME                                                                                                                                     | ADDRESS                                                                             |
|------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| 1. <br>(Signature)<br>JAMES K. CAIRNS<br>(Print Name) | 641 Roosevelt Ave<br>Carteret, NJ 07008<br>Residence Address including Post Office  |
| 2. <br>(Signature)<br>Ellen Skiba<br>(Print Name)     | 250 Washington Ave<br>Carteret, NJ 07008<br>Residence Address including Post Office |
| 3.<br>(Signature)<br><br>(Print Name)                                                                                                    | <br><br>Residence Address including Post Office                                     |
| 4.<br>(Signature)<br><br>(Print Name)                                                                                                    | <br><br>Residence Address including Post Office                                     |
| 5.<br>(Signature)<br><br>(Print Name)                                                                                                    | <br><br>Residence Address including Post Office                                     |

| NAME                                              | ADDRESS                                                   |
|---------------------------------------------------|-----------------------------------------------------------|
| 6. _____<br>(Signature)<br>_____<br>(Print Name)  | _____<br>_____<br>Residence Address including Post Office |
| 7. _____<br>(Signature)<br>_____<br>(Print Name)  | _____<br>_____<br>Residence Address including Post Office |
| 8. _____<br>(Signature)<br>_____<br>(Print Name)  | _____<br>_____<br>Residence Address including Post Office |
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STATE OF NEW JERSEY  
COUNTY OF MIDDLESEX

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Name of the Witness/Circulator

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Sworn to before me this 23rd day

of March, 2023

Notary/Attorney

Peter Agliata  
Witness Signature