

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

James Cairns

I, _____, do solemnly swear (or affirm) that I will support the
(Print Candidate's Name)

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. 2022

Joseph W. Norris
Notary / Attorney

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

James Cairns
(Signature of Candidate)

Address 641 Roosevelt Avenue

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 # 7

(Municipality- Ward and District)

James Cairns
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. _____ (Print Name)	_____	_____
2. _____ (Print Name)	_____	_____
3. _____ (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

Ellen Skiba

(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 # 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. Ellen Skiba (Print Name)	252 Washington Ave. / Carteret, NJ 07008 Street Number, Street Name / Municipality, and Zip Code Post Office If different from Residence address E-mail Address
2. (Print Name)	Street Number, Street Name / Municipality, and Zip Code Post Office If different from Residence address E-mail Address
3. (Print Name)	Street Number, Street Name / Municipality, and Zip Code 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>Ellen Skiba</u> (Signature) <u>Ellen Skiba</u> (Print Name)	<u>252 Washington</u> <u>Carteret NJ 07008</u> Residence Address including Post Office
2. <u>Henri Skiba</u> (Signature) <u>HENRI SKIBA</u> (Print Name)	<u>252 Washington</u> <u>Carteret NJ 07008</u> Residence Address including Post Office
3. (Signature) (Print Name)	 Residence Address including Post Office
4. (Signature) (Print Name)	 Residence Address including Post Office
5. (Signature) (Print Name)	 Residence Address including Post Office

NAME	ADDRESS
6. _____ (Signature) _____ (Print Name)	_____ _____ Residence Address including Post Office
7. _____ (Signature) _____ (Print Name)	_____ _____ Residence Address including Post Office
8. _____ (Signature) _____ (Print Name)	_____ _____ Residence Address including Post Office
9. _____ (Signature) _____ (Print Name)	_____ _____ Residence Address including Post Office
10. _____ (Signature) _____ (Print Name)	_____ _____ 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.

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

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, Ellen Skiba, do solemnly swear (or affirm) that I will support the
(Print Candidate's Name)

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

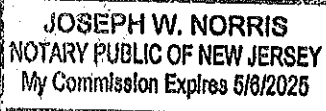
Joseph W. Norris
Notary / Attorney

Ellen Skiba
(Signature of Candidate)

Address 252 Washington 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 # 7

(Municipality- Ward and District)

Ellen Skiba
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. _____ (Print Name)	_____	_____
2. _____ (Print Name)	_____	_____
3. _____ (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 8

Democratic

PARTY

Jason Van Woeart

(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 # 8, 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. Jason Van Woeart (Print Name)	5211 Bristol Station CT/ Carteret, NJ 07008 Street Number, Street Name / Municipality, and Zip Code Post Office if different from Residence address E-mail Address
2. (Print Name)	Street Number, Street Name / Municipality, and Zip Code Post Office if different from Residence address E-mail Address
3. (Print Name)	Street Number, Street Name / Municipality, and Zip Code 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>Jason Van Woeart</u> (Signature) <u>Jason Van Woeart</u> (Print Name)	<u>5211 Bristol Station Ct</u> <u>Carteret, NJ 07008</u> Residence Address including Post Office
2. <u>Jason P. Pablo</u> (Signature) <u>Jason P. Pablo</u> (Print Name)	<u>5211 Bristol Station Ct</u> <u>Carteret, NJ 07008</u> Residence Address including Post Office
3. (Signature) (Print Name)	 Residence Address including Post Office
4. (Signature) (Print Name)	 Residence Address including Post Office
5. (Signature) (Print Name)	 Residence Address including Post Office

NAME	ADDRESS
6. _____ (Signature) _____ (Print Name)	_____ _____ Residence Address including Post Office
7. _____ (Signature) _____ (Print Name)	_____ _____ Residence Address including Post Office
8. _____ (Signature) _____ (Print Name)	_____ _____ Residence Address including Post Office
9. _____ (Signature) _____ (Print Name)	_____ _____ Residence Address including Post Office
10. _____ (Signature) _____ (Print Name)	_____ _____ 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
Commission Expires 5/8/2025

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, Jason Van Woeart

(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 Nov A.D. 2008

Notary/Attorney
JOSEPH W. NORRIS
NOTARY PUBLIC OF NEW JERSEY
My Commission Expires 5/8/2025

Jason Van Woeart
(Signature of Candidate)

Address 5211 Bristol Station CT

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 #8

(Municipality- Ward and District)

Jason Van Woeart
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. _____ (Print Name)	_____	_____
2. _____ (Print Name)	_____	_____
3. _____ (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 8

Democratic

PARTY

Dana Archeval

(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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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

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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 # 8, 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. Dana Archeval (Print Name)	664 Roosevelt Ave. / Carteret, NJ 07008 Street Number, Street Name / Municipality, and Zip Code Post Office If different from Residence address E-mail Address
2. (Print Name)	Street Number, Street Name / Municipality, and Zip Code Post Office If different from Residence address E-mail Address
3. (Print Name)	Street Number, Street Name / Municipality, and Zip Code 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>Dana C. Archeval</u> (Signature) <u>Dana C. Archeval</u> (Print Name)	<u>664 Roosevelt Ave</u> <u>Carteret NJ 07008</u> Residence Address including Post Office
2. <u>Justine Vega</u> (Signature) <u>Justine Vega</u> (Print Name)	<u>664 Roosevelt Ave</u> <u>Carteret NJ 07008</u> Residence Address including Post Office
3. <u>Khaled Alhoraihi</u> (Signature) <u>Khaled Alhoraihi</u> (Print Name)	<u>10 Christopher st</u> <u>Carteret NJ 07008</u> Residence Address including Post Office
4. <u>URSULA PITTS</u> (Signature) <u>Ursula Pitts</u> (Print Name)	<u>38 Lincoln Ave</u> <u>Carteret NJ 07008</u> Residence Address including Post Office
5. <u>Alijah Pitts</u> (Signature) <u>Alijah Pitts</u> (Print Name)	<u>38 Lincoln Ave</u> <u>Carteret NJ 07008</u> Residence Address including Post Office

NAME	ADDRESS
6. <u>Angel Pitts</u> (Signature) <u>Angel Pitts</u> (Print Name)	<u>38 Lincoln Ave 492 PO Box</u> Residence Address including Post Office
7. <u>Jacob Vega</u> (Signature) <u>Jacob Vega</u> (Print Name)	<u>664 Roosevelt Avenue</u> Residence Address including Post Office
8. _____ (Signature) _____ (Print Name)	_____ Residence Address including Post Office
9. _____ (Signature) _____ (Print Name)	_____ Residence Address including Post Office
10. _____ (Signature) _____ (Print Name)	_____ 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. Joseph W. Norris

P-26

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

Page 3

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, Dana Archeval, do solemnly swear (or affirm) that I will support the
(Print Candidate's Name)

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
My Commission Expires 5/6/2025

Dana C. Archeval
(Signature of Candidate)

Address 664 Roosevelt Ave

Post Office Carteret, NJ 07008

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CERTIFICATE OF ACCEPTANCE

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District #8

(Municipality- Ward and District)

Dana C. Archeval
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. _____ (Print Name)	_____	_____
2. _____ (Print Name)	_____	_____
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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 9

Democratic

PARTY

Tanbir Singh

(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.*

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- For **County offices** this petition shall be filed with your **County Clerk**.

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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 # 9, 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>Tanbir Singh</u> (Print Name)	<u>33 Swarthmore Dr. / Carteret, NJ 07008</u> Street Number, Street Name / Municipality, and Zip Code <u>SDULKU@GMAIL.COM</u> Post Office if different from Residence address E-mail Address
2. _____ (Print Name)	_____ Street Number, Street Name / Municipality, and Zip Code _____ Post Office if different from Residence address E-mail Address
3. _____ (Print Name)	_____ Street Number, Street Name / Municipality, and Zip Code _____ 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>[Signature]</u> (Signature) <u>TANBIR SINGH</u> (Print Name)	<u>33 SWARTHMORE DR</u> Residence Address including Post Office
2. <u>[Signature]</u> (Signature) <u>Edgar Figueroa</u> (Print Name)	<u>24 SWARTHMORE DRIVE</u> Residence Address including Post Office
3. _____ (Signature) _____ (Print Name)	_____ Residence Address including Post Office
4. _____ (Signature) _____ (Print Name)	_____ Residence Address including Post Office
5. _____ (Signature) _____ (Print Name)	_____ Residence Address including Post Office

NAME	ADDRESS
6. _____ (Signature) _____ (Print Name)	_____ _____ Residence Address including Post Office
7. _____ (Signature) _____ (Print Name)	_____ _____ Residence Address including Post Office
8. _____ (Signature) _____ (Print Name)	_____ _____ Residence Address including Post Office
9. _____ (Signature) _____ (Print Name)	_____ _____ Residence Address including Post Office
10. _____ (Signature) _____ (Print Name)	_____ _____ 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

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

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, Tanbir Singh

(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

[Signature]
(Signature of Candidate)

Address 33 Swarthmore Dr

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 #9

(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. _____ (Print Name)	_____	_____
2. _____ (Print Name)	_____	_____
3. _____ (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 10

Democratic

PARTY

Tadeusz Soltys

(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 # 10, 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. Tadeusz Soltys (Print Name)	57 Mary St #1 / Carteret, NJ 07008 Street Number, Street Name / Municipality, and Zip Code Post Office if different from Residence address _____ E-mail Address _____
2. (Print Name)	Street Number, Street Name / Municipality, and Zip Code Post Office if different from Residence address _____ E-mail Address _____
3. (Print Name)	Street Number, Street Name / Municipality, and Zip Code 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>T. Soltys</u> (Signature) <u>TADEUSZ SOLTYS</u> (Print Name)	<u>57 Mary St #1</u> <u>Carteret, NJ 07008</u> Residence Address including Post Office
2. <u>[Signature]</u> (Signature) <u>JOHITA PERAYAS</u> (Print Name)	Residence Address including Post Office
3. <u>[Signature]</u> (Signature) <u>Susan R. Napley</u> (Print Name)	<u>38 Laws Rd</u> <u>Carteret, NJ 07008</u> Residence Address including Post Office
4. _____ (Signature) _____ (Print Name)	Residence Address including Post Office
5. _____ (Signature) _____ (Print Name)	Residence Address including Post Office

NAME	ADDRESS
6. (Signature) (Print Name)	 Residence Address including Post Office
7. (Signature) (Print Name)	 Residence Address including Post Office
8. (Signature) (Print Name)	 Residence Address including Post Office
9. (Signature) (Print Name)	 Residence Address including Post Office
10. (Signature) (Print Name)	 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 A. Lish, being duly sworn or affirmed upon his/her oath, depose, and say that

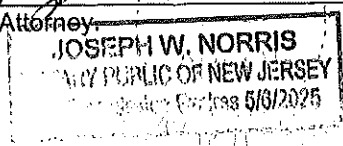
he/she is the one who gather the signatures of the petition; that said petition is signed by each of the signers thereof in his/her own proper handwriting; that each of the signers is, to the best knowledge and belief of deponent, a legal voter of the Municipality of Carteret in the County of Middlesex 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 Joseph W. Norris

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Page 3

Revised 1-5-2023

Peter A. Lish
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, Tadeusz Soltys

(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 5/8/2025

T. Soltys

(Signature of Candidate)

Address 57 Mary St #1

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 #10

(Municipality- Ward and District)

T. Soltys

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. _____ (Print Name)	_____	_____
2. _____ (Print Name)	_____	_____
3. _____ (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** 10

Democratic

PARTY

Susan Naples

(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 # 10, 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. Susan Naples (Print Name)	38 Louis St. / Carteret, NJ 07008 Street Number, Street Name / Municipality, and Zip Code Post Office if different from Residence address _____ E-mail Address _____
2. (Print Name)	Street Number, Street Name / Municipality, and Zip Code Post Office if different from Residence address _____ E-mail Address _____
3. (Print Name)	Street Number, Street Name / Municipality, and Zip Code 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>[Signature]</u> (Signature) Susan R. Naples (Print Name)	38 Louis Street Carteret, NJ 07008 Residence Address including Post Office
2. <u>[Signature]</u> (Signature) Robert J. Pape (Print Name)	42 Louis St Carteret, NJ 07008 Residence Address including Post Office
3. (Signature) (Print Name)	 Residence Address including Post Office
4. (Signature) (Print Name)	 Residence Address including Post Office
5. (Signature) (Print Name)	 Residence Address including Post Office

NAME	ADDRESS
6. _____ (Signature) _____ (Print Name)	_____ _____ Residence Address including Post Office
7. _____ (Signature) _____ (Print Name)	_____ _____ Residence Address including Post Office
8. _____ (Signature) _____ (Print Name)	_____ _____ Residence Address including Post Office
9. _____ (Signature) _____ (Print Name)	_____ _____ Residence Address including Post Office
10. _____ (Signature) _____ (Print Name)	_____ _____ 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: Joseph W. Norris

P-26
JOSEPH W. NORRIS
NOTARY PUBLIC OF NEW JERSEY
My Commission Expires 5/6/2025

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, Susan Naples

(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 5/6/2025

Susan Naples
(Signature of Candidate)

Address 38 Louis 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 #10

(Municipality- Ward and District)

Susan Naples
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. _____ (Print Name)	_____	_____
2. _____ (Print Name)	_____	_____
3. _____ (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** 11

Democratic

PARTY

Dennis McFadden

(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 # 11, 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. Dennis McFadden (Print Name)	<u>7 Skitka Ave / Carteret, NJ 07008</u> Street Number, Street Name / Municipality, and Zip Code Post Office if different from Residence address _____ E-mail Address _____	
2. _____ (Print Name)	_____ Street Number, Street Name / Municipality, and Zip Code Post Office if different from Residence address _____ E-mail Address _____	
3. _____ (Print Name)	_____ Street Number, Street Name / Municipality, and Zip Code 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>[Signature]</u> (Signature) <u>DENNIS MCFADDEN</u> (Print Name)	<u>7 SKITKA AVE</u> <u>CARTERET, NJ 07008</u> Residence Address including Post Office
2. <u>[Signature]</u> (Signature) <u>SHERYL MCFADDEN</u> (Print Name)	<u>7 Skitka Ave</u> <u>Carteret NJ 07008</u> Residence Address including Post Office
3. _____ (Signature) _____ (Print Name)	_____ Residence Address including Post Office
4. _____ (Signature) _____ (Print Name)	_____ Residence Address including Post Office
5. _____ (Signature) _____ (Print Name)	_____ Residence Address including Post Office

NAME	ADDRESS
6. _____ (Signature) _____ (Print Name)	_____ _____ Residence Address including Post Office
7. _____ (Signature) _____ (Print Name)	_____ _____ Residence Address including Post Office
8. _____ (Signature) _____ (Print Name)	_____ _____ Residence Address including Post Office
9. _____ (Signature) _____ (Print Name)	_____ _____ Residence Address including Post Office
10. _____ (Signature) _____ (Print Name)	_____ _____ 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 Allaire, 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

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

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, Dennis McFadden

(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 day
of March A.D. 2 023

Notary/Attorney

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

Dennis McFadden
(Signature of Candidate)

Address 7 Skitka 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 #11

(Municipality- Ward and District)

Dennis McFadden
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. _____ (Print Name)	_____	_____
2. _____ (Print Name)	_____	_____
3. _____ (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 11

Democratic

PARTY

Carmela Pogorzelski

(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 # 11, 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. Carmela Pogorzelski (Print Name)	99 George St. / Carteret, NJ 07008 Street Number, Street Name / Municipality, and Zip Code Post Office If different from Residence address E-mail Address
2. (Print Name)	Street Number, Street Name / Municipality, and Zip Code Post Office If different from Residence address E-mail Address
3. (Print Name)	Street Number, Street Name / Municipality, and Zip Code 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>Carmela Pogorzelski</u> (Signature) <u>Carmela Pogorzelski</u> (Print Name)	<u>99 George Street</u> <u>Carteret, NJ 07008</u> Residence Address including Post Office
2. <u>Richard R. Pogorzelski</u> (Signature) <u>Richard R. Pogorzelski</u> (Print Name)	<u>99 George Street</u> <u>Carteret, NJ 07008</u> Residence Address including Post Office
3. (Signature) (Print Name)	 Residence Address including Post Office
4. (Signature) (Print Name)	 Residence Address including Post Office
5. (Signature) (Print Name)	 Residence Address including Post Office

NAME	ADDRESS
6. _____ (Signature) _____ (Print Name)	_____ _____ Residence Address including Post Office
7. _____ (Signature) _____ (Print Name)	_____ _____ Residence Address including Post Office
8. _____ (Signature) _____ (Print Name)	_____ _____ Residence Address including Post Office
9. _____ (Signature) _____ (Print Name)	_____ _____ Residence Address including Post Office
10. _____ (Signature) _____ (Print Name)	_____ _____ 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 9th day

of March, 2023

Notary / Attorney. Joseph W. Norris

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, Carmela Pogorzelski,

(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 9th day
of March A.D. 2023

Joseph W. Norris
Notary / Attorney

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

Carmela Pogorzelski
(Signature of Candidate)

Address 99 George 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 #11

(Municipality- Ward and District)

Carmela Pogorzelski
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. _____ (Print Name)	_____	_____
2. _____ (Print Name)	_____	_____
3. _____ (Print Name)	_____	_____

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