PETITION FOR MEMBER OF THE NEW JERSEY GENERAL ASSEMBLY

100 Signatures Required (N.J.S.A. 19:23-8)

PETITION OF NOMINATION FOR THE PRIMARY ELECTION REPUBLICAN **PARTY**
(PRINT NAME OF PARTY)

3rd **LEGISLATIVE DISTRICT**

For Division of Elections Use:
Total Number of Signatures on this Petition 46
Total Number of Signatures on all Petitions 148

To the Honorable Secretary of State: (N.J.S.A. 19:23-6)

Each signer of this petition certifies that the following statements are true:

1) I reside in the State of New Jersey in the 3rd Legislative District;
2) I am a qualified voter therein;
3) I am a member of the REPUBLICAN party;
4) I intend to affiliate with the said party at the ensuing election;
5) I indorse the person named as candidate for the nomination to the office of Member of the New Jersey General Assembly; and
6) I request that you cause to be printed upon the official primary election ballot of the said party, the name of the candidate listed below; (N.J.S.A. 19:23-7).

☑ **By checking this box, I acknowledge that I have confirmed my legislative district at the following link: https://www.apportionmentcommission.org/adoption2022map.asp. I further acknowledge the legislative district listed above is the district I intend on being a candidate in as a result of re-districting.**

Name of Candidate: Joseph Collins Jr.
(Name must appear the same on all petition booklets to be filed.) (Please print or type name)

Residential Address	City	Zip Code
5 Campbell Court	Mickleton	08056

Post Office Address	City	Zip Code
5 Campbell Court	Mickleton	08056

jbcollingjr@collins-home.net
Candidate Email Address

State of New Jersey, Division of Elections
MAR 27 2023
Received

Name of Candidate: _____
(Name must appear the same on all petition booklets to be filed.) (Please print or type name)

Residential Address	City	Zip Code

Post Office Address	City	Zip Code

Candidate Email Address

☑ **Check box if candidates listed above are to be bracketed on ballot and their names shall appear on the ballot as indicated.** (N.J.S.A. 19:14-10, N.J.S.A. 19:14-12)

ALL INFORMATION ABOVE MUST BE COMPLETED PRIOR TO CIRCULATION
Petition Filing Deadline: Before 4 p.m. on March 27, 2023. (N.J.S.A.19:23-14)

(23)

ALL INFORMATION IS REQUIRED TO BE COMPLETED

SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street, City, Zip Code*)
1. Valerie Philbin	Valerie Philbin	210 Hopkins Rd. Mickleton, NJ 08056
2. Sarah M. Philbin	Sarah Philbin	210 Hopkins Rd. Mickleton NJ 08056
3. Bridget Philbin	Bridget Philbin	210 Hopkins Rd. Mickleton, NJ 08056
4. Emma Philbin	Emma Philbin	210 Hopkins Rd. Mickleton, NJ 08056
5.	Samuel J. Maccarone Jr	1 Pond View Dr Apt P305 Woolwich Twp 08085
6. Nancy J Maccarone	Nancy J. Maccarone	1 Pond View Dr Apt P305 Woolwich Twp 08085
7. Emily Maccarone	Emily Maccarone	1 Pond View Dr. Apt. P-305 Woolwich Twp. NJ 08085
8.	MARC A. CLODFELTER	126 BERWICK CT. MICKLETON, NJ 08056
9.	Raymond Rastelli	714 Nicole Ave Mickleton N.J. 08056
10.	Jill Rastelli	85 W. Wolfert Station Rd Mickleton, NJ 08056

ALL INFORMATION IS REQUIRED TO BE COMPLETED

SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street, City, Zip Code*)
11. Anthony Rastelli	Anthony Rastelli	85 West Wolfert Station Rd Mickleton NJ 08056
12. Anthony Rastelli	Anthony Rastelli	91 W. Wolfert Station Rd Mickleton, NJ 08056
13. Terry DeMarco	Terry DeMarco	99 Wolfert Station Rd Mickleton NJ 08056
14. Lauren DeMarco	LAUREN DEMARCO	99 W. WOLFERT STATION RD. Mickleton NJ 08056
15. Robert S. Long	Robert S. Long	125 Oakridge Dr. Mt. Royal 08061
16. Michele L Long	Michele L. Long	125 Oakridge Dr. Mt Royal 08061
17. Bernadette Quigley	Bernadette Quigley	255 Orchard Dr Clarksb 08020
18. Judith M. Toscano	Judith. M. Toscano	276 Orchard Dr. Clarksboro 08020
19. Carlo P. Toscano	CARLO P. TOSCANO	276 Orchard Dr. Clarksboro 08020
20.	DALE L. ARCHER	399 Kingsbury Mickleton 08056

SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street, City, Zip Code*)
21.	Richard Schober	401 Doermann Dr., Mickleton 08056
22.	Patricia Schober	401 Doermann Dr., Mickleton 08056
23.	Laura DeCinque	21 New Oak Rd Mickleton 08056
24.	David DeCinque	21 New Oak Rd, Mickleton 08056
25.	Elizabeth Leslie	337 Cristiano Ct, Mt Royal 08061
26.	Karen E Darmann	290 N Wolfert St. Rd Mickleton 08056
27.	John F Romano SR	290 N. Wolfert St. Rd Mickleton 08056
28.	John F DeGeorge	296 N. Wolfert Station Rd, Mickleton 08056
29.	Heather McConnell	292 N Wolfert St Rd Mickleton 08056
30.	A. Christopher Dorman	280 N. Wolfert Sta Rd Mickleton 08056

SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street, City, Zip Code*)
31.	ELEANOR DORMANN	284 N. Wolfert Sta Rd Mickleton 08056
32.	Kim Dormann	280 N. Wolfert Sta. Rd. Mickleton 08056
33.	Mark Dormann	265 N. Wolfert Sta. Rd Mickleton 08056
34.	Jennifer Dormann	265 N. Wolfert Rd. Mickleton NJ 08056
35.	Mark Dormann Jr	~~284~~ 265 N. Wolfert Station Rd Mickleton, NJ 08056
36.	MaryJo Montgomery	504 Legends Ct Mickleton NJ 08056
37.	PATRICK S. MONTGOMERY	504 LEGENDS CT. MICKLETON, NJ 08056
38.	ROBERT J. TICE	18 MARINO DR CLARKSBORO NJ 08020
39.	Kevin M. Rice	1216 Royal Lane West Deptford NJ 08086
40.	Lisa M Rice	1216 Royal Lane West Deptford, NJ 08086

ALL INFORMATION IS REQUIRED TO BE COMPLETED

SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street, City, Zip Code*)
41. Lauren Rice	Lauren Rice	1216 Royal Lane West Deptford NJ 08086
42.	Kevin Rice	1216 Royal Lane West Deptford NJ 08086
43.	Keith Hollingshead	348 Kings Hwy Clarksboro, NJ 08020
44. Eileen Hollingshead	Eileen Hollingshead	348 Kings Hwy Clarksboro NJ 08020
45. David Jenkins	David Jenkins	397 Doerrmann Dr Mickleton NJ 08056
46. Mark DeMarco	Mark DeMarco	214 Lafayette Dr Lyn Top NJ 08057
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SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street*, City, Zip Code)
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SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street,* City, Zip Code)
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SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street*, City, Zip Code)
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SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street*, City, Zip Code)
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SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street*, City, Zip Code)
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AFFIDAVIT OF PERSON WHO CIRCULATES THIS PETITION AND WITNESSES SIGNATURES

(N.J.S.A. 19:23-11)

The person making the affidavit below must be the person who witnessed the signatures appearing on this petition or any other petition for the same candidate and office. The person must make an affidavit for each petition and set of signatures he/she solicits and sign the affidavit in the presence of a person authorized to administer oaths (e.g., notary public).

State of New Jersey :

: ss.

County of Gloucester :

I, JAMES A. PHELAN JR., being duly sworn, upon my oath say that my party affiliation is of the same political party named
(Print Name of Circulator/Witness)
in the petition, I am at least 18 years of age, a citizen of the United States and not otherwise disqualified from voting; that the petition is signed by each of the signers thereof in his/her proper handwriting; that the signers are to the best knowledge and belief of the affiant legal voters of the State or political subdivision thereof, as the case may be, as stated in the petition, belong to the political party named in the petition.

Sworn and subscribed to before me in

Gloucester N.J., on
(List County where Affidavit was signed and notarized)

this 26th day of
(Day)

March, 2023
(Month) (Year)

Donald C. Brown Jr.
(Notary Signature)

5/19/27
(My Commission Expires)

(Signature of Circulator/Witness)

210 HOPKINS ROAD
(Residence Address of Circulator/Witness)

MICKLETON, NJ. 08056
(City or Town of Circulator/Witness) (Zip Code)

DONALD C BROWN JR.
NOTARY PUBLIC
STATE OF NEW JERSEY
ID # 2201612
MY COMMISSION EXPIRES MAY 19, 2027

(Place Notary Stamp in the area above)

ALL INFORMATION IS REQUIRED TO BE COMPLETED

CANDIDATE'S REQUEST FOR SLOGAN ON THE OFFICIAL PRIMARY ELECTION BALLOT

The candidate named in this petition requests that there be printed on the primary election ballot the following slogan: (Slogan must not exceed six words and must be in accord with N.J.S.A. 19:23-17. If slogan includes the name of any person other than the candidate or any incorporated association of this State, written consent of such person or incorporated association of this State must be attached.)

	County	**Slogan** (Please Print or Type)
1.	GLOUCESTER	GLOUCESTER COUNTY REGULAR REPUBLICAN PARTY
2.	SALEM	Salem County Republican Party
3.	Cumberland	Cumberland County Republican Party
4.		

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

NOTICE

All candidates are required by law to comply with the provisions of the "New Jersey Campaign Contributions and Expenditures Reporting Act." For further information, please contact the Election Law Enforcement Commission at (609) 292-8700.

COMMITTEE ON VACANCIES

(The Committee on Vacancies may only fill a vacancy up to 55 days before the Primary Election) (N.J.S.A.19:23-12)

This committee shall have power in case of resignation or otherwise of the person endorsed as a candidate in said petition to fill such a vacancy by filing with the Secretary of State, a certificate of nomination to fill the vacancy.

Note: It is not mandatory to have a "Committee on Vacancies".

The names and residential addresses of the three members named as a committee on vacancies are as follows:

Name(s)	Residence Address	City	Zip Code
MARLA DEMARCANTONIO	216 LAFAYETTE DR	LOGAN TWP. NJ	08085
BOB TICE	18 MARINO DR	CLARKSBORO, NJ.	08020
SCOTT MUSCARELLA	208 HICKORY LANE	MULLICA HILL, NJ.	08062

OATH OF ALLEGIANCE

Candidate Need Only Sign This Page Once for All Petitions

QUALIFICATIONS FOR CANDIDATE FOR THE OFFICE OF MEMBER OF THE GENERAL ASSEMBLY:

Shall have attained the age of 21 years by the day of the swearing into office
United States Citizen
Resident of New Jersey for two years as of the day of the General Election
Resident of the legislative district for one year as of the day of the General Election
Legal voter by the day the petition is filed

State of New Jersey :

: ss.

County of Gloucester :

I, Joseph Collins Jr. , do solemnly swear (or affirm) that I will support the Constitution of the United States and the Constitution of the
(Print Name of General Assembly Candidate)
State of New Jersey; that I will bear true faith and allegiance to the same and to the Governments established in the United States and in this State, under the authority of the people.

So help me God.

Sworn and subscribed to before me in

Gloucester N.J., on
(List County where Oath was signed and notarized)

this 26th day of March, 2023
(Day) (Month) (Year)

Donald C. Brown Jr.
(Notary Signature)

5/19/27
(My Commission Expires)

(Signature of General Assembly Candidate)

DONALD C BROWN JR.
NOTARY PUBLIC
STATE OF NEW JERSEY
ID # 2201612
MY COMMISSION EXPIRES MAY 19, 2027

(Place Notary Stamp in the area above)

ALL INFORMATION IS REQUIRED TO BE COMPLETED

OATH OF ALLEGIANCE

Candidate Need Only Sign This Page Once for All Petitions

QUALIFICATIONS FOR CANDIDATE FOR THE OFFICE OF MEMBER OF THE GENERAL ASSEMBLY:

Shall have attained the age of 21 years by the day of the swearing into office
United States Citizen
Resident of New Jersey for two years as of the day of the General Election
Resident of the legislative district for one year as of the day of the General Election
Legal voter by the day the petition is filed

State of New Jersey :

: ss.

County of :

I, _____, do solemnly swear (or affirm) that I will support the Constitution of the United States and the Constitution of the
(Print Name of General Assembly Candidate)
State of New Jersey; that I will bear true faith and allegiance to the same and to the Governments established in the United States and in this State, under the authority of the people.

So help me God.

Sworn and subscribed to before me in

_____N.J., on _____
(List County where Oath was signed and notarized) (Signature of General Assembly Candidate)

this _____ day of_____, 20____
(Day) (Month) (Year)

_____
(Notary Signature)

_____
(My Commission Expires)

(Place Notary Stamp in the area above)

ALL INFORMATION IS REQUIRED TO BE COMPLETED

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Please Check Applica

I, the undersigned, here

☒ I have not been convict
offense in any jurisdicti

☐ I have been convicted
offense in any jurisdicti

1. Crime of conviction: _
2. Date of conviction: _
3. Place of conviction: _
4. Penalties imposed for

**As an alternative, you may s*
criminal offense, such informa
Statutes shall not be subject t

I certify the foregoing is a t

ALL INFORMATION IS REQUIRED T

CERTIFICATE OF ACCEPTANCE TO BE SIGNED BY CANDIDATE

(N.J.S.A. 19:23-15)

I, the undersigned, hereby certify that I am a member of the Republican Party and qualified for the office.

(Signature of General Assembly Candidate)

Joseph Collins Jr.
(Printed or Typewritten Name of General Assembly Candidate)

5 Campbell Court
(Residence Address of General Assembly Candidate)

Mickleton 08056
(City or Town & Zip Code of General Assembly Candidate)

Candidate Must Sign an Oath of Allegiance and Certificate of Acceptance

Pursuant to N.J.S.A. 19:23-15, however, no candidate who has accepted the nomination by a direct petition of nomination for the general election shall sign an acceptance to a petition of nomination for such office for the primary election. In addition, no candidate named in a petition for the office of Member of the New Jersey General Assembly shall sign an acceptance if the candidate has signed an acceptance for the primary nomination or any other petition of nomination for the office of member of the New Jersey General Assembly in another legislative district in the same calendar year.

ALL INFORMATION IS REQUIRED TO BE COMPLETED

DISCLOSURE STATEMENT OF CRIMINAL CONVICTION

Pursuant to P.L. 2004, chapter 26 the following statement **must be completed and filed** with the Nomination Petition

Please Check Applicable Box

I, the undersigned, hereby certify that in accordance with N.J.S.A. 19:23-15:

☐ I have not been convicted of any offense graded by Title 2C of the New Jersey Statutes as a crime of the first, second, third or fourth degree, or an offense in any jurisdiction which, if committed in this State, would constitute such a crime.

☐ I have been convicted of an offense graded by Title 2C of the New Jersey Statutes as a crime of the first, second, third or fourth degree, or any offense in any jurisdiction which, if committed in this State, would constitute such a crime as follows:

1. Crime of conviction: _____
2. Date of conviction: _____
3. Place of conviction: _____
4. Penalties imposed for the conviction: _____

**As an alternative, you may submit with the statement a copy of an official document that provides the above information. If you have been convicted of more than one criminal offense, such information about each conviction shall be provided. Records of expunged conviction(s) pursuant to chapter 52 of Title 2C of the New Jersey Statutes shall not be subject to disclosure.*

I certify the foregoing is a true and accurate statement.

_____
(Signature of General Assembly Candidate)

_____
(Printed or Typewritten Name of General Assembly Candidate)

_____
(Residential Address of General Assembly Candidate)

_____
(City or Town of General Assembly Candidate) (Zip Code)

2

PETITION FOR MEMBER OF THE NEW JERSEY GENERAL ASSEMBLY

100 Signatures Required (N.J.S.A. 19:23-8)

PETITION OF NOMINATION FOR THE PRIMARY ELECTION Republican **PARTY**
(PRINT NAME OF PARTY)

3rd **LEGISLATIVE DISTRICT**

For Division of Elections Use:
Total Number of Signatures on this Petition 35
Total Number of Signatures on all Petitions 148

To the Honorable Secretary of State: (N.J.S.A. 19:23-6)

Each signer of this petition certifies that the following statements are true:

1) I reside in the State of New Jersey in the 3rd Legislative District;
2) I am a qualified voter therein;
3) I am a member of the Republican party;
4) I intend to affiliate with the said party at the ensuing election;
5) I indorse the person named as candidate for the nomination to the office of Member of the New Jersey General Assembly; and
6) I request that you cause to be printed upon the official primary election ballot of the said party, the name of the candidate listed below; (N.J.S.A. 19:23-7).

☑ **By checking this box, I acknowledge that I have confirmed my legislative district at the following link: https://www.apportionmentcommission.org/adoption2022map.asp. I further acknowledge the legislative district listed above is the district I intend on being a candidate in as a result of re-districting.**

Name of Candidate: Joseph Collins Jr.
(Name must appear the same on all petition booklets to be filed.) (Please print or type name)

Residential Address	City	Zip Code
5 Campbell Court	Mickleton	08056
5 Campbell Court	Mickleton	08056
Post Office Address	City	Zip Code

jbcollinsjr@collins-home.net
Candidate Email Address

State of New Jersey, Division of Ele...
MAR 27 2023
Received

Name of Candidate: _____
(Name must appear the same on all petition booklets to be filed.) (Please print or type name)

Residential Address	City	Zip Code
Post Office Address	City	Zip Code

Candidate Email Address

☑ **Check box if candidates listed above are to be bracketed on ballot and their names shall appear on the ballot as indicated.** (N.J.S.A. 19:14-10, N.J.S.A. 19:14-12)

ALL INFORMATION ABOVE MUST BE COMPLETED PRIOR TO CIRCULATION
Petition Filing Deadline: Before 4 p.m. on March 27, 2023. (N.J.S.A.19:23-14)

SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street, City, Zip Code*)
1.	Joseph Collins Jr	5 Campbell Court Mickleton 08056
2. Michelle L Heil	Michelle Heil	310 Heritage Rd Mickleton, NJ 08056
3.	Michelle Heil	310 Heritage Rd Mickleton NJ 08056
4.	Bridget Collins	5Campbell Ct. mickleton 08056
5.	Mary-Kathryn Collins	5 Campbell Court Mickleton NJ 08056
6.	Theresa Wordelmann	215 Sullivan Drive Mickleton, NJ 08056
7.	Robert F. Wordelmann	215 Sullivan Drive Mickleton, NJ 08056
8. Harry J Zimmer IV	Harry J Zimmer IV	233 Bartlett, Drive mickleTon, NJ 08056
9. Susan Zimmer	Susan Zimmer	233 Bartlett Drive Mickleton NJ 08056
10.	Ryan Zimmer	233 Bartlett Drive Mickleton NJ 08056

ALL INFORMATION IS REQUIRED TO BE COMPLETED

SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street, City, Zip Code*)
11. Kristen Santacapito	Kristen Santacapito	619 Third Street Woodbury Heights NJ 08097
12. Kathryn Malak	KATHRYN MALAK	43 Pelican Pt. West Deptford
13. Peter J Johnson III	Peter J. Johnson III	719 Rachael Drive Mickleton NJ 08056
14. Patricia A Johnson	Patricia A Johnson	719 Rachael Drive Mickleton, NJ 08056
15. Steven [illegible]	Steven P. Johnson	719 Rachael Dr. Mickleton, NJ 08056
16. Peter Johnson V	Peter Johnson V	719 Rachael Dr Mickleton, NJ 08056
17. MB	MARK E. BUZBY	217 BARTLETT DR MICKLETON NJ 08056
18. Andrea J Buzby	Andrea J. Buzby	217 Bartlett Dr. Mickleton NJ 08056
19. Dan Bruce	DAN BRUCE	215 BARTLETT Dr MICKLETON NJ 08056
20. Christyna Bruce	Christyna Bruce	215 Bartlett Dr. Mickleton, NJ 08056

ALL INFORMATION IS REQUIRED TO BE COMPLETED

SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street, City, Zip Code*)
21. Heather Jackson	HEATHER JACKSON	3 CAMPBELL CT MICKLETON NJ 08056
22. Mark Jackson	Mark Jackson	3 Campbell Ct. Mickleton NJ 08056
23. Patrick Vannelli	Patrick Vannelli	200 Sullivan Drive Mickleton, NJ 08056
24. Michael Tilson	Michael Tilson	204 Sullivan Dr Mickleton, NJ 08056
25. Diane Nocito	Diane Nocito	203 Sullivan Dr. Mickleton, NJ 08056
26. James S Nocito	James Nocito	203 Sullivan Dr. Mickleton, NJ 08056
27. Charles E McCracken	Charles E McCracken	16 Putnam Ct Mickleton NJ 08056
28. Doug Gill	DOUG GILL	6 PUTNAM CT. MICKLETON NJ 08056
29. Michelle Berkoben	Michelle Berkoben	134 Bartlett Mickleton NJ 08056
30. Stephen Olafsen	STEPHEN OLAFSEN	109 CRESTVIEW CT MULLICA HILL NJ 08062

SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street, City, Zip Code*)
31.	Nicole Olafsen	109 Crestview CT Mullica Hill NJ 08062
32.	JOHN HOUSTON	2 CAMPBELL COURT MICKLETON, NJ 08056
33.	Breslin Heil	310 Heritage Rd Mickleton NJ 08056
34.	John Hickey	203 Smallwood Drive Mickleton, NJ 08056
35.	BRIAN COLL	6 CAMPBELL CT. MICKLETON, NJ 08056
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SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street*, City, Zip Code)
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SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street*, City, Zip Code)
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SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street*, City, Zip Code)
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SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street*, City, Zip Code)
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SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street*, City, Zip Code)
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SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street*, City, Zip Code)
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AFFIDAVIT OF PERSON WHO CIRCULATES THIS PETITION AND WITNESSES SIGNATURES

(N.J.S.A. 19:23-11)

The person making the affidavit below must be the person who witnessed the signatures appearing on this petition or any other petition for the same candidate and office. The person must make an affidavit for each petition and set of signatures he/she solicits and sign the affidavit in the presence of a person authorized to administer oaths (e.g., notary public).

State of New Jersey :

: ss.

County of Gloucester :

I, Joseph Collins Jr. (Print Name of Circulator/Witness), being duly sworn, upon my oath say that my party affiliation is of the same political party named in the petition, I am at least 18 years of age, a citizen of the United States and not otherwise disqualified from voting; that the petition is signed by each of the signers thereof in his/her proper handwriting; that the signers are to the best knowledge and belief of the affiant legal voters of the State or political subdivision thereof, as the case may be, as stated in the petition, belong to the political party named in the petition.

Sworn and subscribed to before me in

Gloucester N.J., on
(List County where Affidavit was signed and notarized)

this 26th day of
(Day)

March, 2023
(Month) (Year)

Donald C. Brown, Jr.
(Notary Signature)

5/19/27
(My Commission Expires)

(Signature of Circulator/Witness)

5 Campbell Court
(Residence Address of Circulator/Witness)

Mickleton 08056
(City or Town of Circulator/Witness) (Zip Code)

DONALD C BROWN JR.
NOTARY PUBLIC
STATE OF NEW JERSEY
ID # 2201612
MY COMMISSION EXPIRES MAY 19, 2027

(Place Notary Stamp in the area above)

ALL INFORMATION IS REQUIRED TO BE COMPLETED

CANDIDATE'S REQUEST FOR SLOGAN ON THE OFFICIAL PRIMARY ELECTION BALLOT

The candidate named in this petition requests that there be printed on the primary election ballot the following slogan: (Slogan must not exceed six words and must be in accord with N.J.S.A. 19:23-17. If slogan includes the name of any person other than the candidate or any incorporated association of this State, written consent of such person or incorporated association of this State must be attached.)

County	**Slogan** (Please Print or Type)
1. GLOUCESTER	GLOUCESTER COUNTY REGULAR REPUBLICAN PARTY
2. SALEM	Salem County Republican Party
3. CUMBERLAND	Cumberland County Republican Party
4.	

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

NOTICE

All candidates are required by law to comply with the provisions of the "New Jersey Campaign Contributions and Expenditures Reporting Act." For further information, please contact the Election Law Enforcement Commission at (609) 292-8700.

COMMITTEE ON VACANCIES

(The Committee on Vacancies may only fill a vacancy up to 55 days before the Primary Election) (N.J.S.A.19:23-12)

This committee shall have power in case of resignation or otherwise of the person endorsed as a candidate in said petition to fill such a vacancy by filing with the Secretary of State, a certificate of nomination to fill the vacancy.

Note: It is not mandatory to have a "Committee on Vacancies".

The names and residential addresses of the three members named as a committee on vacancies are as follows:

Name(s)	Residence Address	City	Zip Code
Marla DeMarcantonio	516 Lafayette Dr.	Logan Twp NJ	08085
Bob Tice	18 Marino Dr.	Clarksboro NJ	08020
Scott Mascarella	208 Hickory Lane	Mullica Hill NJ	08062

OATH OF ALLEGIANCE

Candidate Need Only Sign This Page Once for All Petitions

QUALIFICATIONS FOR CANDIDATE FOR THE OFFICE OF MEMBER OF THE GENERAL ASSEMBLY:

Shall have attained the age of 21 years by the day of the swearing into office
United States Citizen
Resident of New Jersey for two years as of the day of the General Election
Resident of the legislative district for one year as of the day of the General Election
Legal voter by the day the petition is filed

State of New Jersey :

: ss.

County of Gloucester :

I, Joseph Collins Jr., do solemnly swear (or affirm) that I will support the Constitution of the United States and the Constitution of the
(Print Name of General Assembly Candidate)
State of New Jersey; that I will bear true faith and allegiance to the same and to the Governments established in the United States and in this State, under the authority of the people.

So help me God.

Sworn and subscribed to before me in

Gloucester N.J., on
(List County where Oath was signed and notarized)

(Signature of General Assembly Candidate)

this 26th (Day) day of March (Month), 2023 (Year)

(Notary Signature)

5/19/27
(My Commission Expires)

DONALD C BROWN JR.
NOTARY PUBLIC
STATE OF NEW JERSEY
ID # 2201612
MY COMMISSION EXPIRES MAY 19, 2027

(Place Notary Stamp in the area above)

ALL INFORMATION IS REQUIRED TO BE COMPLETED

OATH OF ALLEGIANCE

Candidate Need Only Sign This Page Once for All Petitions

QUALIFICATIONS FOR CANDIDATE FOR THE OFFICE OF MEMBER OF THE GENERAL ASSEMBLY:

Shall have attained the age of 21 years by the day of the swearing into office
United States Citizen
Resident of New Jersey for two years as of the day of the General Election
Resident of the legislative district for one year as of the day of the General Election
Legal voter by the day the petition is filed

State of New Jersey :

: ss.

County of :

I, _____, do solemnly swear (or affirm) that I will support the Constitution of the United States and the Constitution of the
(Print Name of General Assembly Candidate)
State of New Jersey; that I will bear true faith and allegiance to the same and to the Governments established in the United States and in this State, under the authority of the people.

So help me God.

Sworn and subscribed to before me in

_____N.J., on _____
(List County where Oath was signed and notarized) (Signature of General Assembly Candidate)

this _____ day of_____, 20____
(Day) (Month) (Year)

_____
(Notary Signature)

_____
(My Commission Expires) (Place Notary Stamp in the area above)

ALL INFORMATION IS REQUIRED TO BE COMPLETED

CERTIFICATE OF ACCEPTANCE TO BE SIGNED BY CANDIDATE

(N.J.S.A. 19:23-15)

I, the undersigned, hereby certify that I am a member of the Republican Party and qualified for the office.

(Signature of General Assembly Candidate)

Joseph Collins Jr.
(Printed or Typewritten Name of General Assembly Candidate)

5 Campbell Court
(Residence Address of General Assembly Candidate)

Mickleton 08056
(City or Town & Zip Code of General Assembly Candidate)

Candidate Must Sign an Oath of Allegiance and Certificate of Acceptance

Pursuant to N.J.S.A. 19:23-15, however, no candidate who has accepted the nomination by a direct petition of nomination for the general election shall sign an acceptance to a petition of nomination for such office for the primary election. In addition, no candidate named in a petition for the office of Member of the New Jersey General Assembly shall sign an acceptance if the candidate has signed an acceptance for the primary nomination or any other petition of nomination for the office of member of the New Jersey General Assembly in another legislative district in the same calendar year.

CERTIFICATE OF ACCEPTANCE TO BE SIGNED BY CANDIDATE

(N.J.S.A. 19:23-15)

I, the undersigned, hereby certify that I am a member of the _____Party and qualified for the office.

_____
(Signature of General Assembly Candidate)

_____
(Printed or Typewritten Name of General Assembly Candidate)

_____
(Residence Address of General Assembly Candidate)

_____
(City or Town & Zip Code of General Assembly Candidate)

Candidate Must Sign an Oath of Allegiance and Certificate of Acceptance

Pursuant to N.J.S.A. 19:23-15, however, no candidate who has accepted the nomination by a direct petition of nomination for the general election shall sign an acceptance to a petition of nomination for such office for the primary election. In addition, no candidate named in a petition for the office of Member of the New Jersey General Assembly shall sign an acceptance if the candidate has signed an acceptance for the primary nomination or any other petition of nomination for the office of member of the New Jersey General Assembly in another legislative district in the same calendar year.

DISCLOSURE STATEMENT OF CRIMINAL CONVICTION

Pursuant to P.L. 2004, chapter 26 the following statement **must be completed and filed** with the Nomination Petition

Please Check Applicable Box

I, the undersigned, hereby certify that in accordance with N.J.S.A. 19:23-15:

☒ I have not been convicted of any offense graded by Title 2C of the New Jersey Statutes as a crime of the first, second, third or fourth degree, or an offense in any jurisdiction which, if committed in this State, would constitute such a crime.

☐ I have been convicted of an offense graded by Title 2C of the New Jersey Statutes as a crime of the first, second, third or fourth degree, or any offense in any jurisdiction which, if committed in this State, would constitute such a crime as follows:

1. Crime of conviction: _____
2. Date of conviction: _____
3. Place of conviction: _____
4. Penalties imposed for the conviction: _____

**As an alternative, you may submit with the statement a copy of an official document that provides the above information. If you have been convicted of more than one criminal offense, such information about each conviction shall be provided. Records of expunged conviction(s) pursuant to chapter 52 of Title 2C of the New Jersey Statutes shall not be subject to disclosure.*

I certify the foregoing is a true and accurate statement.

_____
(Signature of General Assembly Candidate)

Joseph Collins Jr.
(Printed or Typewritten Name of General Assembly Candidate)

5 Campbell Court
(Residential Address of General Assembly Candidate)

Mickleton 08056
(City or Town of General Assembly Candidate) (Zip Code)

ALL INFORMATION IS REQUIRED TO BE COMPLETED

DISCLOSURE STATEMENT OF CRIMINAL CONVICTION

Pursuant to P.L. 2004, chapter 26 the following statement **must be completed and filed** with the Nomination Petition

Please Check Applicable Box

I, the undersigned, hereby certify that in accordance with N.J.S.A. 19:23-15:

☑ I have not been convicted of any offense graded by Title 2C of the New Jersey Statutes as a crime of the first, second, third or fourth degree, or an offense in any jurisdiction which, if committed in this State, would constitute such a crime.

☐ I have been convicted of an offense graded by Title 2C of the New Jersey Statutes as a crime of the first, second, third or fourth degree, or any offense in any jurisdiction which, if committed in this State, would constitute such a crime as follows:

1. Crime of conviction: _____
2. Date of conviction: _____
3. Place of conviction: _____
4. Penalties imposed for the conviction: _____

**As an alternative, you may submit with the statement a copy of an official document that provides the above information. If you have been convicted of more than one criminal offense, such information about each conviction shall be provided. Records of expunged conviction(s) pursuant to chapter 52 of Title 2C of the New Jersey Statutes shall not be subject to disclosure.*

I certify the foregoing is a true and accurate statement.

_____
(Signature of General Assembly Candidate)

_____
(Printed or Typewritten Name of General Assembly Candidate)

_____
(Residential Address of General Assembly Candidate)

_____
(City or Town of General Assembly Candidate) (Zip Code)

3

2023 PRIMARY ELECTION – N.J. GENERAL ASSEMBLY

ITION FOR MEMBER OF THE NEW JERSEY GENERAL ASSEMBLY

Signatures Required (N.J.S.A. 19:23-8)

For Division of Elections Use:

Total Number of Signatures on this Petition 35

Total Number of Signatures on all Petitions 148

PETITION OF NOMINATION FOR THE PRIMARY ELECTION REPUBLICAN **PARTY**
(PRINT NAME OF PARTY)

3rd **LEGISLATIVE DISTRICT**

To the Honorable Secretary of State: (N.J.S.A. 19:23-6)

Each signer of this petition certifies that the following statements are true:

1) I reside in the State of New Jersey in the 3rd Legislative District;
2) I am a qualified voter therein;
3) I am a member of the REPUBLICAN party;
4) I intend to affiliate with the said party at the ensuing election;
5) I indorse the person named as candidate for the nomination to the office of Member of the New Jersey General Assembly; and
6) I request that you cause to be printed upon the official primary election ballot of the said party, the name of the candidate listed below; (N.J.S.A. 19:23-7).

☑ **By checking this box, I acknowledge that I have confirmed my legislative district at the following link: https://www.apportionmentcommission.org/adoption2022map.asp. I further acknowledge the legislative district listed above is the district I intend on being a candidate in as a result of re-districting.**

Name of Candidate: Joseph Collins Jr.
(Name must appear the same on all petition booklets to be filed.) (Please print or type name)

5 Campbell Court — Residential Address
Mickleton — City
08056 — Zip Code

5 Campbell Court — Post Office Address
Mickleton — City
08056 — Zip Code

jbcollins@collins-home.net — Candidate Email Address

State of New Jersey, Division of Elections
MAR 27 2023
Received

Name of Candidate:
(Name must appear the same on all petition booklets to be filed.) (Please print or type name)

Residential Address — City — Zip Code

Post Office Address — City — Zip Code

Candidate Email Address

☑ **Check box if candidates listed above are to be bracketed on ballot and their names shall appear on the ballot as indicated.** (N.J.S.A. 19:14-10, N.J.S.A. 19:14-12)

ALL INFORMATION ABOVE MUST BE COMPLETED PRIOR TO CIRCULATION
Petition Filing Deadline: Before 4 p.m. on March 27, 2023. (N.J.S.A.19:23-14)

ALL INFORMATION IS REQUIRED TO BE COMPLETED

SIGNATURE SHEET

	Signature	Print Name	Residence Address (*Number, Street, City, Zip Code*)
1.		Kristi Jennings	104 N. West Ave Wenonah NJ 08090
2.		Susan Mayer	101 N Monroe Av Wenonah NJ 08090
3.		Larry Bacon	101 N. Monroe Ave Wenonah NJ 08090
4.		Kevin P Moran	10 N. Clinton Ave Wenonah NJ 08090
5.		Robert J. Baines	105 N. Stockton Ave Wenonah, NJ 08090
6.	Donna M. Baines	Donna M. Baines	105 N. Stockton Ave Wenonah, NJ 08090
7.		William C. Nonas	106 W. Buttonwood St Wenonah, NJ 08090
8.		Michael J. Kinlade, Jr.	107 N Monroe Ave Wenonah, NJ 08090
9.		JOHN R. DOMINY	105 S. CLINTON AVE WENONAH NJ 08090
10.	Melissa Buscher	Melissa Buscher	312 N. Marian Ave. Wenonah, NJ 08090

ALL INFORMATION IS REQUIRED TO BE COMPLETED

SIGNATURE SHEET

	Signature	Print Name	Residence Address (*Number, Street, City, Zip Code*)
11.		Brent Buscher	312 N Marion Ave Wenonah 08090
12.		Kurt Kohler	10 N. West Wenonah NJ 08090
13.		Beth Kohler	10 N West Ave Wenonah NJ 08090
14.		Zak Shlichte	100 N West Ave Wenonah NJ 08090
15.		MARK BRETON	207 N. Princeton Ave Wenonah NJ 08090
16.		MARK CHIODO	207 N. Princeton Ave Wenonah NJ 08090
17.		HEATHER Bosco	168 EAST Ave WOODSTOWN. NJ 08098
18.		DON Bosco JR	168 EAST Ave WOODSTOWN. NJ 08098
19.		Catherine Pulaski	1005 Lexington Mews Swedesboro NJ 08085
20.		Matthew Smith	1005 Lexington Mews Swedesboro NJ 08085

ALL INFORMATION IS REQUIRED TO BE COMPLETED

SIGNATURE SHEET

	Signature	Print Name	Residence Address (*Number, Street, City, Zip Code*)
21.	Barbara Capelli	Barbara Capelli	101 W Manor Ave Wenonah NJ 08090
22.	Jaclyn Martin	Jaclyn Martin	12 S. Jefferson Ave Wenonah, NJ 08090
23.	Stacy Wright	Stacy Wright	307 E Manor Ave Wenonah NJ 08090
24.	Richard Wright	Richard Wright	307 E MANOR AVE. WENONAH. NJ 08090
25.	Chrissy Morrison	Chrissy Morrison	105 S. Princeton Ave Wenonah, NJ 08090
26.	Phil Morison	Phil Morison	105 S. Princeton Ave Wenonah, NJ 08090
27.	Tammy Rowe	Tammy Rowe	1603 Lexington Mews Woolwich Twp NJ 08085
28.	Gaddy Galvan	Gaddy Galvan	1603 Lexington Mews Woolwich Twp NJ 08085
29.		Scott Kompa	21 Waterview Dr Pilesgrove NJ 08098
30.	Lori Kompa	Lori Kompa	21 waterview Drive Pilesgrove NJ 08098

ALL INFORMATION IS REQUIRED TO BE COMPLETED

SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street, City, Zip Code*)
31. Colleen Moran	Colleen Moran	10 N. Clinton Ave. Wenonah, NJ 08090
32. Susan Nicolle	Susan Nicolle	310 N. Clinton Ave. Wenonah, NJ 08090
33. Mark Nicolle	MARK NICOLLE	310 N. CLINTON AVE WENONAH, NJ 08090
34. MARGUERITE SILINZO	Marguerite Silinzo	225 N 2nd ST NATIONAL PARK, NJ 08063
35. Cherie Bobbitt	Cherie Bobbitt	171 Kings Hwy Mt. Royal 08061
36.		
37.		
38.		
39.		
40.		

SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street*, City, Zip Code)
41.		
42.		
43.		
44.		
45.		
46.		
47.		
48.		
49.		
50.		

SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street, City, Zip Code*)
51.		
52.		
53.		
54.		
55.		
56.		
57.		
58.		
59.		
60.		

SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street,* City, Zip Code)
61.		
62.		
63.		
64.		
65.		
66.		
67.		
68.		
69.		
70.		

SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street*, City, Zip Code)
71.		
72.		
73.		
74.		
75.		
76.		
77.		
78.		
79.		
80.		

SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street, City, Zip Code*)
81.		
82.		
83.		
84.		
85.		
86.		
87.		
88.		
89.		
90.		

SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street*, City, Zip Code)
91.		
92.		
93.		
94.		
95.		
96.		
97.		
98.		
99.		
100.		

AFFIDAVIT OF PERSON WHO CIRCULATES THIS PETITION AND WITNESSES SIGNATURES

(N.J.S.A. 19:23-11)

The person making the affidavit below must be the person who witnessed the signatures appearing on this petition or any other petition for the same candidate and office. The person must make an affidavit for each petition and set of signatures he/she solicits and sign the affidavit in the presence of a person authorized to administer oaths (e.g., notary public).

State of New Jersey :

: ss.

County of Salem :

I, Beth Sawyer (Print Name of Circulator/Witness), being duly sworn, upon my oath say that my party affiliation is of the same political party named in the petition, I am at least 18 years of age, a citizen of the United States and not otherwise disqualified from voting; that the petition is signed by each of the signers thereof in his/her proper handwriting; that the signers are to the best knowledge and belief of the affiant legal voters of the State or political subdivision thereof, as the case may be, as stated in the petition, belong to the political party named in the petition.

Sworn and subscribed to before me in

Salem County N.J., on
(List County where Affidavit was signed and notarized)

this 26th day of
(Day)

March, 2023
(Month) (Year)

Heather Bosco
(Notary Signature)

09/28/2025
(My Commission Expires)

Beth Sawyer
(Signature of Circulator/Witness)

1901 Lovington Mews
(Residence Address of Circulator/Witness)

Pilesgrove Twp 08085
(City or Town of Circulator/Witness) (Zip Code)

HEATHER BOSCO
NOTARY PUBLIC OF NEW JERSEY
Commission # 50138638
My Commission Expires 09/28/2025

(Place Notary Stamp in the area above)

ALL INFORMATION IS REQUIRED TO BE COMPLETED

CANDIDATE'S REQUEST FOR SLOGAN ON THE OFFICIAL PRIMARY ELECTION BALLOT

The candidate named in this petition requests that there be printed on the primary election ballot the following slogan: (Slogan must not exceed six words and must be in accord with N.J.S.A. 19:23-17. If slogan includes the name of any person other than the candidate or any incorporated association of this State, written consent of such person or incorporated association of this State must be attached.)

	County	**Slogan** (Please Print or Type)
1.	Gloucester	Gloucester County Regular Republican Party
2.	Salem	Salem County Republican Party
3.	Cumberland	Cumberland County Republican Party
4.		

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

NOTICE

All candidates are required by law to comply with the provisions of the "New Jersey Campaign Contributions and Expenditures Reporting Act." For further information, please contact the Election Law Enforcement Commission at (609) 292-8700.

COMMITTEE ON VACANCIES

(The Committee on Vacancies may only fill a vacancy up to 55 days before the Primary Election) (N.J.S.A.19:23-12)

This committee shall have power in case of resignation or otherwise of the person endorsed as a candidate in said petition to fill such a vacancy by filing with the Secretary of State, a certificate of nomination to fill the vacancy.

Note: It is not mandatory to have a "Committee on Vacancies".

The names and residential addresses of the three members named as a committee on vacancies are as follows:

Name(s)	Residence Address	City	Zip Code
MARIA DeMARCANTUNIO	216 LAFAYETTE DR	LOGAN TWP	08085
Bob Tice	18 MARINO DR.	Clarksboro	08020
Scott MUSCARELLA	208 HICKORY Lane	Mullica Hill	08062

OATH OF ALLEGIANCE

Candidate Need Only Sign This Page Once for All Petitions

QUALIFICATIONS FOR CANDIDATE FOR THE OFFICE OF MEMBER OF THE GENERAL ASSEMBLY:

Shall have attained the age of 21 years by the day of the swearing into office
United States Citizen
Resident of New Jersey for two years as of the day of the General Election
Resident of the legislative district for one year as of the day of the General Election
Legal voter by the day the petition is filed

State of New Jersey :

: ss.

County of Salem :

I, Joseph Collins Jr. , do solemnly swear (or affirm) that I will support the Constitution of the United States and the Constitution of the
(Print Name of General Assembly Candidate)
State of New Jersey; that I will bear true faith and allegiance to the same and to the Governments established in the United States and in this State, under the authority of the people.

So help me God.

Sworn and subscribed to before me in

Salem County N.J., on
(List County where Oath was signed and notarized)

this 26th day of March, 2023
(Day) (Month) (Year)

Heather Bosco
(Notary Signature)

09/28/2025
(My Commission Expires)

X
(Signature of General Assembly Candidate)

HEATHER BOSCO
NOTARY PUBLIC OF NEW JERSEY
Commission # 50138638
My Commission Expires 09/28/2025

(Place Notary Stamp in the area above)

OATH OF ALLEGIANCE

Candidate Need Only Sign This Page Once for All Petitions

QUALIFICATIONS FOR CANDIDATE FOR THE OFFICE OF MEMBER OF THE GENERAL ASSEMBLY:

Shall have attained the age of 21 years by the day of the swearing into office
United States Citizen
Resident of New Jersey for two years as of the day of the General Election
Resident of the legislative district for one year as of the day of the General Election
Legal voter by the day the petition is filed

State of New Jersey :

: ss.

County of :

I, _____, do solemnly swear (or affirm) that I will support the Constitution of the United States and the Constitution of the
(Print Name of General Assembly Candidate)
State of New Jersey; that I will bear true faith and allegiance to the same and to the Governments established in the United States and in this State, under the authority of the people.

So help me God.

Sworn and subscribed to before me in

_____N.J., on _____
(List County where Oath was signed and notarized) (Signature of General Assembly Candidate)

this _____ day of_____, 20____
(Day) (Month) (Year)

_____
(Notary Signature)

_____
(My Commission Expires) (Place Notary Stamp in the area above)

ALL INFORMATION IS REQUIRED TO BE COMPLETED

CERTIFICATE OF ACCEPTANCE TO BE SIGNED BY CANDIDATE

(N.J.S.A. 19:23-15)

I, the undersigned, hereby certify that I am a member of the REPUBLICAN Party and qualified for the office.

X _____
(Signature of General Assembly Candidate)

Joseph B. Collins, Jr.
(Printed or Typewritten Name of General Assembly Candidate)

5 Campbell Court
(Residence Address of General Assembly Candidate)

Mickleton 08056
(City or Town & Zip Code of General Assembly Candidate)

Candidate Must Sign an Oath of Allegiance and Certificate of Acceptance

Pursuant to N.J.S.A. 19:23-15, however, no candidate who has accepted the nomination by a direct petition of nomination for the general election shall sign an acceptance to a petition of nomination for such office for the primary election. In addition, no candidate named in a petition for the office of Member of the New Jersey General Assembly shall sign an acceptance if the candidate has signed an acceptance for the primary nomination or any other petition of nomination for the office of member of the New Jersey General Assembly in another legislative district in the same calendar year.

CERTIFICATE OF ACCEPTANCE TO BE SIGNED BY CANDIDATE

(N.J.S.A. 19:23-15)

I, the undersigned, hereby certify that I am a member of the _____Party and qualified for the office.

_____
(Signature of General Assembly Candidate)

_____
(Printed or Typewritten Name of General Assembly Candidate)

_____
(Residence Address of General Assembly Candidate)

_____
(City or Town & Zip Code of General Assembly Candidate)

Candidate Must Sign an Oath of Allegiance and Certificate of Acceptance

Pursuant to N.J.S.A. 19:23-15, however, no candidate who has accepted the nomination by a direct petition of nomination for the general election shall sign an acceptance to a petition of nomination for such office for the primary election. In addition, no candidate named in a petition for the office of Member of the New Jersey General Assembly shall sign an acceptance if the candidate has signed an acceptance for the primary nomination or any other petition of nomination for the office of member of the New Jersey General Assembly in another legislative district in the same calendar year.

DISCLOSURE STATEMENT OF CRIMINAL CONVICTION

Pursuant to P.L. 2004, chapter 26 the following statement **must be completed and filed** with the Nomination Petition

Please Check Applicable Box

I, the undersigned, hereby certify that in accordance with N.J.S.A. 19:23-15:

☑ I have not been convicted of any offense graded by Title 2C of the New Jersey Statutes as a crime of the first, second, third or fourth degree, or an offense in any jurisdiction which, if committed in this State, would constitute such a crime.

☐ I have been convicted of an offense graded by Title 2C of the New Jersey Statutes as a crime of the first, second, third or fourth degree, or any offense in any jurisdiction which, if committed in this State, would constitute such a crime as follows:

1. Crime of conviction: _____
2. Date of conviction: _____
3. Place of conviction: _____
4. Penalties imposed for the conviction: _____

**As an alternative, you may submit with the statement a copy of an official document that provides the above information. If you have been convicted of more than one criminal offense, such information about each conviction shall be provided. Records of expunged conviction(s) pursuant to chapter 52 of Title 2C of the New Jersey Statutes shall not be subject to disclosure.*

I certify the foregoing is a true and accurate statement.

X _____
(Signature of General Assembly Candidate)

Joseph Collins Jr.
(Printed or Typewritten Name of General Assembly Candidate)

5 Campbell Court
(Residential Address of General Assembly Candidate)

Mickleton 08056
(City or Town of General Assembly Candidate) (Zip Code)

DISCLOSURE STATEMENT OF CRIMINAL CONVICTION

Pursuant to P.L. 2004, chapter 26 the following statement **must be completed and filed** with the Nomination Petition

Please Check Applicable Box

I, the undersigned, hereby certify that in accordance with N.J.S.A. 19:23-15:

☐ I have not been convicted of any offense graded by Title 2C of the New Jersey Statutes as a crime of the first, second, third or fourth degree, or an offense in any jurisdiction which, if committed in this State, would constitute such a crime.

☐ I have been convicted of an offense graded by Title 2C of the New Jersey Statutes as a crime of the first, second, third or fourth degree, or any offense in any jurisdiction which, if committed in this State, would constitute such a crime as follows:

1. Crime of conviction: _____
2. Date of conviction: _____
3. Place of conviction: _____
4. Penalties imposed for the conviction: _____

**As an alternative, you may submit with the statement a copy of an official document that provides the above information. If you have been convicted of more than one criminal offense, such information about each conviction shall be provided. Records of expunged conviction(s) pursuant to chapter 52 of Title 2C of the New Jersey Statutes shall not be subject to disclosure.*

I certify the foregoing is a true and accurate statement.

_____
(Signature of General Assembly Candidate)

_____
(Printed or Typewritten Name of General Assembly Candidate)

_____
(Residential Address of General Assembly Candidate)

_____
(City or Town of General Assembly Candidate) (Zip Code)

4

2023 PRIMARY ELECTION – N.J. GENERAL ASSEMBLY

TION FOR MEMBER OF THE NEW JERSEY GENERAL ASSEMBLY

...gnatures Required (N.J.S.A. 19:23-8)

PETITION OF NOMINATION FOR THE PRIMARY ELECTION REPUBLICAN **PARTY**
(PRINT NAME OF PARTY)

3rd **LEGISLATIVE DISTRICT**

For Division of Elections Use:

Total Number of Signatures on this Petition 10

Total Number of Signatures on all Petitions 148

To the Honorable Secretary of State: (N.J.S.A. 19:23-6)

Each signer of this petition certifies that the following statements are true:

1) I reside in the State of New Jersey in the 3rd Legislative District;
2) I am a qualified voter therein;
3) I am a member of the REPUBLICAN party;
4) I intend to affiliate with the said party at the ensuing election;
5) I indorse the person named as candidate for the nomination to the office of Member of the New Jersey General Assembly; and
6) I request that you cause to be printed upon the official primary election ballot of the said party, the name of the candidate listed below; (N.J.S.A. 19:23-7).

☑ **By checking this box, I acknowledge that I have confirmed my legislative district at the following link: https://www.apportionmentcommission.org/adoption2022map.asp. I further acknowledge the legislative district listed above is the district I intend on being a candidate in as a result of re-districting.**

Name of Candidate: JOSEPH COLLINS, JR.
(Name must appear the same on all petition booklets to be filed.) (Please print or type name)

5 CAMPBELL COURT — Residential Address
MICKLETON — City
08056 — Zip Code

5 CAMPBELL COURT — Post Office Address
MICKLETON — City
08056 — Zip Code

jbcollinsjr@collins-home.net — Candidate Email Address

State of New Jersey, Division of Elections
MAR 27 2023
Received

Name of Candidate:
(Name must appear the same on all petition booklets to be filed.) (Please print or type name)

Residential Address — City — Zip Code

Post Office Address — City — Zip Code

Candidate Email Address

☑ **Check box if candidates listed above are to be bracketed on ballot and their names shall appear on the ballot as indicated.** (N.J.S.A. 19:14-10, N.J.S.A. 19:14-12)

ALL INFORMATION ABOVE MUST BE COMPLETED PRIOR TO CIRCULATION

Petition Filing Deadline: Before 4 p.m. on March 27, 2023. (N.J.S.A.19:23-14)

SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street, City, Zip Code*)
1.	DAVID W. GLANFIELD	132 SARATOGA LN WOOLWICH NJ 08085
2.	Danielle M. Glanfield	132 Saratoga Ln. Woolwich Twp., N.J. 08085
3.	SUSAN JERRETT	1903 Lexington Mews Woolwich Twp 08085
4.	CRAIG FREDERICK	3 BLUE SPRUCE LN WOOLWICH, NJ 08085
5.	JESSICA FREDERICK	3 BLUE SPRUCE LN WOOLWICH, NJ 08085
6.	THOMAS NAROLEWSKI	74 Licciardello Dr. Woolwich Twp NJ 08085
7.	Julia Narolewski	74 Licciardello Dr. Woolwich TWP, NJ 08085
8.	Leanne McCarthy	250 Daniel's Way Woolwich Twp. NJ 08085
9.	Virginia Narolewski	74 Licciardello Drive Woolwich Twp NJ 08085
10.	Tracy L. McCullogh-Wills	87 Licciardello Drive Swedesboro NJ 08085

ALL INFORMATION IS REQUIRED TO BE COMPLETED

SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street*, City, Zip Code)
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ALL INFORMATION IS REQUIRED TO BE COMPLETED

SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street*, City, Zip Code)
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SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street*, City, Zip Code)
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SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street*, City, Zip Code)
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SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street*, City, Zip Code)
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SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street, City, Zip Code*)
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SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street,* City, Zip Code)
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SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street*, City, Zip Code)
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SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street*, City, Zip Code)
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AFFIDAVIT OF PERSON WHO CIRCULATES THIS PETITION AND WITNESSES SIGNATURES

(N.J.S.A. 19:23-11)

The person making the affidavit below must be the person who witnessed the signatures appearing on this petition or any other petition for the same candidate and office. The person must make an affidavit for each petition and set of signatures he/she solicits and sign the affidavit in the presence of a person authorized to administer oaths (e.g., notary public).

State of New Jersey :

: ss.

County of Salem :

I, BETH SAWYER (Print Name of Circulator/Witness), being duly sworn, upon my oath say that my party affiliation is of the same political party named in the petition, I am at least 18 years of age, a citizen of the United States and not otherwise disqualified from voting; that the petition is signed by each of the signers thereof in his/her proper handwriting; that the signers are to the best knowledge and belief of the affiant legal voters of the State or political subdivision thereof, as the case may be, as stated in the petition, belong to the political party named in the petition.

Sworn and subscribed to before me in

Salem County N.J., on
(List County where Affidavit was signed and notarized)

this 26th day of
(Day)

March, 2023
(Month) (Year)

(Notary Signature)

09/28/2025
(My Commission Expires)

Beth Sawyer
(Signature of Circulator/Witness)

1901 LEXINGTON MEWS
(Residence Address of Circulator/Witness)

WOOLWICH TWP 08085
(City or Town of Circulator/Witness) (Zip Code)

HEATHER BOSCO
NOTARY PUBLIC OF NEW JERSEY
Commission # 50138638
My Commission Expires 09/28/2025

(Place Notary Stamp in the area above)

ALL INFORMATION IS REQUIRED TO BE COMPLETED

CANDIDATE'S REQUEST FOR SLOGAN ON THE OFFICIAL PRIMARY ELECTION BALLOT

The candidate named in this petition requests that there be printed on the primary election ballot the following slogan: (Slogan must not exceed six words and must be in accord with N.J.S.A. 19:23-17. If slogan includes the name of any person other than the candidate or any incorporated association of this State, written consent of such person or incorporated association of this State must be attached.)

	County	**Slogan** (Please Print or Type)
1.	Gloucester	Gloucester County Regular Republican Party
2.	Salem	Salem County Republican Party
3.	Cumberland	Cumberland County Republican Party
4.		

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

NOTICE

All candidates are required by law to comply with the provisions of the "New Jersey Campaign Contributions and Expenditures Reporting Act." For further information, please contact the Election Law Enforcement Commission at (609) 292-8700.

COMMITTEE ON VACANCIES

(The Committee on Vacancies may only fill a vacancy up to 55 days before the Primary Election) (N.J.S.A.19:23-12)

This committee shall have power in case of resignation or otherwise of the person endorsed as a candidate in said petition to fill such a vacancy by filing with the Secretary of State, a certificate of nomination to fill the vacancy.

Note: It is not mandatory to have a "Committee on Vacancies".

The names and residential addresses of the three members named as a committee on vacancies are as follows:

Name(s)	Residence Address	City	Zip Code
MARIA DeMARCANTONIO	216 LAFAYETTE DR	Logan Twp	08085
BOB TICE	18 MORINO DR	CLARKSBORO	08020
SCOTT MASCARELLA	208 Hickory Lane	Mullica Hill	08062

OATH OF ALLEGIANCE

Candidate Need Only Sign This Page Once for All Petitions

QUALIFICATIONS FOR CANDIDATE FOR THE OFFICE OF MEMBER OF THE GENERAL ASSEMBLY:

Shall have attained the age of 21 years by the day of the swearing into office
United States Citizen
Resident of New Jersey for two years as of the day of the General Election
Resident of the legislative district for one year as of the day of the General Election
Legal voter by the day the petition is filed

State of New Jersey :

: ss.

County of SALEM :

I, Joseph Collins Jr, do solemnly swear (or affirm) that I will support the Constitution of the United States and the Constitution of the
(Print Name of General Assembly Candidate)
State of New Jersey; that I will bear true faith and allegiance to the same and to the Governments established in the United States and in this State, under the authority of the people.

So help me God.

Sworn and subscribed to before me in

Salem County N.J., on
(List County where Oath was signed and notarized)

this 26th day of March, 2023
(Day) (Month) (Year)

Heather Bosco
(Notary Signature)

09/28/2025
(My Commission Expires)

(Signature of General Assembly Candidate)

HEATHER BOSCO
NOTARY PUBLIC OF NEW JERSEY
Commission # 50138838
My Commission Expires 09/28/2025

50138838

(Place Notary Stamp in the area above)

OATH OF ALLEGIANCE

Candidate Need Only Sign This Page Once for All Petitions

QUALIFICATIONS FOR CANDIDATE FOR THE OFFICE OF MEMBER OF THE GENERAL ASSEMBLY:

Shall have attained the age of 21 years by the day of the swearing into office
United States Citizen
Resident of New Jersey for two years as of the day of the General Election
Resident of the legislative district for one year as of the day of the General Election
Legal voter by the day the petition is filed

State of New Jersey :

: ss.

County of :

I, _____, do solemnly swear (or affirm) that I will support the Constitution of the United States and the Constitution of the
(Print Name of General Assembly Candidate)
State of New Jersey; that I will bear true faith and allegiance to the same and to the Governments established in the United States and in this State, under the authority of the people.

So help me God.

Sworn and subscribed to before me in

_____N.J., on _____
(List County where Oath was signed and notarized) (Signature of General Assembly Candidate)

this _____ day of_____, 20____
(Day) (Month) (Year)

_____
(Notary Signature)

_____
(My Commission Expires)

(Place Notary Stamp in the area above)

ALL INFORMATION IS REQUIRED TO BE COMPLETED

CERTIFICATE OF ACCEPTANCE TO BE SIGNED BY CANDIDATE

(N.J.S.A. 19:23-15)

I, the undersigned, hereby certify that I am a member of the REPUBLICAN Party and qualified for the office.

(Signature of General Assembly Candidate)

JOSEPH COLLINS, JR
(Printed or Typewritten Name of General Assembly Candidate)

5 CAMPBELL COURT
(Residence Address of General Assembly Candidate)

MICKLETON 08056
(City or Town & Zip Code of General Assembly Candidate)

Candidate Must Sign an Oath of Allegiance and Certificate of Acceptance

Pursuant to N.J.S.A. 19:23-15, however, no candidate who has accepted the nomination by a direct petition of nomination for the general election shall sign an acceptance to a petition of nomination for such office for the primary election. In addition, no candidate named in a petition for the office of Member of the New Jersey General Assembly shall sign an acceptance if the candidate has signed an acceptance for the primary nomination or any other petition of nomination for the office of member of the New Jersey General Assembly in another legislative district in the same calendar year.

CERTIFICATE OF ACCEPTANCE TO BE SIGNED BY CANDIDATE

(N.J.S.A. 19:23-15)

I, the undersigned, hereby certify that I am a member of the _____Party and qualified for the office.

_____
(Signature of General Assembly Candidate)

_____
(Printed or Typewritten Name of General Assembly Candidate)

_____
(Residence Address of General Assembly Candidate)

_____
(City or Town & Zip Code of General Assembly Candidate)

Candidate Must Sign an Oath of Allegiance and Certificate of Acceptance

Pursuant to N.J.S.A. 19:23-15, however, no candidate who has accepted the nomination by a direct petition of nomination for the general election shall sign an acceptance to a petition of nomination for such office for the primary election. In addition, no candidate named in a petition for the office of Member of the New Jersey General Assembly shall sign an acceptance if the candidate has signed an acceptance for the primary nomination or any other petition of nomination for the office of member of the New Jersey General Assembly in another legislative district in the same calendar year.

DISCLOSURE STATEMENT OF CRIMINAL CONVICTION

Pursuant to P.L. 2004, chapter 26 the following statement **must be completed and filed** with the Nomination Petition

Please Check Applicable Box

I, the undersigned, hereby certify that in accordance with N.J.S.A. 19:23-15:

☒ I have not been convicted of any offense graded by Title 2C of the New Jersey Statutes as a crime of the first, second, third or fourth degree, or an offense in any jurisdiction which, if committed in this State, would constitute such a crime.

☐ I have been convicted of an offense graded by Title 2C of the New Jersey Statutes as a crime of the first, second, third or fourth degree, or any offense in any jurisdiction which, if committed in this State, would constitute such a crime as follows:

1. Crime of conviction: _____
2. Date of conviction: _____
3. Place of conviction: _____
4. Penalties imposed for the conviction: _____

**As an alternative, you may submit with the statement a copy of an official document that provides the above information. If you have been convicted of more than one criminal offense, such information about each conviction shall be provided. Records of expunged conviction(s) pursuant to chapter 52 of Title 2C of the New Jersey Statutes shall not be subject to disclosure.*

I certify the foregoing is a true and accurate statement.

(Signature of General Assembly Candidate)

Joseph Collins Jr.
(Printed or Typewritten Name of General Assembly Candidate)

5 Campbell Court
(Residential Address of General Assembly Candidate)

Mickleton 08056
(City or Town of General Assembly Candidate) (Zip Code)

DISCLOSURE STATEMENT OF CRIMINAL CONVICTION

Pursuant to P.L. 2004, chapter 26 the following statement **must be completed and filed** with the Nomination Petition

Please Check Applicable Box

I, the undersigned, hereby certify that in accordance with N.J.S.A. 19:23-15:

☐ I have not been convicted of any offense graded by Title 2C of the New Jersey Statutes as a crime of the first, second, third or fourth degree, or an offense in any jurisdiction which, if committed in this State, would constitute such a crime.

☐ I have been convicted of an offense graded by Title 2C of the New Jersey Statutes as a crime of the first, second, third or fourth degree, or any offense in any jurisdiction which, if committed in this State, would constitute such a crime as follows:

1. Crime of conviction: _____
2. Date of conviction: _____
3. Place of conviction: _____
4. Penalties imposed for the conviction: _____

**As an alternative, you may submit with the statement a copy of an official document that provides the above information. If you have been convicted of more than one criminal offense, such information about each conviction shall be provided. Records of expunged conviction(s) pursuant to chapter 52 of Title 2C of the New Jersey Statutes shall not be subject to disclosure.*

I certify the foregoing is a true and accurate statement.

_____
(Signature of General Assembly Candidate)

_____
(Printed or Typewritten Name of General Assembly Candidate)

_____
(Residential Address of General Assembly Candidate)

_____
(City or Town of General Assembly Candidate) (Zip Code)

5

PETITION FOR MEMBER OF THE NEW JERSEY GENERAL ASSEMBLY

100 Signatures Required (N.J.S.A. 19:23-8)

PETITION OF NOMINATION FOR THE PRIMARY ELECTION Republican **PARTY**
(PRINT NAME OF PARTY)

3rd **LEGISLATIVE DISTRICT**

For Division of Elections Use:
Total Number of Signatures on this Petition 22
Total Number of Signatures on all Petitions 148

To the Honorable Secretary of State: (N.J.S.A. 19:23-6)

Each signer of this petition certifies that the following statements are true:

1) I reside in the State of New Jersey in the 3rd Legislative District;
2) I am a qualified voter therein;
3) I am a member of the Republican party;
4) I intend to affiliate with the said party at the ensuing election;
5) I indorse the person named as candidate for the nomination to the office of Member of the New Jersey General Assembly; and
6) I request that you cause to be printed upon the official primary election ballot of the said party, the name of the candidate listed below; (N.J.S.A. 19:23-7).

☑ **By checking this box, I acknowledge that I have confirmed my legislative district at the following link: https://www.apportionmentcommission.org/adoption2022map.asp. I further acknowledge the legislative district listed above is the district I intend on being a candidate in as a result of re-districting.**

Name of Candidate: Joseph Collins Jr.
(Name must appear the same on all petition booklets to be filed.) (Please print or type name)

Residential Address	City	Zip Code
5 Campbell Court	Mickleton	08056
Post Office Address	**City**	**Zip Code**
5 Campbell Court	Mickleton	08056

jbcollingjr@collins-home.net
Candidate Email Address

State of New Jersey, Division of Elections
MAR 27 2023
Received

Name of Candidate: _____
(Name must appear the same on all petition booklets to be filed.) (Please print or type name)

Residential Address	City	Zip Code
Post Office Address	**City**	**Zip Code**

Candidate Email Address

☑ **Check box if candidates listed above are to be bracketed on ballot and their names shall appear on the ballot as indicated.** (N.J.S.A. 19:14-10, N.J.S.A. 19:14-12)

ALL INFORMATION ABOVE MUST BE COMPLETED PRIOR TO CIRCULATION
Petition Filing Deadline: Before 4 p.m. on March 27, 2023. (N.J.S.A.19:23-14)

SIGNATURE SHEET

	Signature	Print Name	Residence Address (*Number, Street, City, Zip Code*)
1.	Beth Sawyer	BETH SAWYER	1901 Lexington Mews Woolwich Twp 08085
2.		Adam Wingate	7 Morning Glory Circle Mullica Hill, NJ 08062
3.		JAMES A. PHZUBZN JR.	210 HOPKINS RD, MICKLETON, NJ. 08056.
4.	Jeffrey D. Jacques	Jeffrey D. Jacques	171 High Street Mullica Hill, NJ 08062
5.		John Cavanagh	25 Katie Ct Mullica Hill NJ 08062
6.	Kristen Cavanaugh	Kristen Cavanaugh	25 Katie Court Mullica Hill, NJ 08062
7.		Thomas J Coakley	35 S. MAIN ST Mullica Hill, NJ 08062
8.	Frances Coakley	Frances Coakley	35 S. Main St, Apt. 3-5 Mullica Hill, NJ 08062
9.		SCOTT MUSCARELLA	208 HICKORY LN MULLICA HILL, NJ 08062
10.		Daniel Marcella	102 Tuscan LN Mullica Hill, NJ 08062

ALL INFORMATION IS REQUIRED TO BE COMPLETED

SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street, City, Zip Code*)
11.	SHARON WEISS	104 TUSCAN LN, MULLICA HILL, NJ 08062
12.	MARK WEISS	104 TUSCAN LN, MULLICA HILL, NJ 08062
13.	David Engelhard	108 Tuscan Lane Mullica Hill, NJ 08062
14.	Toni Engelhard	108 Tuscan Lane Mullica Hill NJ 08062
15.	DAVID CONNER	506 Morgan Court Mullica Hill, NJ 08062
16.	Michelle Conner	506 Morgan Court Mullica Hill, NJ 08062
17.	HEATHER ZUPSIC	211 CATTAIL LANE MULLICA HILL NJ 08062
18.	CHRIS ZUPSIC	211 CATTAIL LANE MULLICA HILL NJ 08062
19.	Adam Pennypacker	318 Salano Dr Mullica Hill, NJ 08062
20.		307 Salano Dr Mullica Hill NJ 08062

SIGNATURE SHEET

	Signature	Print Name	Residence Address (*Number, Street, City, Zip Code*)
21.		Joseph Dimard	307 Salerno St Mullica Hill NJ 08062
22.		Lawrence Moore	304 Walnut Lane, Mullica Hill, NJ 08062
23.			
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ALL INFORMATION IS REQUIRED TO BE COMPLETED

SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street,* City, Zip Code)
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SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street*, City, Zip Code)
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SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street*, City, Zip Code)
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SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street,* City, Zip Code)
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SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street*, City, Zip Code)
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SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street*, City, Zip Code)
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SIGNATURE SHEET

Signature	Print Name	Residence Address (*Number, Street*, City, Zip Code)
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100.		

AFFIDAVIT OF PERSON WHO CIRCULATES THIS PETITION AND WITNESSES SIGNATURES

(N.J.S.A. 19:23-11)

The person making the affidavit below must be the person who witnessed the signatures appearing on this petition or any other petition for the same candidate and office. The person must make an affidavit for each petition and set of signatures he/she solicits and sign the affidavit in the presence of a person authorized to administer oaths (e.g., notary public).

State of New Jersey :

: ss.

County of Gloucester :

I, Adam Wingate (Print Name of Circulator/Witness), being duly sworn, upon my oath say that my party affiliation is of the same political party named in the petition, I am at least 18 years of age, a citizen of the United States and not otherwise disqualified from voting; that the petition is signed by each of the signers thereof in his/her proper handwriting; that the signers are to the best knowledge and belief of the affiant legal voters of the State or political subdivision thereof, as the case may be, as stated in the petition, belong to the political party named in the petition.

Sworn and subscribed to before me in

Gloucester N.J., on
(List County where Affidavit was signed and notarized)

this 26th day of
(Day)

March, 2023
(Month) (Year)

Donald C. Brown Jr.
(Notary Signature)

5/19/27
(My Commission Expires)

(Signature of Circulator/Witness)

19 Morning Glory Circle Mullica Hill
(Residence Address of Circulator/Witness)

Mullica Hill, NJ 08062
(City or Town of Circulator/Witness) (Zip Code)

DONALD C BROWN JR.
NOTARY PUBLIC
STATE OF NEW JERSEY
ID # 2201612
MY COMMISSION EXPIRES MAY 19, 2027

(Place Notary Stamp in the area above)

ALL INFORMATION IS REQUIRED TO BE COMPLETED

CANDIDATE'S REQUEST FOR SLOGAN ON THE OFFICIAL PRIMARY ELECTION BALLOT

The candidate named in this petition requests that there be printed on the primary election ballot the following slogan: (Slogan must not exceed six words and must be in accord with N.J.S.A. 19:23-17. If slogan includes the name of any person other than the candidate or any incorporated association of this State, written consent of such person or incorporated association of this State must be attached.)

	County	**Slogan** (Please Print or Type)
1.	Gloucester	Gloucester County Regular Republican Party
2.	Salem	Salem County Republican Party
3.	Cumberland	Cumberland County Republican Party
4.		

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

NOTICE

All candidates are required by law to comply with the provisions of the "New Jersey Campaign Contributions and Expenditures Reporting Act." For further information, please contact the Election Law Enforcement Commission at (609) 292-8700.

COMMITTEE ON VACANCIES

(The Committee on Vacancies may only fill a vacancy up to 55 days before the Primary Election) (N.J.S.A.19:23-12)

This committee shall have power in case of resignation or otherwise of the person endorsed as a candidate in said petition to fill such a vacancy by filing with the Secretary of State, a certificate of nomination to fill the vacancy.

Note: It is not mandatory to have a "Committee on Vacancies".

The names and residential addresses of the three members named as a committee on vacancies are as follows:

Name(s)	Residence Address	City	Zip Code
Maria DeMarcatonio	216 Lafayette Dr.	Logan Twp.	08085
Bob Tice	18 Marino Dr	Clarksboro	08020
Scott Musarella	208 Hickory Lane	Mullica Hill	08062

OATH OF ALLEGIANCE

Candidate Need Only Sign This Page Once for All Petitions

QUALIFICATIONS FOR CANDIDATE FOR THE OFFICE OF MEMBER OF THE GENERAL ASSEMBLY:

Shall have attained the age of 21 years by the day of the swearing into office
United States Citizen
Resident of New Jersey for two years as of the day of the General Election
Resident of the legislative district for one year as of the day of the General Election
Legal voter by the day the petition is filed

State of New Jersey :

: ss.

County of Gloucester :

I, Joseph Collins Jr. , do solemnly swear (or affirm) that I will support the Constitution of the United States and the Constitution of the
(Print Name of General Assembly Candidate)
State of New Jersey; that I will bear true faith and allegiance to the same and to the Governments established in the United States and in this State, under the authority of the people.

So help me God.

Sworn and subscribed to before me in

Gloucester N.J., on
(List County where Oath was signed and notarized)

this 26th day of March, 2023
(Day) (Month) (Year)

Donald C. Brown Jr.
(Notary Signature)

5/19/27
(My Commission Expires)

(Signature of General Assembly Candidate)

DONALD C BROWN JR.
NOTARY PUBLIC
STATE OF NEW JERSEY
ID # 2201612
MY COMMISSION EXPIRES MAY 19, 2027

(Place Notary Stamp in the area above)

ALL INFORMATION IS REQUIRED TO BE COMPLETED

OATH OF ALLEGIANCE

Candidate Need Only Sign This Page Once for All Petitions

QUALIFICATIONS FOR CANDIDATE FOR THE OFFICE OF MEMBER OF THE GENERAL ASSEMBLY:

Shall have attained the age of 21 years by the day of the swearing into office
United States Citizen
Resident of New Jersey for two years as of the day of the General Election
Resident of the legislative district for one year as of the day of the General Election
Legal voter by the day the petition is filed

State of New Jersey :

: ss.

County of :

I, _____, do solemnly swear (or affirm) that I will support the Constitution of the United States and the Constitution of the
(Print Name of General Assembly Candidate)
State of New Jersey; that I will bear true faith and allegiance to the same and to the Governments established in the United States and in this State, under the authority of the people.

So help me God.

Sworn and subscribed to before me in

_____N.J., on _____
(List County where Oath was signed and notarized) (Signature of General Assembly Candidate)

this _____ day of_____, 20____.
(Day) (Month) (Year)

_____
(Notary Signature)

_____
(My Commission Expires)

(Place Notary Stamp in the area above)

ALL INFORMATION IS REQUIRED TO BE COMPLETED

CERTIFICATE OF ACCEPTANCE TO BE SIGNED BY CANDIDATE

(N.J.S.A. 19:23-15)

I, the undersigned, hereby certify that I am a member of the Republican Party and qualified for the office.

(Signature of General Assembly Candidate)

Joseph Collins Jr.
(Printed or Typewritten Name of General Assembly Candidate)

5 Campbell Court
(Residence Address of General Assembly Candidate)

Mickleton 08056
(City or Town & Zip Code of General Assembly Candidate)

Candidate Must Sign an Oath of Allegiance and Certificate of Acceptance

Pursuant to N.J.S.A. 19:23-15, however, no candidate who has accepted the nomination by a direct petition of nomination for the general election shall sign an acceptance to a petition of nomination for such office for the primary election. In addition, no candidate named in a petition for the office of Member of the New Jersey General Assembly shall sign an acceptance if the candidate has signed an acceptance for the primary nomination or any other petition of nomination for the office of member of the New Jersey General Assembly in another legislative district in the same calendar year.

CERTIFICATE OF ACCEPTANCE TO BE SIGNED BY CANDIDATE

(N.J.S.A. 19:23-15)

I, the undersigned, hereby certify that I am a member of the _____Party and qualified for the office.

_____
(Signature of General Assembly Candidate)

_____
(Printed or Typewritten Name of General Assembly Candidate)

_____
(Residence Address of General Assembly Candidate)

_____
(City or Town & Zip Code of General Assembly Candidate)

Candidate Must Sign an Oath of Allegiance and Certificate of Acceptance

Pursuant to N.J.S.A. 19:23-15, however, no candidate who has accepted the nomination by a direct petition of nomination for the general election shall sign an acceptance to a petition of nomination for such office for the primary election. In addition, no candidate named in a petition for the office of Member of the New Jersey General Assembly shall sign an acceptance if the candidate has signed an acceptance for the primary nomination or any other petition of nomination for the office of member of the New Jersey General Assembly in another legislative district in the same calendar year.

DISCLOSURE STATEMENT OF CRIMINAL CONVICTION

Pursuant to P.L. 2004, chapter 26 the following statement **must be completed and filed** with the Nomination Petition

Please Check Applicable Box

I, the undersigned, hereby certify that in accordance with N.J.S.A. 19:23-15:

☑ I have not been convicted of any offense graded by Title 2C of the New Jersey Statutes as a crime of the first, second, third or fourth degree, or an offense in any jurisdiction which, if committed in this State, would constitute such a crime.

☐ I have been convicted of an offense graded by Title 2C of the New Jersey Statutes as a crime of the first, second, third or fourth degree, or any offense in any jurisdiction which, if committed in this State, would constitute such a crime as follows:

1. Crime of conviction: _____
2. Date of conviction: _____
3. Place of conviction: _____
4. Penalties imposed for the conviction: _____

**As an alternative, you may submit with the statement a copy of an official document that provides the above information. If you have been convicted of more than one criminal offense, such information about each conviction shall be provided. Records of expunged conviction(s) pursuant to chapter 52 of Title 2C of the New Jersey Statutes shall not be subject to disclosure.*

I certify the foregoing is a true and accurate statement.

(Signature of General Assembly Candidate)

Joseph Collins Jr
(Printed or Typewritten Name of General Assembly Candidate)

5 Campbell Court
(Residential Address of General Assembly Candidate)

Mickleton 08056
(City or Town of General Assembly Candidate) (Zip Code)

ALL INFORMATION IS REQUIRED TO BE COMPLETED

DISCLOSURE STATEMENT OF CRIMINAL CONVICTION

Pursuant to P.L. 2004, chapter 26 the following statement **must be completed and filed** with the Nomination Petition

Please Check Applicable Box

I, the undersigned, hereby certify that in accordance with N.J.S.A. 19:23-15:

☐ I have not been convicted of any offense graded by Title 2C of the New Jersey Statutes as a crime of the first, second, third or fourth degree, or an offense in any jurisdiction which, if committed in this State, would constitute such a crime.

☐ I have been convicted of an offense graded by Title 2C of the New Jersey Statutes as a crime of the first, second, third or fourth degree, or any offense in any jurisdiction which, if committed in this State, would constitute such a crime as follows:

1. Crime of conviction: _____
2. Date of conviction: _____
3. Place of conviction: _____
4. Penalties imposed for the conviction: _____

**As an alternative, you may submit with the statement a copy of an official document that provides the above information. If you have been convicted of more than one criminal offense, such information about each conviction shall be provided. Records of expunged conviction(s) pursuant to chapter 52 of Title 2C of the New Jersey Statutes shall not be subject to disclosure.*

I certify the foregoing is a true and accurate statement.

_____
(Signature of General Assembly Candidate)

_____
(Printed or Typewritten Name of General Assembly Candidate)

_____
(Residential Address of General Assembly Candidate)

_____
(City or Town of General Assembly Candidate) (Zip Code)