

MAIL COMPLETED FORM TO: SUPERINTENDENT OF ELECTIONS
PO BOX 900
MORRISTOWN, NEW JERSEY 07963-0900

OR FAX TO:
1-973-285-5208



State of New Jersey Political Party Affiliation Declaration Form

I, being a registered voter at the address listed below, do hereby declare that I wish to affiliate with the following political party or political group:

- Democratic Republican Conservative*
 Green* Libertarian* Natural Law Party*
 Reform Party* U.S. Constitution Party*

OR

I, being a registered voter at the address listed below, do hereby declare that I do not want to be affiliated with any political party or group.

Unaffiliated**

Last Name _____

First Name _____ Middle Initial _____

Date of Birth:(month) _____ (day) _____ (year) _____

New Jersey Residence:

Street _____ Apt. No. _____

Municipality _____

County _____ Zip Code _____

Signature or mark of registered voter _____

Date _____

**If you are a registered member of the Green Party, Libertarian Party, Natural Law Party, Reform Party, U.S. Constitution Party or the Conservative Party, you can participate in the convention of that party, according to its bylaws, but you cannot vote in either the Democratic or Republican Primary.*

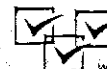
***If you are a previously affiliated voter who becomes unaffiliated, you must file the declaration form no later than 50 days before the primary in order to vote in either primary.*

Declaration must be filed no later than 50 days preceding the primary in which the voter wishes to vote. A newly registered voter, an unaffiliated voter or a voter who has never voted in a primary election, can affiliate with the Democratic or Republican Party on the day of the primary.



Office of the Attorney General
Department of Law & Public Safety

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NJ Division
of Elections
www.NJElections.org