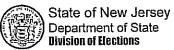
## State of New Jersey Political Party Affiliation Declaration Form

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	Conse	ervative*
☐Green*	□Libertarian*	☐ Natura	al Law Party*
☐Reform Party*	U.S. Constitution	n 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			AND THE RESERVE OF THE PERSON
First Name	, , , , , , , , , , , , , , , , , , ,	Supar.	Middle Initial
Date of Birth (month)	and the second s	(day)	(year)
New Jersey Residence:			
Street	.1		Apt. No
Municipality			en e
County		_ Zip Code	
Signature or mark of	registered voter	D	ate
*If you are a registered mer Reform Party, U.S. Constitution of that party, ac Republican Primary.	ution Party or the Conser	vative Party, you o	an participate in the
**If you are a previously affiliated voter who becomes unaffiliated, you must file the declaration form no later than 55 days before the primary in order to vote in either primary.			
Declaration must be filed no later than 55 days preceding the primary in which the voter wishes to vote. An unaffiliated voter can affiliate with the Democratic or Republican Party on the day of the primary.			



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NJ Division of Elections - 6/17/11