For Division of Elections Use:

Total Number of Signatures on this Petition _____

Total Number of Signatures on all Petitions _____

PETITION FOR MEMBER OF THE UNITED STATES SENATOR

800 Signatures Required (N.J.S.A. 19:13-5)

PETITION OF DIREC	T NOMINATION FO	D THE CENEDAL	EI ECTION
PETITION OF DIREC	JI NUMINATION FU	R INE GENERAL	_ ELECTION

To the Honorable Secretary of State: (N.J.S.A. 19:13-3)

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

- 1) I reside in the State of New Jersey;
- 2) I am a qualified voter therein;
- 3) I have not signed any other petition of nomination for the primary or for the general election for such office; and
- 4) I request that you cause to be printed upon the official general election ballot the name of the candidate listed below; (N.J.S.A. 19:13-4).

Name of Candidate: Kenneth R. Kap (Name must appear the same on all petition booklets to be filed.)	(Please print or type name)		
1480 Route 46, Apt. 231B Residential Address	Parsippany	07054 Zip Code	
Post Office Address	City	Zip Code	
kenkaplan@njlp.org (Candidate Email Address)			

ALL INFORMATION ABOVE MUST BE COMPLETED PRIOR TO CIRCULATION

Petition filing deadline - Before 4 p.m. on June 4, 2024 (N.J.S.A.19:13-9)

Signature	Print Name	Residence Address (Number, Street, City, Zip Code)
1.		
	I	
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Signature	Print Name	Residence Address (Number, Street, City, Zip Code)
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Signature	Print Name	Residence Address (Number, Street, City, Zip Code)
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Signature	Print Name	Residence Address (Number, Street, City, Zip Code)
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32.		
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Signature	Print Name	Residence Address (Number, Street, City, Zip Code)
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42.		
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Signature	Print Name	Residence Address (Number, Street, City, Zip Code)
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Signature	Print Name	Residence Address (Number, Street, City, Zip Code)
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62.		
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Signature	Print Name	Residence Address (Number, Street, City, Zip Code)
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72.		
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Signature	Print Name	Residence Address (Number, Street, City, Zip Code)
81.		
82.		
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Signature	Print Name	Residence Address (Number, Street, City, Zip Code)
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92.		
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AFFIDAVIT OF PERSON WHO CIRCULATES THIS PETITION AND WITNESSES SIGNATURES

(N.J.S.A. 19:13-7)

The circulator/witness taking the affidavit below must be the person who obtained the names on this set of signatures or several sets of signatures. The circular/witness must take the affidavit for each set he/she solicits and sign in the presence of a person authorized to administer affidavits (e.g., notary public).

State of New Jersey	:			
	: ss.			
County of	:			
I,(Print Name of Circul the petition and saw all the s the United States, and not of Sworn and subscribed to before	lator/Witness) signatures made thereto and v therwise disqualified from voti	luly sworn, upon my oath say that the verily believe that the signers are duly ing under the State Constitution or ele	qualified voters. I am	n at least 18 years of age, a citizen of
(List County where Affidavit was	N.J., on	(Signature of Circulator/Witness)		
this(Day)	day of	(Residence Address of Circulator/Witness)		
(Month)	, 20(Year)	(City or Town of Circulator/Witness)	(Zip Code)	
(Notary Sign	nature)			
(My Commissio	n Evnires)			(Place Notary Stamp in the area above)

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

The candidate named in this petition requests that there be printed on the general election ballot the following slogan: (Slogan must not exceed three words and must be in accord with N.J.S.A. 19:13-4. 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.)

<u>County</u>	Slogan (Please Print or Type)	County	Slogan (Please Print or Type)
ATLANTIC	Libertarian Party	<u>MIDD</u> LESEX	Libertarian Party
BERGEN	Libertarian Party	MONMOUTH	Libertarian Party
BURLINGTON	Libertarian Party	MORRIS	Libertarian Party
CAMDEN	Libertarian Party	OCEAN	Libertarian Party
CAPE MAY	Libertarian Party	<u>PASS</u> AIC	Libertarian Party
CUMBERLAN	_D Libertarian Party	SALEM	Libertarian Party
ESSEX	Libertarian Party	SOMERSET	Libertarian Party
GLOUCESTE	_R Libertarian Party	SUSSEX	Libertarian Party
HUDSON	Libertarian Party	<u>UNIO</u> N	Libertarian Party
HUNTERDON	Libertarian Party	WARREN	Libertarian Party
MERCER	Libertarian Party		

OATH OF ALLEGIANCE Candidate Need Only Sign This Page Once for All Petitions

QUALIFICATIONS FOR CANDIDATE FOR THE OFFICE OF MEMBER OF THE UNITED STATES SENATE

Shall have attained the age of 30 years by the day of the swearing into office
United States Citizen for 9 years by the day of the swearing into office
Resident of New Jersey as of the day of the General Election

State of New Jersey :	
County of :	: SS.
Kenneth R. Kaplan	, do solemnly swear (or affirm) that I will support the Constitution of the United States and the Constitution of the
(Print Name of United States Senate Candidate) State of New Jersey; that I will bear tru the authority of the people. So help me	ue faith and allegiance to the same and to the Governments established in the United States and in this State, under e God.
Subscribed and sworn before me at:	
List County where Oath was signed and notariz	N.J., zed) (Signature of United States Senate Candidate)
This day of	, 20
(Day) (Month)	(Year)
(Signature of Notary or Attorney at Law of New Jers	sey)
(Print Name of Notary or Attorney at Law of New Je	ersey)
(Commission Expiration Date of Notary)	(Place Notary Stamp in the area above)

AFFIRMATION OF ALLEGIANCE

Candidate Need Only Sign This Page Once for All Petitions

QUALIFICATIONS FOR CANDIDATE FOR THE OFFICE OF MEMBER OF THE UNITED STATES SENATE

Shall have attained the age of 30 years by the day of the swearing into office
United States Citizen for 9 years by the day of the swearing into office
Resident of New Jersey as of the day of the General Election

State of New Jersey :	
County of :	
(Print Name of United States Senate Candidate)	nnly, sincerely and truly declare and affirm that I will support the Constitution of the United States and the
N.J., (List County where Oath was signed and notarized)	(Signature of United States Senate Candidate)
This day of, 20	
(Signature of Notary or Attorney at Law of New Jersey)	
(Print Name of Notary or Attorney at Law of New Jersey)	
(Commission Expiration Date of Notary)	(Place Notary Stamp in the area above)

DECLARATION OF ALLEGIANCE

Candidate Need Only Sign This Page Once for All Petitions

QUALIFICATIONS FOR CANDIDATE FOR THE OFFICE OF MEMBER OF THE UNITED STATES SENATE

Shall have attained the age of 30 years by the day of the swearing into office
United States Citizen for 9 years by the day of the swearing into office
Resident of New Jersey as of the day of the General Election

State of New Jersey	:		
County of	:	: SS.	
(Print Name of United S Constitution of the Governments est	tates Senate Candidate) e United States and tl	he Constitution of t d States and in this	e presence of Almighty God, the witness of the truth of what I say, that I will support the the State of New Jersey; that I will bear true faith and allegiance to the same and to the State, under the authority of the people.
(List County v	where Oath was signed and notariz	N.J.,	(Signature of United States Senate Candidate)
This	day of	, 20	
(Day)	(Month)	(Year)	
(Signature of No	tary or Attorney at Law of New Jer	sey)	
(Print Name of N	lotary or Attorney at Law of New Je	ersey)	
(Commission Ex	piration Date of Notary)		(Place Notary Stamp in the area above)

CERTIFICATE OF ACCEPTANCE TO BE SIGNED BY CANDIDATE

(N.J.S.A. 19: 13-8)

I, the undersigned, hereby certify that I accept the nomination herein and that I am a resident of and a legal voter in the jurisdiction of the office for which the nomination is being made.

(Signature of United States SenateCandidate)

Kenneth R. Kaplan

(Printed or Typewritten Name of United States Senat€andidate)

1480 Route 46, Apt. 231B

(Residence Address of United States SenateCandidate)

Parsippany 07054

(City or Town & Zip Code of United States Sena@andidate)

Candidate Must Sign an Oath of Allegiance, Affirmation of Allegiance or Declaration of Allegiance and Certificate of Acceptance