



SAMPLE FORMS

for

PETITION RULES

REVISED: January 30, 2018

BOARD OF ELECTIONS IN THE CITY OF NEW YORK

32 Broadway, 7th Floor,
New York, NY 10004

Office of the General Counsel

Sample Cover Sheet

Designating and Independent Petitions Filed In New York City and Counties Which Utilize Petition Identification Numbering Systems

[Place Name of Party or Independent Body Here]

Name of Candidate	Residence Address <i>(Also mailing address if different)</i>	Public Office or Party Position <i>(Include district number where appropriate)</i>

Total Number of Volumes in Petition	
Identification Numbers	

The petition contains the number, or in excess of the number, of valid signatures required by Election Law.

Contact Person to Correct Deficiencies:

Name

(Please print)

**Residence
Address**

(Also mailing address if different)

Phone

Fax

(Include if notice by fax desired)

Email

(Include if notice by email desired)

I hereby authorize that any notice of any determination made by the Board of Elections be transmitted to the person named above.

Optional: For candidates for statewide office, Member of Assembly or State Senator only

The following website address is submitted to be published on the state board of elections website pursuant to Election Law § 4-123 for the candidate listed opposite:

Name of Candidate

Website Address

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Signature of Candidate or Agent

Sample Amended Cover Sheet

Designating and Independent Petitions Filed In New York City and Counties Which Utilize Petition Identification Numbering Systems

[Place Name of Party or Independent Body Here]

Name of Candidate	Residence Address <i>(Also mailing address if different)</i>	Public Office or Party Position <i>(Include district number where appropriate)</i>

Total Number of Volumes in Petition	
Identification Numbers	

The petition contains the number, or in excess of the number, of valid signatures required by Election Law.

Contact Person to Correct Deficiencies:

Name _____
(Please print)

Residence Address _____
(Also mailing address if different)

Phone _____ Fax _____
(Include if notice by fax desired)

Email _____
(Include if notice by email desired)

I hereby authorize that any notice of any determination made by the Board of Elections be transmitted to the person named above.

Optional: For candidates for statewide office, Member of Assembly or State Senator only

The following website address is submitted to be published on the state board of elections website pursuant to Election Law § 4-123 for the candidate listed opposite:

Name of Candidate	Website Address

"This is to certify that I am authorized to file this amended cover sheet."

Signature of Candidate or Agent

INSTRUCTIONS: Clearly identify the original cover sheet being amended or attach a copy of the original cover sheet being amended.

GENERAL OBJECTION FORM

To: The Board of Elections in the City of New York

OBJECTOR: Name: _____
Residence Address: _____

OBJECTOR'S CONTACT PERSON:
(Note: The Objector may name himself or herself as the contact person)

Name: _____
Mailing Address:
(May be a business address) _____

Telephone Numbers: _____

Fax Number: _____

Email Address: _____

The objector hereby objects to the _____ petition which was filed
(Designating/Independent Nominating)
with the Board of Elections which purports to name the following as a candidate in the
_____ Election to be held on _____, 20____
(Primary/General/Special)
for the office indicated:

Name: _____
Residence Address: _____

Public Office or
Party Position: _____

District: _____

Political Party: _____

Objector's Signature

Specifications of Objection Form

TO: The Board of Elections in the City of New York

OBJECTOR: Name: _____
Residence Address: _____

OBJECTOR'S CONTACT PERSON:

Name: _____
Mailing Address: _____
(May be a business address)

Telephone Numbers: _____
Fax Number: _____
(Indicate if there is a different fax number used on Saturday or Sunday)
Email Address: _____

The objector submits the following specifications in support of the General Objection to the designating/nominating petition for:

CANDIDATE: Name: _____
Residence Address: _____

Public Office or Party Position: _____
District: _____

PETITION VOLUME IDENTIFICATION NUMBERS: _____

CANDIDATE'S CONTACT PERSON (from the petition cover sheet):

Name: _____
Mailing Address: _____

Telephone Numbers: _____
Fax Number: _____
Email Address: _____

TOTAL NUMBER OF SIGNATURES ON PETITION: _____
NUMBER OF INVALID SIGNATURES ON PETITION: _____

The line-by-line and any other specific objections are attached.

OBJECTOR'S SIGNATURE

CERTIFICATE OF ACCEPTANCE

(Section 6-146, Election Law)

I, _____, residing at
(Candidate's Name)

(Address)

having been designated/nominated by the _____
(Name of Party)

Party, as a candidate for the office of _____
(Title of Office and Political Subdivision)

_____ district, do hereby ACCEPT such designation/nomination and
(District Number if any)

consent to be such candidate of such party at a _____
(Special/Primary/General)

election to be held on _____, 20__.

(Date)

(Signature of Candidate)

State of New York

County of _____ : ss:

On this _____ day of _____, 20__, before me
personally appeared _____, to me known and known to me to be
the individual described therein, and who executed the foregoing instrument, and
acknowledged to me that he/she executed the same.

Notary Public

CERTIFICATE OF DECLINATION

(Section 6-146, Election Law)

I, _____, residing at
(Candidate's Name)

(Address)

having been designated/nominated by the _____
(Name of Party)

Party, as a candidate for the office of _____
(Title of Office and Political Subdivision)

_____ district, at a _____
(District Number if any) (Special/Primary/General)

election to be held on _____, 20____,

do hereby DECLINE such designation/nomination.

(Date)

(Signature of Candidate)

State of New York

County of _____: ss:

On this _____ day of _____, 20____, before me personally appeared _____, to me known and known to me to be the individual described therein, and who executed the foregoing instrument, and acknowledged to me that he/she executed the same.

Notary Public

CERTIFICATE OF AUTHORIZATION

(Section 6-120, Election Law)

We, _____ and _____
(Presiding Officer) (Secretary)

Presiding Officer and Secretary of the meeting of the _____ Party
of _____, DO HEREBY CERTIFY THAT: at a meeting of the
(Political Subdivision)

_____ Committee of the _____, Party
(Political Subdivision)

held on the ____ day of _____, 20____, a quorum being present, said committee, by
majority vote of the members present, did consent and authorize the nomination/designation of

_____ residing at _____
(Name of Candidate) (Place of Residence)

_____ for the office of _____ as

a candidate of the _____ Party for public office indicated, at the

_____ Election to be held on _____
(Special/Primary/General) (Date of Election)

Said nomination/designation is authorized pursuant to the provisions of Section 6-120 of
the New York State Election Law.

IN WITNESS WHERE OF, we have set our hands this ____ day of _____,
20____.

Presiding Officer

Secretary

On this ____ day of _____, 20____ before me personally came

_____ and _____
to me known and known to me to be the persons described in and who executed the foregoing
instrument and he/she duly acknowledged to me that he/she executed the same.

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Notary Public

(Sample prepared by the State Board of Elections)

CERTIFICATE OF SUBSTITUTION BY COMMITTEE TO FILL VACANCIES AFTER DECLINATION, DEATH OR DISQUALIFICATION

(Section 6-148, Election Law)

WHEREAS, there exists a vacancy in the designation/nomination for the office of _____
(title of office and political subdivision)

in the _____ district by the _____ Party caused by the
(district number if any) (name of party)

declination/death/disqualification of _____
(name of original candidate)

THEREFORE, WE, the undersigned, constituting a majority of the duly authorized Committee to Fill Vacancies, do hereby certify that we have designated/nominated the following person to fill the above mentioned vacancy:

Name of new candidate: _____

Place of residence: _____

DATE: _____

Signature of vacancy committee member

Signature of vacancy committee member

Signature of vacancy committee member

Signature of vacancy committee member

AFFIDAVIT

We, the undersigned, hereby affirm that we constituted a majority of the vacancy committee referred to in the above certificate and that the statements in such certificate are true.

Sworn to before me this
____ day of _____, 20____

Notary Public

CONSENT BY SUBSTITUTED CANDIDATE

I, _____ hereby accept the above designation/nomination of the
(Name of Substituted Candidate)

(Name of Party) Party, for the office of _____ (Title of Office & Political Subdivision), _____ (district # if any)

Signature of Candidate

On this ____ day of _____, 20____, before me personally appeared _____
to me known and known to me to be the individual described in, and who executed the foregoing instrument,
and acknowledge to me that he/she executed the same.

Notary Public

CERTIFICATE OF SUBSTITUTION BY PARTY COMMITTEE AFTER DECLINATION, DEATH OR DISQUALIFICATION

(Section 6-148, Election Law)

WHEREAS, there exists a vacancy in the nomination for the office of _____
(title of office and political subdivision)
in the _____ district by the _____ Party caused by the
(district number if any) (name of party)
declination/death/disqualification of _____
(name of original candidate)

THEREFORE, WE, the undersigned, Presiding Officer and Secretary at a meeting at which there was a quorum of
the _____ Party committee members last elected in the _____ (or members of such other
(name of party) (political subdivision)
committee as the rules of the party may provide), do hereby certify that the following named individual was nominated to fill the above
mentioned vacancy by a majority of the committee members present at said meeting:

Name of new candidate: _____

Place of residence: _____

DATE: _____

Signature of Presiding Officer

Signature of Secretary

AFFIDAVIT

We, the undersigned, hereby affirm that we were the Presiding Officer and Secretary at the committee meeting referred to in the above certificate and that the statements in such certificate are true:

Presiding Officer

Secretary

Sworn to before me this
___ day of _____, 20___

Notary Public

CONSENT BY SUBSTITUTED CANDIDATE

I, _____ hereby accept the above nomination of the
(Name of Substituted Candidate)

(Name of Party) Party, for the office of _____
(Title of Office & Political Subdivision) (district # if any)

Signature of Candidate

On this ___ day of _____, 20___, before me personally appeared _____
to me known and known to me to be the individual described in, and who executed the foregoing instrument,
and acknowledge to me that he/she executed the same.

Notary Public



BOARD OF ELECTIONS

IN
THE CITY OF NEW YORK

PETITION HEARINGS NOTICE OF APPEARANCE

Date: _____

County: _____

Specification No(s): _____

Petition No(s): _____

Objector: _____

Candidate: _____

I hereby appear in the proceedings before the Board of Elections in the City of New York with respect to the specification of objections indicated above.

I appear as the _____ representative of the _____ Objector

(check if applicable)

_____ Candidate

Name: _____

Firm (if any): _____

Address: _____

Tel. No. : _____ Fax No. : _____

If the representative is not an attorney, a notice of authorization signed by the candidate or objector must also be filed with this notice of appearance.

NOTICE OF AUTHORIZATION

I hereby authorize the person listed above to represent me at hearings at the Board of Elections.

Signature of Candidate or Objector

Date

