

PETITION REVIEW WORK SHEET

Reviewed by: MS & DS Date: 3/31/25

<u>3/31/25</u>	<u>Jenni Per Tolson</u>	<u>ND4 - City</u>	<u>D</u>	
Date Petition Received	Candidate/Office/District	Party	Petition ID #	

PRIMA FACIE REVIEW

ITEM	COMPLIES W/STATUTE	DOES NOT COMPLY W/STATUTE (EXPLAIN)	ITEM	COMPLIES W/STATUTE	DOES NOT COMPLY W/STATUTE (EXPLAIN)
Petition is timely filed	✓		Candidate(s)' residence	✓	
Petition is filed at correct BOE	✓		Office with district	✓	
Petition contains proper number of candidates for the number of offices	✓		Committee to receive notices (OTB petition only)	✓	
Candidate(s) name	✓		Other		

RESULT: Prima Facie Review in compliance not in compliance

COVER SHEET AND BINDING REVIEW

ITEM	COMPLIES W/REGS.	DOES NOT COMPLY W/REGS. (EXPLAIN)	ITEM	COMPLIES W/REGS.	DOES NOT COMPLY W/REGS. (EXPLAIN)
Cover sheet(s) filed	✓		Volume number		
Sheets of volume fastened			Total number of volumes		
Name of party or independent body			Sufficient signature statement		
Emblem for independent body			Distribution schedule for statewide petitions		
Candidate(s)' name			Identification numbers		
Candidate(s)' residence			Statement of location \ in petition of multiple candidates		
Office and/or district			Other		

RESULT: Cover Sheet & Binding in compliance not in compliance

COVER SHEET/ BINDING CORRECTIVE ACTION TAKEN

Date Notice Sent:	Date Correction Due:	Date Correction Received:
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Corrected Cover Sheet:	Complies	Does not comply
Reviewed by: <u>MS</u>	<u>DS</u>	Date:

Petition proofed by:	
Petition scanned by:	



WORKING FAMILIES PARTY
Designating Petition Sec. 6-132. ELECTION LAW



I, the undersigned, do hereby state that I am a duly enrolled voter of the Working Families Party and entitled to vote at the next primary election of such party, to be held on June 24, 2025, that my place of residence is truly stated opposite my signature herein, and I do hereby designate the following named person (or persons) as a candidate (or candidates) for the nomination of such party for public office or for election to a party position of such party.

Name(s) of Candidates(s)	Public Office or Party Position	Place of Residence (also Post Office Address, if not identical)
Jennifer S. Tallon	Public Office Councilperson, Ward 4, City of Plattsburgh	2 Addoms Street, Plattsburgh, NY 12901

I do hereby appoint Bernette Carway (420 Clinton Ave, Brooklyn, NY 11238), Maria Ivette Alfonso (149 Hackett Blvd, Albany, NY 12208), and Olivia Lerner (341 E 19th St, Brooklyn, NY 11226), all of whom are enrolled voters of the Working Families Party, as a committee to fill vacancies in accordance with the provisions of the election law.

In witness whereof, I have hereunto set my hand, the day and year placed opposite my signature.

Date	Name of Signer (Signature Required)	Residence	Town or City
3/9/2025	Elizabeth Baker	40 Grace Ave, Plattsburgh, NY 12901	Plattsburgh, NY
3/9/2025	George J. Baker George S. Baker	40 Grace Ave	Plattsburgh
3/9/2025	Donald Gumlar Donald Gumlar	2 Palmer St Plattsburgh NY 12901	Plattsburgh
3/9/2025	Richard Barkley	74 Winton Ave 12901	Plattsburgh
3/9/2025	Steven Mwan Sammy Mwan	1 Champlain St Apt 1 12901	Plattsburgh
3/9/2025	Robert D. Keever Robert D. Keever	5245 North Catherine St Plattsburgh, NY 12901	Plattsburgh
3/9/2025	Bill Stone Lisa Stone	2 Palmer St	Plattsburgh
3/9/2025	Russell Stone	2 Palmer St	Plattsburgh
3/9/2025			
3/9/2025			

Complete ONE of the Following:

1. STATEMENT OF WITNESS

I, (name of witness) Beth Lou LaJoy state: I am a duly qualified voter of the State of New York and am an enrolled voter of the Working Families Party. I now reside at (residence address) 159 Plaza Blvd Apt 417 Plattsburgh, NY 12901. Each of the individuals whose names are subscribed to this petition sheet containing (fill in number) 8 signatures, subscribed the same in my presence on the dates above indicated and identified himself or herself to be the individual who signed this sheet.

I understand that this statement will be accepted for all purposes as the equivalent of an affidavit and, if it contains a material false statement, shall subject me to the same penalties as if I had been duly sworn.

Date March 9, 2025, 2025 Signature of Witness Beth Lou LaJoy

WITNESS IDENTIFICATION INFORMATION: The following information for the witness named above must be completed prior to filing with the board of elections in order for this petition sheet to be valid.

Town of City Town of Plattsburgh County Clinton

2. NOTARY PUBLIC OR COMMISSIONER OF DEEDS

On the dates above indicated before me personally came each of the voters whose signatures appear on this petition sheet containing (fill in number) _____ signatures, who signed same in my presence and who, being by me duly sworn, each for himself or herself, said that the foregoing statement made and subscribed by him or her was true.

Date _____, 2025 Signature and Official Title of Officer Administering Oath _____