

PETITION REVIEW WORK SHEET

Reviewed by: MD & DS

Date: 3/31/25

	Candidate/Office/District			Party	Petition ID #
Date Petition Received	Ronald E Suragon Jr. Leg 8				

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:	
-------------------	--	----------------------	--	---------------------------	--

Corrected Cover Sheet:		Complies	Does not comply
Reviewed by:	MD DS	Date:	

Petition proofed by:	
Petition scanned by:	

RECEIVED
MAR 31 A 9:5
CLINTON COUNTY
BOARD OF ELECTIONS

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 hereto, 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)
Ronald E. Dragon, Jr.	Public Office Clinton County Legislator, Area 8	90 Maryland Road, 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 Leiter (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
1 3/15/2025	<i>Elizabeth Airl</i>	17 Elizabeth St, Apt B	Plattsburgh
2 3/15/2025	<i>Angeli 9999</i>	203 South Peru St	Plattsburgh
3 3/15/2025	<i>Angeline Mitchell</i>	17 Kansas Ave Plattsburgh	Plattsburgh
4 3/15/2025	<i>Rosa Hudson</i>	91 Nevada Oval	Plattsburgh
5 / / 2025			
6 / / 2025			
7 / / 2025			
8 / / 2025			
9 / / 2025			
10 / / 2025			

Complete ONE of the Following:

1. STATEMENT OF WITNESS

I, (name of witness) Elliot Murrer 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) 4971 South Catherine St, Plattsburgh NY 12901. Each of the individuals whose names are subscribed to this petition sheet containing (fill in number) 4 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.

3/25, 2025
Date
[Signature]
Signature of Witness

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.

Plattsburgh
Town or City
Clinton
County

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.

_____, 2025
Date

Signature and Official Title of Officer Administering Oath

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 hereto, 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)
Ronald E. Deragon, Jr.	Public Office Clinton County Legislator, Area 8	90 Maryland Road, 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 Leirer (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
1 3/25/2025	<i>Robert Myer</i>	4971 South Catherine St	Plattsburgh
2 / / 2025			
3 / / 2025			
4 / / 2025			
5 / / 2025			
6 / / 2025			
7 / / 2025			
8 / / 2025			
9 / / 2025			
10 / / 2025			

Complete ONE of the Following:

1. STATEMENT OF WITNESS

I, (name of witness) *Thomas E. Woody* 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) *6025 State Route 22 Plattsburgh, NY 12901*. Each of the individuals whose names are subscribed to this petition sheet containing (fill in number) *1* 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.

*3/27/25*_____, 2025
Date
*Thomas E. Woody*_____
Signature of Witness

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.

*Plattsburgh*_____
Town or City
*Clinton*_____
County

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.

_____, 2025
Date

Signature and Official Title of Officer Administering Oath