

## RESIGNATION AS MUNICIPAL CHAIR

This must be delivered or sent to the Bergen County Clerk.  
One Bergen County Plaza, Room 130 Hackensack, NJ 07601  
Email: [electionsclerk@co.bergen.nj.us](mailto:electionsclerk@co.bergen.nj.us) Fax: 201-336-7005

I, \_\_\_\_\_, will not be able to fulfill my duties and hereby

resign my seat as a **Republican Municipal Chair** in the

**Municipality of \_\_\_\_\_, Ward/District \_\_\_\_\_**

Address: \_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_

Signature: \_\_\_\_\_

---

### **Subscribed and sworn before me at:**

\_\_\_\_\_, N.J.,

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*