



**NOMINATING PETITION  
NGARCHELONG STATE  
19<sup>TH</sup> ASSEMBLYMEN ELECTION  
August 25, 2020**

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**INSTRUCTIONS**

Candidates are reminded that Nominating Petitions must contain at least ten (10) signatures of respective registered voters of \_\_\_\_\_, ( Municipality ) Ngarchelong State.

A non-refundable filing fee must be paid to the Ngarchelong State Treasury as follows:

Members of the Assembly                      \$ 25.00

*This petition, payment receipt of filling fee and the questionnaire, must be filed at the office of the Election Commission no later than 4:30 p.m. on June 25, 2020.*

**\*\* \*\* \***

**CANDIDATE QUALIFICATION**

(A) Assemblymen:

A candidate must be a citizen of Ngarchelong State, who is at least twenty-five (25) years old, must be a registered voter of the municipality of Ngarchelong State which he or she seeks to represent, and must be a citizen of Ngarchelong State in accordance with the law and customs.

**\*\* \*\* \***

**To: Election Commission, Republic of Palau**

We, the undersigned, do hereby declare that each of us is a registered voter of \_\_\_\_\_ of Ngarchelong State and that we are authorized by ( Municipality ) the candidate to endorse this petition and we do hereby nominate \_\_\_\_\_ as our candidate for the **ASSEMBLY** ( name of candidate ) representing \_\_\_\_\_ of Ngarchelong State. Such ( Municipality ) election will be held on **August 25, 2020**.



No.	Name <i>(please print clearly)</i>	Signature	Date
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## NOMINATION ACCEPTANCE

I, \_\_\_\_\_, do hereby accept this nominating for the Up-  
(Print Name to be on ballot)  
coming **Ngarchelong State 19<sup>th</sup> Assemblymen Election** to be held on **August 25, 2020** and  
I further declare that I meet those qualifications for the office that I'm seeking for.

\_\_\_\_\_  
Signature of Candidate

\_\_\_\_\_  
Date

I can be contacted at: Phone #s: Home : \_\_\_\_\_ Work: \_\_\_\_\_  
Mobile: \_\_\_\_\_

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### FOR ELECTION COMMISSION USE ONLY

Received From : \_\_\_\_\_

Date : \_\_\_\_\_

Time : \_\_\_\_\_

Election Official Initial : \_\_\_\_\_



**REPUBLIC OF PALAU**  
**Office of the Election Commission**  
**P. O. Box 826 Koror, Republic of Palau 96940**  
Phone No: (680) 488-1554/4543 Fax No: (680) 488-3327  
e-mail address: [palaelect@palaunet.com](mailto:palaelect@palaunet.com) website: [palaelection.org](http://palaelection.org)



TO ALL CANDIDATES:

In order for Palau Election Commission to certify all candidates, below are list of questions that you need to answer, sign, date and submit to our office with your nominating petition no later than **June 25, 2020**.

Mesulang!

Maria D. Simer  
Election Services Administrator  
Palau Election Commission

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QUESTIONS FOR CANDIDATES FOR ASSEMBLY

1. Please state your full name for the record: \_\_\_\_\_
2. Are you a citizen of Ngarchelong State in accordance with the law and customs?  
☐ Yes ☐ No
3. Are you a registered voter of the Municipality in which you seek to represent?  
☐ Yes ☐ No
4. Are you over 25 years of age? ☐ Yes ☐ No

Candidate Comments:

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Signature

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Date