

CONSTITUTIONAL AMENDMENT PETITION FORM

All information on this form, including your signature, becomes a public record upon receipt by the Supervisor of Elections.
Under Florida law, it is a first degree misdemeanor, punishable as provided in s. 775.082 or s. 775.083, Florida Statutes, to knowingly sign more than one petition for a candidate, minor political party, or an issue. [Section 104.185, Florida Statutes]
If all requested information on this form is not completed, the form will not be valid.

YOUR NAME: _____
(Please Print name as it Appears on Your Voter Information Card)

YOUR RESIDENTIAL STREET ADDRESS: _____

CITY: _____ ZIP: _____ COUNTY: _____

VOTER REGISTRATION NUMBER: _____ OR DATE OF BIRTH: ____/____/____

I am a registered voter of Florida and hereby petition the Secretary of State to place the following proposed amendment to the Florida Constitution on the ballot in the general election:

BALLOT TITLE: The Right to Life of All Persons Recognized and Protected

BALLOT SUMMARY:

The God-given right to life of every human being at any stage of development shall be recognized and protected.

ARTICLE OR SECTION BEING CREATED OR AMENDED: The Creation of Article 1, Section 28

FULL TEXT OF THE PROPOSED AMENDMENT:

SECTION 28. The Right to Life of All Persons Recognized and Protected

The God-given right to life of every human being at any stage of development shall be recognized and protected. This provision shall be deemed to supersede any other inconsistent provisions.

_____ X _____
Date of Signature Signature of Registered Voter

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PO Box 493000, Leesburg FL 34749
Return Signed Petitions to this address.

Paid Petition Circulator's Name: _____
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For Official Use Only
Serial Number: 13-06
Approval Date: 12/26/13