

CONSTITUTIONAL AMENDMENT PETITION FORM

Note:

- 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. 775.08, Florida Statutes, to knowingly sign more than one petition for 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 address: _____

City _____ **Zip** _____ **County** _____

Please change my legal residence address on my voter registration record to the above residence address (check box, if applicable).

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: Expanded Medical Marijuana to Include Mental Health

BALLOT SUMMARY: Expands the current definition of debilitating medical conditions, allowing the medical use of marijuana for mental health. Floridians suffering from mental health disorders such as Bipolar Disorder, Panic Disorder, Anorexia, Opioid Use Disorder, and other disorders will qualify as medical marijuana patients. Applies only to Florida law, and does not immunize violations of federal law.

ARTICLE AND SECTION BEING CREATED OR AMENDED: Article X, Section 29

FULL TEXT OF THE PROPOSED CONSTITUTIONAL AMENDMENT:

ARTICLE X, SECTION 29.— Medical marijuana production, possession and use.

(b) DEFINITIONS. For purposes of this section, the following words and terms shall have the following meanings:

(1) “Debilitating Medical Condition” means cancer, epilepsy, glaucoma, positive status for human immunodeficiency virus (HIV), acquired immune deficiency syndrome (AIDS), post-traumatic stress disorder (PTSD), amyotrophic lateral sclerosis (ALS), Crohn's disease, Parkinson's disease, multiple sclerosis, bipolar disorder, opioid use disorder, panic disorder, anorexia nervosa, bulimia nervosa, insomnia disorder, alcohol use disorder, generalized anxiety disorder (GAD), major depressive disorder (MDD), or other debilitating medical conditions of the same kind or class as or comparable to those enumerated, and for which a physician believes that the medical use of marijuana would likely outweigh the potential health risks for a patient.

X _____

SIGNATURE OF REGISTERED VOTER

DATE OF SIGNATURE

Initiative petition sponsored by Peaceful Minds for Medical Marijuana, PO Box 1531 Palatka, FL 32178

Please Return to Peaceful Minds PO Box 1531 Palatka, FL 32178

If paid petition circulator is used:

Circulator's name _____

Circulator's address _____

For Official Use Only:

Serial Number: 18-02

Date Approved: 4/6/2018