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:

BALLOT SUMMARY:

ARTICLE AND SECTION BEING CREATED OR AMENDED:

FULL TEXT OF THE PROPOSED CONSTITUTIONAL AMENDMENT:

________________________________________

DATE OF SIGNATURE

X

SIGNATURE OF REGISTERED VOTER

Insert “Initiative petition sponsored by (name and address of the sponsoring political committee)”

If paid petition circulator is used:

Circulator’s name ____________________________

Circulator’s address ____________________________

For Official Use Only:

Serial Number: __________________________

Date Approved: __________________________