CONSTITUTIONAL AMENDMENT INITIATIVE PETITION FORM - PAID PETITION CIRCULATOR

Amendment Information

Ballot Title: Sample Initiative for the Voters of Florida

Ballot Summary: The Sample Initiative summary supplies the initiative wording that will be placed on the ballot if

sufficient signatures are gathered.

See separate document for the full text of the proposed constitutional amendment	

Date Approved	03/08/2021 Se	erial Number _	2100				
Sponsor's Information (Return all completed petition forms to the address below.) Name: Sample Committee for Initiative Petitions Address: 100 Main Street Tallahassee, FL 32399							
Voter's Information I am a registered voter of Florida and hereby petition the Secretary of State to place the above proposed amendment to the Florida Constitution on the ballot in the general election.							
Name - Last	First			Middle			
Address							
City	Zip			County			
Update my vot	er registration record to this address. (ch	neck box)					
Registration No.		or Date	of Birth	M M / D D /	YYYY		
Signature		Date	Signed	M M / D D /	YYYY		
Petition Circulator's Information							
This petition form is only to be circulated and collected by a paid petition circulator. After the voter signs the form, the circulator must complete the affidavit below.							
Paid Petition Circulator's Affidavit							
Name Samp	le Circulator		Circula	ator's Number	20002		
Address Samp	le Permanent Street Sample City, Fl	_ 33333					
By my signature below, as petition circulator, I verify that the petition was signed in my presence. Under penalties of perjury, I declare that I have read the forgoing Petition Circulator's Affidavit and the facts stated in it are true.							
Signature		Date	Signed	M M / D D /	YYYY		

Attention

- This form becomes a public record once filed with the Supervisor of Elections.
- It is a first degree misdemeanor to knowingly sign the same petition more than once. [§104.185, F.S.]
- An improperly completed form will not be validated.