

INITIATIVE MEASURE TO BE SUBMITTED DIRECTLY TO VOTERS

The Attorney General of California has prepared the following title and summary of the chief purpose and points of the proposed measure: **PUBLIC BENEFITS. DRIVER LICENSE. ELIGIBILITY. IMMIGRATION STATUS AND IDENTITY VERIFICATION. INITIATIVE CONSTITUTIONAL AMENDMENT.** Amends Constitution to require providers of public benefits to verify whether applicants are lawfully present in the United States. Prohibits state or local public benefits for any aliens classified as ineligible under federal law. Requires state and local officials to report immigration law violations to federal authorities; failure to report is a misdemeanor. Requires state to verify driver s license applicant s identity and lawful presence in the United States. Prohibits the state and its political subdivisions from accepting identification documents not issued by a state or federal jurisdiction. Summary of estimate by Legislative Analyst and Director of Finance of fiscal impact on state and local governments: This measure could result in increased annual costs to the state and local governments in the tens of millions of dollars to verify citizenship or immigration status of persons receiving specified public services. This measure could also result in program savings over \$100 million annually to the state and local governments, primarily counties, due to reduced expenditures for certain public services.

NOTICE TO THE PUBLIC: THIS PETITION MAY BE CIRCULATED BY A PAID SIGNATURE GATHERER OR A VOLUNTEER. YOU HAVE THE RIGHT TO ASK. THE USE OF YOUR SIGNATURE FOR ANY PURPOSE OTHER THAN QUALIFICATION OF THIS MEASURE FOR THE BALLOT IS A MISDEMEANOR. COMPLAINTS ABOUT THE MISUSE OF YOUR SIGNATURE MAY BE MADE TO THE SECRETARY OF STATE’S OFFICE.

All signers of this petition must be registered in _____ County. *This column for official use only.*



	1. Print Your Name	Residence Address ONLY	
	Signature as Registered	City	Zip Code
	2. Print Your Name	Residence Address ONLY	
	Signature as Registered	City	Zip Code
	3. Print Your Name	Residence Address ONLY	
	Signature as Registered	City	Zip Code
	4. Print Your Name	Residence Address ONLY	
	Signature as Registered	City	Zip Code
	5. Print Your Name	Residence Address ONLY	
	Signature as Registered	City	Zip Code

Write in the name of the county.

Print your name and address. Then sign as you are registered to vote.

Have other family and friends who are registered voters sign today. (All lines need not be completed to be valid.) Complete as many as possible and mail today!

DECLARATION OF CIRCULATOR (To be handwritten by the circulator after above signatures have been obtained)

I, _____, am registered to vote in the state of California and reside at the following address: _____

(Print Name) (Address, City, State, Zip)

I circulated this petition and saw each of the appended signatures being written. Each signature on this petition is, to the best of my information and belief, the genuine signature of the person whose name it purports to be.

All signatures on this document were obtained between the dates of _____, 200__ and _____, 200__.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed at: _____ California.

(Place of Signing)

Fill in the dates and location. Then you must sign a SECOND TIME!

DATE: _____ SIGNATURE: _____