#### <u>State of Nevada – Initiative Petition – Constitutional Amendment</u>

The People of the State of Nevada do enact as follows:

Article 2 of the Nevada Constitution is hereby amended by adding thereto new sections to be designated as Section 1B and Section 1C, to read as follows:

**Sec 1B. Photo Identification.** Each voter in Nevada shall present photo identification to verify their identity when voting in person at a polling place during early voting or on election day before being provided a ballot. To be considered valid, the photo identification must be current or expired for no more than four years. If the voter is 70 years old or more, the identification can be expired for any length of time, so long as it is otherwise valid. Acceptable forms of identification include:

- 1. Nevada driver's license.
- 2. Identification card issued by the State of Nevada, any other State, or the US Government.
- 3.Employee photo identification card issued by the US government, Nevada government, or any county, municipality, board, authority, or other Nevada government entity.
- 4. US passport.
- 5. US military identification card.
- 6. Student photo identification card issued by a Nevada public college, university, or technical school.
- 7. Tribal photo identification.
- 8. Nevada concealed firearms permit.
- 9. Other form of government-issued photo identification that the Legislature may approve.

**Sec 1C. Voter Verification.** Each voter in Nevada who votes by mail-in ballot shall enter one of the following in the block provided next to the voter's signature for election officials to use in verifying the voter's identity:

- 1. The last four digits of their Nevada driver's license number.
- 2. If the voter does not possess a Nevada driver's license, the last four digits of their Social Security number.
- 3. If the voter has neither a Nevada driver's license or a Social Security number, the number provided by the county clerk when the voter registered to vote.

[THE REMAINDER OF THIS PAGE INTENTIONALLY LEFT BLANK]

(Lyon County)

				this county may sign	
Peti	tion District	( <u>Only</u> re	egistered voters of	this petition district	may sign below This Space For
					Office Use Only
1	PRINT YOUR NAME (first name,	initial, last name)	RESIDENCE ADDRE	SSS ONLY	
	YOUR SIGNATURE	DATE	CITY	COUNTY	
	T SON BION WITCHE	/ /			
2	PRINT YOUR NAME (first name,		RESIDENCE ADDRE	SS ONLY	
	YOUR SIGNATURE	DATE	CITY	COUNTY	
		/ /			
3	PRINT YOUR NAME (first name,		RESIDENCE ADDRE	SS ONLY	
	YOUR SIGNATURE	DATE	CITY	COUNTY	
		/ /			
4	PRINT YOUR NAME (first name,	initial, last name)	RESIDENCE ADDRE	SS ONLY	
	YOUR SIGNATURE	DATE	CITY	COUNTY	
		/ /			
5	PRINT YOUR NAME (first name,	initial, last name)	RESIDENCE ADDRE	SS ONLY	
	YOUR SIGNATURE	DATE	CITY	COUNTY	
		/ /			
6	PRINT YOUR NAME (first name,	initial, last name)	RESIDENCE ADDRE	SS ONLY	
	YOUR SIGNATURE	DATE	CITY	COUNTY	
		/ /			
7	PRINT YOUR NAME (first name,	initial, last name)	RESIDENCE ADDRE	SS ONLY	
	YOUR SIGNATURE	DATE	CITY	COUNTY	
		/ /			
8	PRINT YOUR NAME (first name,	initial, last name)	RESIDENCE ADDRE	SS ONLY	

YOUR SIGNATURE	DATE	CITY	COUNTY	
	/ /			

County of Lyon				this county may sigr	
Petition District		( <u>Only</u> re	egistered voters of	this petition district	may sign below This Space For
9	PRINT YOUR NAME (first name,	initial, last name)	RESIDENCE ADDRE	SS ONLY	
	YOUR SIGNATURE	DATE	CITY	COUNTY	
		/ /			
10	PRINT YOUR NAME (first name,	initial, last name)	RESIDENCE ADDRE	SS ONLY	
	YOUR SIGNATURE	DATE	CITY	COUNTY	
		/ /			
11	PRINT YOUR NAME (first name,	initial, last name)	RESIDENCE ADDRE	SS ONLY	
	YOUR SIGNATURE	DATE	CITY	COUNTY	
		/ /			
12	PRINT YOUR NAME (first name,	initial, last name)	RESIDENCE ADDRE	SS ONLY	
	YOUR SIGNATURE	DATE	CITY	COUNTY	
- 10	DDIN'T VOLID MANE (C.	/ /	DEGIDENCE ADDRE	EGG ONLY	
13	PRINT YOUR NAME (first name,	initial, last name)	RESIDENCE ADDRE	SS ONL Y	
	YOUR SIGNATURE	DATE	CITY	COUNTY	
		/ /			
14	PRINT YOUR NAME (first name,	initial, last name)	RESIDENCE ADDRE	SS ONLY	
	YOUR SIGNATURE	DATE	CITY	COUNTY	
		/ /			
15	PRINT YOUR NAME (first name,	initial, last name)	RESIDENCE ADDRE	SS ONLY	
	YOUR SIGNATURE	DATE	CITY	COUNTY	
		/ /			
16	PRINT YOUR NAME (first name,	initial, last name)	RESIDENCE ADDRE	SSS ONLY	

YOUR SIGNATURE	DATE	CITY	COUNTY	
	/ /			

				this county may sign	
Petition District		( <u>Only</u> re	egistered voters of	this petition district	This Space For
17	PRINT YOUR NAME (first name,	initial, last name)	RESIDENCE ADDRESS ONLY		Office Use Only
1,					
	YOUR SIGNATURE	DATE	CITY	COUNTY	
		/ /			
18	PRINT YOUR NAME (first name,	initial, last name)	RESIDENCE ADDRE	ESS ONLY	
	YOUR SIGNATURE	DATE	CITY	COUNTY	
		/ /			
19	PRINT YOUR NAME (first name,	initial, last name)	RESIDENCE ADDRE	ESS ONLY	
	YOUR SIGNATURE	DATE	CITY	COUNTY	
		/ /			
20	PRINT YOUR NAME (first name,	initial, last name)	RESIDENCE ADDRE	ESS ONLY	
	YOUR SIGNATURE	DATE	CITY	COUNTY	
		/ /			
21	PRINT YOUR NAME (first name,	initial, last name)	RESIDENCE ADDRE	ESS ONLY	
	VOLID SIGNATURE	DATE	CITY	COLINITY	
	YOUR SIGNATURE	DATE	CITY	COUNTY	
22	PRINT YOUR NAME (first name,	initial last name)	RESIDENCE ADDRE	ESS ONLY	
22	TREAT TOOK TABLE (THIS HAME,	imital, last hame)	RESIDENCE TEDEN		
	YOUR SIGNATURE	DATE	CITY	COUNTY	
		/ /			
23	PRINT YOUR NAME (first name, initial, last name)		RESIDENCE ADDRE	ESS ONLY	
	YOUR SIGNATURE	DATE	CITY	COUNTY	
		/ /			
24	PRINT YOUR NAME (first name,	initial, last name)	RESIDENCE ADDRE	ESS ONLY	

YOUR SIGNATURE	DATE	CITY	COUNTY	
	/ /			

				this county may sigr	
Petit	tion District	( <u>Only</u> re	egistered voters of	this petition district	may sign below) This Space For
					Office Use Only
25	PRINT YOUR NAME (first name, i	initial, last name)	RESIDENCE ADDRE	SS ONLY	
	YOUR SIGNATURE	DATE	CITY	COUNTY	
		/ /			
26	PRINT YOUR NAME (first name,	initial, last name)	RESIDENCE ADDRE	SS ONLY	
	YOUR SIGNATURE	DATE	CITY	COUNTY	
		/ /			
27	PRINT YOUR NAME (first name,	initial, last name)	RESIDENCE ADDRE	SS ONLY	
	YOUR SIGNATURE	DATE	CITY	COUNTY	
		/ /			
28	PRINT YOUR NAME (first name,	initial, last name)	RESIDENCE ADDRE	SS ONLY	
	YOUR SIGNATURE	DATE	CITY	COUNTY	
		/ /			
29	PRINT YOUR NAME (first name,	initial, last name)	RESIDENCE ADDRE	SS ONLY	
	YOUR SIGNATURE	DATE	CITY	COUNTY	
		/ /			
30	PRINT YOUR NAME (first name,	initial, last name)	RESIDENCE ADDRE	SS ONLY	
	YOUR SIGNATURE	DATE	CITY	COUNTY	
		/ /			
31	PRINT YOUR NAME (first name, i	initial, last name)	RESIDENCE ADDRE	SS ONLY	
	YOUR SIGNATURE	DATE	CITY	COUNTY	
		/ /			
32	PRINT YOUR NAME (first name,	initial, last name)	RESIDENCE ADDRE	SS ONLY	

YOUR SIGNATURE	DATE	CITY	COUNTY	
	/ /			

#### THE FOLLOWING AFFIDAVIT MUST BE COMPLETED AND SIGNED:

#### AFFIDAVIT OF CIRCULATOR

(TO BE SIGNED BY CIRCULATOR)

STATE OF NEVADA	)	
STATE OF NEVADA COUNTY OF	)	
I,	, (print name), being first duly	sworn under penalty of perjury,
depose and say: (1) that l	I reside at	
(print street, city and stat	te); (2) that I am 18 years of age or	older; (3) that I personally circulated
this document; (4) that	all signatures were affixed in m	y presence; (5) that the number of
signatures affixed thereo	n is	; and
(6) that each person who	signed had an opportunity before	re signing to read the full text of the
act or resolution on whic	h the initiative or referendum is c	lemanded.
Subscribed and sworn to	or affirmed before me this	Signature of Circulator
	, by	
	authorized to administer oath	