## REFERENDUM PETITION

WE, THE UNDERSIGNED qualified voters of the state of South Dakota, petition that the following law, as enacted by the Legislature of the state of South Dakota, be submitted to the voters of the state of South Dakota at the general election on November 7, 2006, for their approval or rejection pursuant to the Constitution of the state of South Dakota.

## HB 1215: ABORTION—CRIMES AND OFFENSES—CONTRACEPTIVES.

An act to establish certain legislative findings, to reinstate the prohibition against certain acts causing the termination of an unborn human life, to prescribe a penalty therefore, and to provide for the implementation of such provisions under certain circumstances. Initially passed by the House on February 9, 2006; passed by the Senate February 22, 2006; final passage by the House which concurred with Senate amendments on February 24, 2006, and Approved by the Governor on March 6, 2006.

RECEIVED

MAR 2 4 2006

S.D. SEC. OF STATE

## **INSTRUCTIONS TO SIGNERS:**

1. Signers of this petition must individually sign their names in the form in which they are registered to vote or as they usually sign their names.

2. Before the petition is filed, each signer or the circulator must add the residence address of the signer and the date of signing. If the signer is a resident of a second or third class municipality, a post office box may be used for the residence address.

3. Before the petition is filed, each signer or the circulator must print the name of the signer in the space provided and add the county of voter registration.

4. Abbreviations of common usage may be used. Ditto marks may not be used. 5. Failure to provide all information requested may invalidate the signature.

3.1 and to provide an information requested may invalidate the signature.		
NAME (	RESIDENCE	DATE/COUNTY
Signy Bell	STREET AND NUMBER OR RURAL ROUTE AND BOX NUMBER  Street and Number or Rural Route and Box Number  Street and Number or Rural Route and Box Number	DATE OF SIGNING  3 2 1 06
Maria Bell	STREET AND NUMBER OR RURAL ROUTE AND BOX NUMBER	COUNTY OF REGISTRATION  DATE OF SIGNING
2		
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sign day of	STREET AND NUMBER OR RURAL ROUTE AND BOX NUMBER	DATE OF SIGNING
PRINT Filed this , ,	CITY OR TOWN	COUNTY OF REGISTRATION
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SIGN SECRETARY OF STATE	CITY OR TOWN	COUNTY OF REGISTRATION
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SIGN	STREET AND NUMBER OR RURAL ROUTE AND BOX NUMBER	DATE OF SIGNING	
21			
PRINT	CITY OR TOWN	COUNTY OF REGISTRATION	
VERIFICATION BY PERSON CIRCULATING PETITION			
INSTRUCTIONS TO CIRCULA	ATOR: This section must be completed following	circulation and before filing.	
Print name of the circulator	Residence Address	City State	
I. under oath, state that I circulated the a	bove petition, that each signer personally signed th	is petition in my presence, and	
	ed name, the residence address of the signer, the da		
of voter registration.			
	Signature of Circulate		
Sworn to before me this day of Mark, 2006.			
(Seal)		( M )	
My Commission Evning	Signature of Officer Administering Oath		
	mission Expires: Sept. 18, 2011	inistering Oath	
Form Revised 2000 - 5:02:08:08	Title of Officer Administering Oath		

STREET AND NUMBER OR RURAL ROUTE AND BOX NUMBER

DATE OF SIGNING

When completed, please return to: SOUTH DAKOTA CAMPAIGN FOR HEALTHY FAMILIES P.O. BOX 1484 **SIOUX FALLS, SD 57101-1484**