

This proposal amends Article XI, Section 5, of the State Constitution to ban collective bargaining for state employees and require the Civil Service Commission to set pay rates for all positions at the market rate. In addition, it cancels all current employment agreements with state employees.

The full text of this proposal is on the back of this sheet, followed by the current provisions of the State Constitution which would be altered or abrogated by this proposal. This proposal is to be voted on at the November 6, 2012 General Election.

We, the undersigned qualified and registered electors, residents in the county of _____, State of Michigan, respectively petition for amendment to constitution.

WARNING - A person who knowingly signs this petition more than once, signs a name other than his or her own, signs when not a qualified and registered elector, or sets opposite his or her signature on a petition, a date other than the actual date the signature was affixed, is violating the provisions of the Michigan election law.

INITIATIVE PETITION
AMENDMENT TO THE CONSTITUTION

INDICATE CITY OR TOWNSHIP IN WHICH REGISTERED TO VOTE	SIGNATURE	PRINTED NAME	STREET ADDRESS OR RURAL ROUTE	ZIP CODE	DATE OF SIGNING		
					MO	DAY	YEAR
CITY OF <input type="checkbox"/> TOWNSHIP OF <input type="checkbox"/>	1.						
CITY OF <input type="checkbox"/> TOWNSHIP OF <input type="checkbox"/>	2.						
CITY OF <input type="checkbox"/> TOWNSHIP OF <input type="checkbox"/>	3.						
CITY OF <input type="checkbox"/> TOWNSHIP OF <input type="checkbox"/>	4.						
CITY OF <input type="checkbox"/> TOWNSHIP OF <input type="checkbox"/>	5.						
CITY OF <input type="checkbox"/> TOWNSHIP OF <input type="checkbox"/>	6.						
CITY OF <input type="checkbox"/> TOWNSHIP OF <input type="checkbox"/>	7.						
CITY OF <input type="checkbox"/> TOWNSHIP OF <input type="checkbox"/>	8.						
CITY OF <input type="checkbox"/> TOWNSHIP OF <input type="checkbox"/>	9.						
CITY OF <input type="checkbox"/> TOWNSHIP OF <input type="checkbox"/>	10.						
CITY OF <input type="checkbox"/> TOWNSHIP OF <input type="checkbox"/>	11.						
CITY OF <input type="checkbox"/> TOWNSHIP OF <input type="checkbox"/>	12.						
CITY OF <input type="checkbox"/> TOWNSHIP OF <input type="checkbox"/>	13.						
CITY OF <input type="checkbox"/> TOWNSHIP OF <input type="checkbox"/>	14.						

CERTIFICATE OF CIRCULATOR

I, the circulator of this petition, assert that I am qualified to circulate this petition, that each signature on the petition was signed in my presence; and that, to my best knowledge and belief, each signature is the genuine signature of the person purporting to sign the petition, the person signing the petition was at the time of signing a qualified registered elector of the city or township indicated preceding the signature, and the elector was qualified to sign the petition.

WARNING - A circulator knowingly making a false statement in the above certificate, a person not a circulator who signs as a circulator, or a person who signs a name other than his or her own as circulator is guilty of a misdemeanor.

CIRCULATOR - Do not sign or date certificate until after circulating petition.

Signature of Circulator

_____/_____/_____
Date

Printed Name of Circulator

City or Township Where Qualified to be Registered

Complete Residence Address (Street and Number or Rural Route)

Zip Code