

Notice of Intent Description of Effect - County Initiative Petition NRS 295.095

Pursuant to NRS 295.095, a copy of the county initiative or referendum, including the description of effect, must be filed with the County Clerk's office at the time you submit this form.

Tł	DES	Title, an Ide CRIPTIOI	entifier # will be assigned N OF EFFECT Description of The	(1)	
	of} (Only registered	d voters o	of this County may s		This space for office use only
1	PRINT YOUR NAME (last name, first name, initial)		RESIDENTIAL ADDRESS (DNLY:	
	YOUR SIGNATURE:	DATE:	CITY:	COUNTY:	
2	PRINT YOUR NAME (last name, first name, initial)		RESIDENTIAL ADDRESS (DNLY:	
	YOUR SIGNATURE:	DATE:	CITY:	COUNTY:	
3	PRINT YOUR NAME (last name, first name, initial)		RESIDENTIAL ADDRESS (ONLY:	
	YOUR SIGNATURE:	DATE:	CITY:	COUNTY:	
4	PRINT YOUR NAME (last name, first name, initial)		RESIDENTIAL ADDRESS (DNLY:	
	YOUR SIGNATURE:	DATE:	CITY:	COUNTY:	

	Τ	he People of the County of (Do not add	a Title, an Id	dentifier # will be as	do enact as follo	ows:
		<u>DE</u> (Insert 200 Word)		ON OF EFFECT s Description of	f The Effect)	
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C		y of} (<u>Only</u> registere	ed voters	of this County r	may sign below.)	This space for office use only
	5	PRINT YOUR NAME (last name, first name, initial)		RESIDENTIAL ADDR	RESS ONLY:	
		YOUR SIGNATURE:	DATE:	CITY:	COUNTY:	
	6	PRINT YOUR NAME (last name, first name, initial)		RESIDENTIAL ADDR	RESS ONLY:	
		YOUR SIGNATURE:	DATE:	CITY:	COUNTY:	
Ī				DECIDENTIAL ADDE		
	7	PRINT YOUR NAME (last name, first name, initial)		RESIDENTIAL ADDR	RESS ONLY:	

RESIDENTIAL ADDRESS ONLY:

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CITY:

EL-D03(c)-25 NRS 295.095 Revised: 5/27/25

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PRINT YOUR NAME (last name, first name, initial)

PRINT YOUR NAME (last name, first name, initial)

YOUR SIGNATURE:

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Т	,				llows:
			ON OF EFFE s Description	<u>ECT</u> on of The Effect)	
Count	y of}} (<u>Only</u> registere	ed voters	of this Cou	nty may sign below.)	This space for office use only
10	PRINT YOUR NAME (last name, first name, initial)		RESIDENTIAL	ADDRESS ONLY:	
	YOUR SIGNATURE:	DATE:	CITY:	COUNTY:	
11	PRINT YOUR NAME (last name, first name, initial)		RESIDENTIAL	ADDRESS ONLY:	
	YOUR SIGNATURE:	DATE:	CITY:	COUNTY:	
12	PRINT YOUR NAME (last name, first name, initial)		RESIDENTIAL	ADDRESS ONLY:	
	YOUR SIGNATURE:	DATE:	CITY:	COUNTY:	
13	PRINT YOUR NAME (last name, first name, initial)		RESIDENTIAL	ADDRESS ONLY:	
	YOUR SIGNATURE:	DATE:	CITY:	COUNTY:	
14	PRINT YOUR NAME (last name, first name, initial)		RESIDENTIAL	ADDRESS ONLY:	
	YOUR SIGNATURE:	DATE.	CITY:	COLINTY.	

Tł	<u>DE</u>	SCRIPTIO	dentifier # will be assigned) <u>DN OF EFFECT</u> Is Description of The E		
	y of}} (<u>Only</u> registere	ed voters	of this County may si	gn below.)	This space for office use only
15	PRINT YOUR NAME (last name, first name, initial)		RESIDENTIAL ADDRESS ONI	LY:	
	YOUR SIGNATURE:	DATE:	CITY: COL	UNTY:	
16	PRINT YOUR NAME (last name, first name, initial)		RESIDENTIAL ADDRESS ONI	LY:	
	YOUR SIGNATURE:	DATE:	CITY: COL	UNTY:	
17	PRINT YOUR NAME (last name, first name, initial)		RESIDENTIAL ADDRESS ONI	LY:	
	YOUR SIGNATURE:	DATE:	CITY: COL	UNTY:	
18	PRINT YOUR NAME (last name, first name, initial)		RESIDENTIAL ADDRESS ONI	LY:	
	YOUR SIGNATURE:	DATE:	CITY: COL	UNTY:	
19	PRINT YOUR NAME (last name, first name, initial)		RESIDENTIAL ADDRESS ONI	LY:	
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T	<u>DE</u>	SCRIPTION	dentifier # will ON OF EFFI s Description	- '	ollows:
Count	y of} (<u>Only</u> registere	ed voters	of this Cou	inty may sign below.)	This space for office use only
20	PRINT YOUR NAME (last name, first name, initial)		RESIDENTIAL	ADDRESS ONLY:	office date only
	YOUR SIGNATURE:	DATE:	CITY:	COUNTY:	
21	PRINT YOUR NAME (last name, first name, initial)		RESIDENTIAL	_ADDRESS ONLY:	
	YOUR SIGNATURE:	DATE:	CITY:	COUNTY:	
22	PRINT YOUR NAME (last name, first name, initial)		RESIDENTIAL	ADDRESS ONLY:	
	YOUR SIGNATURE:	DATE:	CITY:	COUNTY:	
23	PRINT YOUR NAME (last name, first name, initial)		RESIDENTIAL	_ ADDRESS ONLY:	
	YOUR SIGNATURE:	DATE:	CITY:	COUNTY:	
24	PRINT YOUR NAME (last name, first name, initial)		RESIDENTIAL	ADDRESS ONLY:	
	YOUR SIGNATURE:	DATE:	CITY:	COUNTY:	

The People of the County of		(Do not odd o Title on le	Jamei Gian W ill		o enact as follows:	
	(In	(Do not add a Title, an Io <u>DESCRIPTIC</u> sert 200 Words or Les:	N OF EFFI	<u>ECT</u>	ct)	
	<u> </u>					
County 25	y of} (PRINT YOUR NAME (last name,			Inty may sign ADDRESS ONLY:	below.)	This space for office use only
	YOUR SIGNATURE:	DATE:	CITY:	COUNT	γ:	
		AFFIDAVIT O	F CIRCULAT	ΓOR		
(To be	completed by the person w	ho circulated the petition	after all sig	natures have be	een obtained)	
	f Nevada))				
18 year in my p	rrect.: (1) that I reside at rs of age or older; (3) that I p resence; (5) that the numb unity before signing to read	personally circulated this e er of signatures affixed the	document; ((print s 4) that all signat ; and (6) tha	treet, city, and state); tures are genuine and t each person who si	(2) that I am were affixed gned had an
				Signature of	Circulator	
Subscr	ibed and sworn to or affirm	ned before me this				
day of .	,	, by	_			
Notary	Public or person authorize	d to administer an oath	_			