PRINT YOUR NAME (first, initial, last name)

YOUR SIGNATURE

9

County of

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

Chapter 614 of the Nevada Revised Statues is amended to add NRS 614.190

NRS 614.190 Secret ballots in elections for employee representation. The right of individuals to vote by secret ballot is fundamental and shall be guaranteed where local, state or federal law permits or requires elections, designations, or authorizations for employee representation.

## DESCRIPTION OF EFFECT

This initiative would be submitted to the 2011 legislature as soon as it convenes and must be enacted or rejected by them without change within 40 days. If enacted and approved by the Governor, it shall become law. If the legislature does not act upon or rejects the petition within 40 days, it shall be submitted to a vote at the next general election.

If approved, this initiative would recognize the fundamental right to vote by secret ballot in all elections for employee representation. Secret ballot elections will provide employees the right to vote in privacy to determine majority support for a labor union.

Under current Nevada law, if the responsible governmental administrative agency has a good faith doubt about the majority support of a labor union in a local government workplace, it can order a secret ballot election. Under federal law governing private-sector employees, if thirty percent or more of the employees request a secret ballot election, then the responsible federal administrative agency must hold one. This initiative would require a secret ballot election in every case. A change in federal law would be required for this initiative to be binding in the private-sector workplace.

(Only registered voters of this county may sign below)

1	PRINT YOUR NAME (first, initial, last name)		RESIDENCE ADDRESS ONLY		
	YOUR SIGNATURE	DATE	CITY	COUNTY	
2	PRINT YOUR NAME (first, initial, last name)		RESIDENCE ADDRESS ONLY		
	YOUR SIGNATURE	DATE	CITY	COUNTY	
3	PRINT YOUR NAME (first, initial, last name)		RESIDENCE ADDRESS ONLY		
	YOUR SIGNATURE	DATE	CITY	COUNTY	
4	PRINT YOUR NAME (first, initial, last name)		RESIDENCE ADDRESS ONLY		
	YOUR SIGNATURE	DATE	CITY	COUNTY	
5	PRINT YOUR NAME (first, initial, last name)	RINT YOUR NAME (first, initial, last name)		RESIDENCE ADDRESS ONLY	
	YOUR SIGNATURE	DATE	CITY	COUNTY	
6	PRINT YOUR NAME (first, initial, last name)		RESIDENCE ADDRESS ONLY		
	YOUR SIGNATURE	DATE	CITY	COUNTY	
7	PRINT YOUR NAME (first, initial, last name)		RESIDENCE ADDRESS ONLY		
	YOUR SIGNATURE	DATE	CITY	COUNTY	
8	PRINT YOUR NAME (first, initial, last name)		RESIDENCE ADDRESS ONLY		
	YOUR SIGNATURE	DATE	CITY	COUNTY	

DATE

CITY

RESIDENCE ADDRESS ONLY

COUNTY

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10	PRINT YOUR NAME (first, initial, last name)		RESIDENCE ADDRESS ONLY		
	YOUR SIGNATURE	DATE	CITY	COUNTY	
11	PRINT YOUR NAME (first, initial, last name)		RESIDENCE ADDRESS ONLY		
	YOUR SIGNATURE	DATE	CITY	COUNTY	
12	PRINT YOUR NAME (first, initial, last name)		RESIDENCE ADDRESS ONLY		
	YOUR SIGNATURE	DATE	CITY	COUNTY	
13	PRINT YOUR NAME (first, initial, last name)		RESIDENCE ADDRESS ONLY		
	YOUR SIGNATURE	DATE	CITY	COUNTY	
14	PRINT YOUR NAME (first, initial, last name)		RESIDENCE ADDRESS ONLY		
	YOUR SIGNATURE	DATE	CITY	COUNTY	
15	PRINT YOUR NAME (first, initial, last name)		RESIDENCE ADDRESS ONLY		
	YOUR SIGNATURE	DATE	CITY	COUNTY	-D

## AFFIDAVIT OF CIRCULATOR

(TO BE SIGNED BY CIRCULATOR)			JUL 13 2010 ()
STATE OF NEVADA	)		
COUNTY OF	)		SECRETARY OF STA
Ι,	, (print name), be	eing first duly sworn under penalty of pe	rjury, depose and say: (1) that I reside at
:		(print street, city and state); (2) that	I am 18 years of age or older; (3) that I
personally circulated this document; (4) t	hat all signatures were af	fixed in my presence; (5) that I believe e	each person who signed was at the time of
signing a registered voter in the county of	f his residence; (6) that th	ne number of signatures affixed thereon i	s; and (7) that each person who
signed had an opportunity before signing	to read the full text of the	e act or resolution on which the initiative	e or referendum is demanded.
		Signature of Circulator	
Subscribed and sworn to or affirmed before	re me this		
day of,	, by	· · · · · · · · · · · · · · · · · · ·	
Notary Public or person to administer oat	h		