

STATE OF MARYLAND – STATEWIDE NON-BINDING PETITION

WHEREAS, Article 13 of the Declaration of Rights of the Maryland Constitution states, "That every man (*and woman*) hath a right to petition the Legislature for the redress of grievances in a peaceable and orderly manner." (Italics added, as affirmed by Art. 46 of Declaration of Rights), and as further provided by the 1st Amendment to the United States Constitution.

WHEREAS, a thorough review and analysis of the official Maryland State Voter Rolls has identified numerous registration violations including but not limited to duplicate registrations, questionable inactive voters who having voted returned to inactive status, voters without U.S. Postal Service certified mailing addresses, voters registered without residential addresses, voters who reportedly moved away over four years prior to voting in recent elections, deceased voters, voters identified as 16 years of age and yet voted, numerous registered voters over the age of 115, voters who have an erroneous registration date of the national holiday of January 1, and voters with conflicting registration dates.

WHEREAS, a thorough review and analysis of the official Maryland State Voter Rolls has further identified numerous voting violations in the 2022 General Election, resulting in an error rate far above an acceptable error rate allowed by federal election law.

WHEREAS, there is growing concern throughout the U. S. that electronic voting machines, often connected to the Internet, are subject to outside manipulation raising doubts as to the validity of elections; coupled with the lack of transparency by the Maryland State Board of Elections.

WHEREFORE, pursuant to said Article 13 of the Declaration of Rights and the 1st Amendment of the U.S. Constitution, We, the undersigned voters of _____ County or Baltimore City, hereby petition our Legislature to adopt the following:

- 1-Address and resolve registration violations in advance of the 2024 elections.
- 2-Require the Maryland State Board of Elections to maintain accurate voter rolls.
- 3-Elimination of all electronic voting machines, electronic poll books and all forms of electronic voting equipment at polling places.
- 4-Return to the use of paper ballots and hand counting of votes at the Precinct level.
- 5-Elimination of widespread mail-in ballots, and return to absentee ballots only for military personnel, medical and other valid emergencies.
- 6-Elimination of drop boxes.
- 7-Providing photo identification to vote.

WE, the undersigned, believe that the adoption of these provisions to our election laws in Maryland will restore confidence and trust in our voting system and lead to greater participation in the voting process. We further understand and acknowledge that this petition is non-binding upon the Legislature and advisory only; but as citizens of Maryland, this petition reflects our sincere intentions and the will of the people.

NOTICE TO SIGNERS: Sign and print your name (1) as it appears on the voter registration list, OR (2) your surname of registration AND at least one full given name AND the initial of any other names. Please print or type all information other than your signature. Post Office Box addresses are not generally accepted as valid. By signing this petition, you agree that _____ to the best of your knowledge, you are registered to vote in Maryland and are eligible to have your signature counted for this petition.

1	Print Name:	First Name	Middle Name	Last Name	Birth Date:	Month	Date	Year
	Signature:				Date of Signature:	Month	Date	Year
	Maryland Residence Address:	Street Number	Street Name	Apt. No.	City or Town	Zip		
2	Print Name:	First Name	Middle Name	Last Name	Birth Date:	Month	Date	Year
	Signature:				Date of Signature:	Month	Date	Year
	Maryland Residence Address:	Street Number	Street Name	Apt. No.	City or Town	Zip		
3	Print Name:	First Name	Middle Name	Last Name	Birth Date:	Month	Date	Year
	Signature:				Date of Signature:	Month	Date	Year
	Maryland Residence Address:	Street Number	Street Name	Apt. No.	City or Town	Zip		
4	Print Name:	First Name	Middle Name	Last Name	Birth Date:	Month	Date	Year
	Signature:				Date of Signature:	Month	Date	Year
	Maryland Residence Address:	Street Number	Street Name	Apt. No.	City or Town	Zip		
5	Print Name:	First Name	Middle Name	Last Name	Birth Date:	Month	Date	Year
	Signature:				Date of Signature:	Month	Date	Year
	Maryland Residence Address:	Street Number	Street Name	Apt. No.	City or Town	Zip		

Individual Circulator's printed or typed name _____

Residence Address _____

City _____ State _____ Zip _____

Telephone (including area code) _____

Circulator's Affidavit Under penalties of perjury, I swear (or affirm) that: (a) I was at least 18 years old when each signature was obtained; (b) the information given to the left identifying me is true and correct; (c) I personally observed each signer as he or she signed this page; and (d) to the best of my knowledge and belief: (i) all signatures on this page are genuine; and (ii) all signers are registered voters of Maryland. (Sign and Date when signature collection is completed)

Circulator's Signature _____ Date (mm/dd/yy) _____