



Citizens Commission Application

Use this form to apply to serve on the Citizens Commission Concerning a Constitutional Amendment for Government of the People, created by 2018 Ballot Question 2. The information collected by this form is required by the initiative petition.

Note: All applications will be posted publicly as required by statute.

Name *

First Name

Last Name

Address *

City

State

ZIP Code

Phone *

Email *

Citizenship Affirmation *

 I am a U.S. Citizen

Residency Affirmation *

 I am a resident of the Commonwealth of Massachusetts

Statement of Intent *

 I intend to comply with and advance the policy established by this Act.

Section 1. Policy and Purpose: (a) This Act establishes a non-partisan Citizens Commission to advance the policy of Massachusetts in favor of amending the Constitution of the United States (i) to affirm that artificial entities do not possess the inalienable Constitutional rights of the People, and (ii) in order to eliminate the undue influence of concentrated money on elections and on governmental policy, campaign contributions and spending may be regulated and limited. (b) It is the intent of this Act that the proposed federal constitutional amendment or amendments that are the subject matter of this Act shall be drafted and construed so as to protect the integrity and fairness of elections and government; prevent corruption; secure the right of all Americans to be represented and to participate in self-government as equal citizens; protect the freedom of speech, of the press and other rights of all Americans over the privileges of artificial entities; and ensure the constitutionality of sound regulation and operation of corporations and other economic entities by the people.

Your interest and qualifications in serving on the Citizens Commission.

Statement of Interest *

1500/1500

Statement should be no more than 1,500 characters.

Résumé or Summary of Qualifications Upload *

Choose File **No file chosen**

File uploads may not work on some mobile devices.

Political Party Affiliation, if any, over the previous five years *

Democratic ▾


If multiple or other, please explain (optional)

Limited to 250 characters

City or Town where you reside *

ABINGTON ▾

Employment Status *

Employed 

Occupation *

Employer *

SUBMIT FORM

Did you find what you were looking for on this webpage? *

Yes No

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