2022 VOTER INFORMATION QUESTIONNAIRE

California ProLife Council and Right to Life Federation

500 Capitol Mall #2350
Sacramento, CA 95814
800-924-2490

Candidates for City and County Councils, Commissions and Boards

Please note: For questions that have a Yes/No answer, "Yes" indicates agreement with the California ProLife Council. We would also appreciate any statements or letters to your constituents on these issues, and any background on your campaign.

1. **Proposition One (Constitutional Right to Reproductive Freedom)** on the ballot this November goes far beyond the *Roe* and *Casey* decisions and allows unlimited and unregulated abortion, prohibiting any future laws regulating abortion by altering the state's constitution:
   SEC. 1.1. The state shall not deny or interfere with an individual's reproductive freedom in their most intimate decisions, which includes their fundamental right to choose to have an abortion and their fundamental right to choose or refuse contraceptives. This section is intended to further the
   constitutional right to privacy guaranteed by Section 1, and the constitutional right to not be denied equal protection guaranteed by Section 7. Nothing herein narrows or limits the right to privacy or equal protection.

   Legal experts agree this would permit and allow state funding and promotion of all abortions and prohibit any regulations of it. The average Californian strongly disagrees with such unlimited abortion policies

   https://www.rasmussenreports.com/public_content/politics/partner_surveys/questions_real_life_california_aug_10_11_2022

   Do you oppose the passage of Proposition One?　　　　　　　　□ Yes　　□ No

2. **Statutory Protection for Unborn Children** – The recent Supreme Court decision in *Dobbs v. Jackson Women's Health Organization* overturned *Roe v. Wade* and returned to each state the right to determine when to protect a child's life in the womb, and under what circumstances.
Do you favor any restrictions on abortion? **Please check one**.

☐ No restrictions on abortion for all nine months (Planned Parenthood's position)

☐ No restrictions prior to viability, then abortion should be disallowed

☐ Abortion should be allowed only to prevent the death of the mother, in cases of incest, and in cases of forcible rape reported to law enforcement authorities within seven days.

☐ Abortion should be allowed only to prevent death of the mother (CPLC position)

☐ Abortion should be disallowed in all cases

☐ Other (please explain)

3. Tax Funds Which Subsidize the Abortion Industry

Would you oppose any allocation of funds or other local subsidies (or the approval of state or federal grants) to agencies, such as Planned Parenthood and the Feminist Women's Health Centers, that perform or promote abortion, in order to avoid complicity with the abortion industry? ☐ Yes ☐ No

4. New Abortion Clinics

Would you oppose the zoning and licensing of proposed new abortion facilities, or proposed expansions of existing abortion referral clinics to become actual abortion sites, provided that your opposition would be permitted within the regulatory guidelines of the approving agency? ☐ Yes ☐ No

5. Hospital Mergers

In a hospital merger, would you oppose attempts to force hospitals to perform or refer abortions in opposition to their religious beliefs? ☐ Yes ☐ No

6. End of Life Issues

The dismissal of the Hippocratic Oath encouraging doctors to use medicine in any manner they choose, including to intentionally kill and do so without accountability, has now expanded.

Do you support legislation prohibiting euthanasia? ☐ Yes ☐ No

Do you support legislation prohibiting physician-assisted suicide (voluntary euthanasia)? ☐ Yes ☐ No

7. Community/Volunteer Experience in Relation to Life

List any activities that have demonstrated your views on the sanctity of life, e.g., affiliation with a prolife organization, public speech, support of a prolife event, letter to the editor, previous endorsement by prolife organization, etc. Continue on a separate sheet. Attach copies if applicable.

Candidate's Signature

Date

Print or type name

Phone #:

Political Party

Candidate for (name of office, district number if applicable):

Name of campaign committee

Address

e-mail address

phone #

fax #: