

## INITIATIVE PETITION TO THE SECRETARY OF STATE, STATE OF NORTH DAKOTA

We, the undersigned, being qualified electors request the following initiated law be placed on the ballot as provided by law.

### SPONSORING COMMITTEE

The following are the names and addresses of the qualified electors of the state of North Dakota who, as the sponsoring committee for the petitioners, represent and act for the petitioners in accordance with law:

Eric M. Thompson, Chairperson 1324 Eagles View Place Bismarck, ND 58503	Kim Halvorson PO Box 564 Williston, ND 58802	Terry Schreiner 1336 Sunset Blvd. Minot, ND 58703	Joseph Kapinos 3110 Walnut Street Grand Forks ND 58201	John Pies 4368 43 <sup>rd</sup> St S Fargo, ND 58104
R D Bain 3305 Montreal St. #303 Bismarck, ND 58503	Ben W. Hanson 921 31 <sup>st</sup> Ave W West Fargo, ND 58078	William P. Zuger 320 W. Avenue B Bismarck, ND 58501	Tanja Kapinos 3110 Walnut Street Grand forks, ND 58201	Dawn Smith 807 S 22 <sup>nd</sup> St Grand Forks, ND 58201
Tanya Fuher 2008 N 6 <sup>th</sup> St Bismarck, ND 58501	Chadley Lorenz 2426 Seneca Dr. Bismarck, ND 58503	Burley W Barnett 3538 11 <sup>th</sup> Ave N, #2 Grand Forks, ND 58203	Brock Daniel Needham 1309 Shires Dr SE Mandan, ND 58554	Troy Ternes 1038 Westwood St. Bismarck, ND 58504
Larry L. Gauper 621 Hackberry Drive South Fargo, ND 58104-6222	Timothy N. Morris 4823 Fountainblue Drive Bismarck, ND 58503	Brad Harsel 3430 24 <sup>th</sup> Ave S Apt 705 Grand Forks, ND 58201	David Olson 1018 South 18th Street Grand forks, ND 58201	Jennifer Thomas 4716 Corvette St NW Mandan, ND 58554
Monica Griedl 210 King St. Starkweather, ND 58377	Derrick Orr 320 N Washington St Bismarck ND 58501	Joan D. Johnson RPH 3005 E. Harbor Rd SE Mandan ND 58554	Mark S. Owens 5865 Fountain Vista Drive Grand Forks, ND 58201	Jeffery J Allickson 3705 Dorothea Ct S Fargo ND 58104
Travis Bevan 4884 10 <sup>th</sup> Ave S Fargo ND 58103	Tammy Crawford P.O. Box 85 Kramer, ND 58748	Wendy Harmsen 4221 Timberline Dr. S Fargo, ND 58104	Donna Mallery 5565 47 <sup>th</sup> Ave S Fargo ND 58104	Lori Modin 4706 Arbor Ct S Fargo, ND 58104
Phil Nichols 1401 27 <sup>th</sup> Ave So, #202 Fargo, ND 58103	Duane Paul O'Marro Jr. 2604 54 <sup>th</sup> Ave. S Fargo, ND 58104	Mark Dosch 200 E. Bismarck Expressway Bismarck, ND 58504		

Approved For Circulation Secretary of State June 3, 2014

## PETITION TITLE

This initiated measure would amend section 43-15-35 of the North Dakota Century Code to remove the requirement that an applicant for a permit to operate a pharmacy must be a licensed pharmacist, a business controlled by licensed pharmacists, or a hospital pharmacy or postgraduate medical residency training program.

## FULL TEXT OF THE MEASURE

*IF MATERIAL IS UNDERSCORED, IT IS NEW MATERIAL WHICH IS BEING ADDED. IF MATERIAL IS OVERSTRUCK BY DASHES, THE MATERIAL IS BEING DELETED. IF MATERIAL IS NOT UNDERSCORED OR OVERSTRUCK, THE MATERIAL IS EXISTING LAW THAT IS NOT BEING CHANGED.*

BE IT ENACTED BY THE PEOPLE OF THE STATE OF NORTH DAKOTA:

**SECTION 1. AMENDMENT.** Section 43-15-35 of the North Dakota Century Code is amended and reenacted as follows:

**43-15-35. Requirements for permit to operate pharmacy—Exceptions.**

~~1. The board shall issue a permit to operate a pharmacy, or a renewal permit, upon satisfactory proof of all of the following:~~

~~a1. The pharmacy will be conducted in full compliance with existing laws and with the rules and regulations established by the board.~~

~~b2. The equipment and facilities of the pharmacy are such that prescriptions can be filled accurately and properly, and United States pharmacopeia and national formulary preparations properly compounded and so that it may be operated and maintained in a manner that will not endanger public health and safety.~~

~~c3. The pharmacy is equipped with proper pharmaceutical and sanitary appliances and kept in a clean, sanitary, and orderly manner.~~

~~d4. The management of the pharmacy is under the personal charge of a pharmacist duly licensed under the laws of this state.~~

~~e5. The applicant for such permit is qualified to conduct the pharmacy, and is a licensed pharmacist in good standing or is a partnership, each active member of which is a licensed pharmacist in good standing; a corporation or an association, the majority stock in which is owned by licensed pharmacists in good standing; or a limited liability company, the majority membership interests in which is owned by licensed pharmacists in good standing, actively and regularly employed in and responsible for the management, supervision, and operation of such pharmacy.~~

~~f6. Suitable reference sources either in book or electronic data form, are available in the pharmacy or online, which might include the United States pharmacopeia and national formulary, the United States pharmacopeia dispensing information, facts and comparisons, micro medex, the American society of health-system pharmacists formulary, or other suitable references pertinent to the practice carried on in the licensed pharmacy.~~

~~2. The provisions of subdivision e of subsection 1 do not apply to:~~

~~a. The holder of a permit on July 1, 1963, if otherwise qualified to conduct the pharmacy, provided that any such permit holder that discontinues operations under such permit or fails to renew such permit upon expiration is not exempt from the provisions of subdivision e of subsection 1 as to the discontinued or lapsed permit.~~

~~b. A hospital pharmacy furnishing service only to patients in that hospital.~~

~~c. The applicant for a permit to operate a pharmacy which is a hospital, if the pharmacy for which the hospital seeks a permit to operate is a retail pharmacy that is the sole provider of pharmacy services in the community and is a retail pharmacy that was in existence before the hospital took over operations. A hospital operating a pharmacy under this subdivision may operate the pharmacy at any location in the community.~~

~~d. The applicant for a permit to operate a pharmacy which is the owner of a postgraduate medical residency training program if the pharmacy is collocated with and is run in direct conjunction with the postgraduate medical residency training program. For purposes of this subdivision, the postgraduate medical residency training program must be accredited by the accreditation council on graduate medical education or other national accrediting organization.~~

### INSTRUCTIONS TO PETITION SIGNERS

You are being asked to sign a petition. You must be a qualified elector. This means you are eighteen years old, you have lived in North Dakota thirty days, and you are a United States citizen. All signers shall also legibly print their name, complete residential address or rural route or general delivery address, and the date of signing on the petition. Every qualified elector signing a petition must do so in the presence of the individual circulating the petition.

### QUALIFIED ELECTORS

	Month/Day/Year	PRINTED Name of Qualified Elector	SIGNED Name of Qualified Elector	Residential Address or Complete Rural Route or General Delivery Address	City, State, Zip Code
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					