



ISSUE: ABORTION

The Georgia Life Alliance (GLA) believes that unborn children should be protected by law, and that abortion should be permitted only when necessary to prevent the death of the mother.

For each numbered question, please indicate your answer by initialing or writing the "yes" or "no" to each question.

NOTE: in every numbered question below, the answer "yes" indicates agreement with the position of GLA.

1. Do you believe abortion should be illegal?

YES MS NO \_\_\_\_\_

If you answered "yes" to question 1, do you believe there should be an exception to laws prohibiting abortion in any of the following circumstances? (please initial all that you agree with)

- (1a) MS To prevent the death of the mother.
- (1b) \_\_\_\_\_ In cases of rape where the rape is reported to an appropriate law enforcement agency.
- (1c) \_\_\_\_\_ In cases of incest where the incest is committed against a minor and it has been reported to an appropriate agency.
- (1d) Other: (Please initial all that you agree with or complete 1d.) \_\_\_\_\_

2. In Roe v. Wade and Doe v. Bolton (1973) the U.S. Supreme Court created a "right to abortion" for any reason until "viability" (into the 6th month) and for any health reason during the final three months of pregnancy. Would you advocate for changing the Roe v. Wade and Doe v. Bolton decisions so that elected legislatures may once again protect unborn children by limiting or prohibiting abortion?

YES MS NO \_\_\_\_\_

3. Do you support Georgia's Pain Capable Unborn Child Protection Act which was passed in 2012 and which seeks to ban abortion after 20 weeks (following fertilization)?

YES MS NO \_\_\_\_\_

4. Do you support Georgia's law requiring parental notification (or Judicial authorization) before a minor may obtain an abortion?

YES MS NO \_\_\_\_\_



5. Do you support Georgia's "Woman's Right to Know" law which ensures women are given medically and scientifically significant information (including the risks of the abortion procedure and benefits if the woman brings the child to term) prior to obtaining an abortion?

YES MB NO \_\_\_\_\_

6. Ultrasound is the "window" to the womb. Would you support legislation to ensure women seeking abortion are actively provided information regarding free ultrasounds and that any image resulting from an ultrasound must be made available for the woman to view prior to her abortion?

YES MB NO \_\_\_\_\_

7. Would you vote for measures to protect living human embryos from being used for experiments that would harm or kill them, including embryonic stem cell research (regardless of the method used to create the embryo)?

YES MB NO \_\_\_\_\_

8. Would you support legislation to prohibit sex-selection abortions (where an abortion is performed to terminate a child because of the sex)?

YES MB NO \_\_\_\_\_

9. Would you support legislation to prohibit dismemberment abortions (where the life of the fetus is terminated by dismemberment of the body)?

YES MB NO \_\_\_\_\_

10. Would you support legislation providing information to women about perinatal hospice (which is life-affirming and compassionate care for parents facing a terminal prenatal diagnosis for their child)?

YES MB NO \_\_\_\_\_

11. Would you oppose any attempt to weaken Georgia's Unborn Victims of Violence Act (which recognizes that unborn children may be treated as a victim if injured or killed during the commission of a crime)?

YES MB NO \_\_\_\_\_

12. Would you support a law prohibiting the use of taxpayer dollars to pay for abortions, except when necessary to save the mother's life?

YES MB NO \_\_\_\_\_



2015 GEORGIA CANDIDATE QUESTIONNAIRE

Please complete the following information, including your signature and initial the bottom-right corner of each page.

Send original signed questionnaire to our office at 3 Central Plaza #187, Rome, GA, 30161.

To expedite receipt of the questionnaire, scan and email to [kristina@georgialifealliance.com](mailto:kristina@georgialifealliance.com). If you have any questions, please call 678-597-8055.

*Mickey Tuck*  
Signature of Candidate

MICKEY TUCK  
Please print or type name

FLOYD      14<sup>th</sup> U.S. CONGRESSIONAL DISTRICT      REPUBLICAN  
County      District # OF GA      Political Party

COMMITTEE TO ELECT MICKEY TUCK  
Name of campaign committee

P.O. Box 899 SILVER CREEK, GA 30173      MICKEY TUCK  
Campaign Address      Contact person

(706) 528-4284           8-28-2015  
Phone number      FAX number      Date

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