

Rebuttal to Argument in Favor of Measure T

The proponents of this new car tax claim that it will “raise roughly \$7.75 million without significantly impacting the pocketbooks of County residents.”

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Think again, this new car tax will significantly impact the pocketbooks of San Mateo County.

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Hurts Our Local Economy

Here’s how: San Mateo County gets more than 10,000 direct jobs from the San Francisco Airport - far more than any other county. Tourism, hospitality and entertainment are critical parts of our local economy – providing 67,000 jobs and more than \$8 billion dollars. This new car tax on rental cars will hurt one of the core components of this center of job creation.

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A Poorly Written Law

There is no end date on this new tax – it goes on forever – without any mandatory evaluation of its impact on the economy or of how the money is being spent.

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Politicians Can Spend It Any Way They Want – No Money is Guaranteed for Police, Fire or Schools

When considering this new car tax, it’s important to look at the fine print. Supporters say it will help the county to support essential services, but the money will go into the general fund to be spent in any way these politicians desire. There is no requirement that this money be spent on essential services like police, fire or schools.

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Vote No on Measure T – this new car tax is poorly written and will hurt our local economy.

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FILED IN THE OFFICE OF THE
CHIEF ELECTIONS OFFICER
OF SAN MATEO COUNTY, CALIF.

MAR 23 2012

By: MARK CHURCH Chief Elections Officer
DEPUTY CLERK

23/10/12



Authorization Form

Change in Preparer, Submitter, or Signer of Rebuttal Arguments

PLEASE ONLY COMPLETE SECTIONS THAT ARE APPLICABLE

Authorization must be provided by the original author(s) of the primary argument(s) in favor of or against the specified measure, when a different person(s) will prepare, submit or sign the rebuttal argument. *California Elections Code §9167, §9317, §9504*

The undersigned author(s) hereby authorize(s) the following individual(s) (up to five) to sign prepare, or submit (whichever is applicable) the rebuttal argument to the primary argument in favor of/against Measure **T** for the election to be held on **June 5, 2012**
(date of election)

I. NEW SIGNER(S):

Name of Rebuttal Argument Signer: **John Roeder**

Name of Rebuttal Argument Signer: **Daniel Varela**

Name of Rebuttal Argument Signer: _____

Name of Rebuttal Argument Signer: _____

Name of Rebuttal Argument Signer: _____

II. NEW PREPARER(S):

Name of Rebuttal Argument Preparer: _____

Name of Rebuttal Argument Preparer: _____

III. NEW SUBMITTER(S):

Name of Rebuttal Argument Submitter: _____

Name of Rebuttal Argument Submitter: _____

NAME(S) & SIGNATURE(S) OF PRIMARY ARGUMENT AUTHOR(S):

 Sean Welch
Printed Name and Signature of Author

 Taxpayers for a Strong Economy
Printed Name and Signature of Author

 March 26, 2012
Date

Date



Ballot Measure Argument Rebuttal Submission Form

If both an argument in favor of and against a measure have been selected for publication in the voter information pamphlet, a rebuttal to the argument in favor of or the argument against the measure may be submitted as outlined in this form.

The author of the argument in favor of the measure may prepare and submit a rebuttal argument to the argument against the measure or may authorize in writing any other person or persons to prepare, submit, or sign the rebuttal argument. Likewise, the author of the argument against the measure may prepare and submit a rebuttal argument to the argument in favor of the measure or may authorize in writing any other person or persons to prepare, submit, or sign the rebuttal argument.

A rebuttal argument shall not be accepted unless accompanied by this completed form, which shall contain the printed name(s) and signature(s) of the person(s) submitting it or, if submitted on behalf of a bona fide association of citizens/organization, the name of the association/organization and the printed name and signature of at least one of its principal officers.

Word count limit for Rebuttal Arguments = 250

The rebuttal arguments shall be submitted to the elections official conducting the election no later than _____.

These rules apply to all rebuttal arguments unless a rebuttal argument is otherwise provided by law.

Ballot Measure T for the Primary 2012 to be held on June 5, 2012.

Rebuttal to Argument in Favor of Measure T Rebuttal to Argument Against Measure _____

Signed by Exact Same Individual(s) as Argument Already Selected for the Voter Information Pamphlet

If you are submitting a rebuttal argument and the individual(s) signing the rebuttal argument are the same as the individual(s) signing the original Ballot Measure Primary Argument Submission Form, check the following box and complete the back side of this form.

Rebuttal Argument Is Signed by Same Individual(s) as Argument Already Selected For the Voter Information Packet

Submitted by Different Individual(s) as the Opposing Primary Argument

If the rebuttal argument is signed by anyone different than the signer(s) of the Ballot Measure Primary Argument Submission Form already submitted—including whether there is only one different individual or whether there are up to five new individuals—you must complete the section below, complete the back side of this form, and attach to this form the written authorization by the author that indicates: (i) your name(s); and (ii) the author's name, contact information, statement of authorization, and signature.

Contact Person: Sean Welch	Phone: [REDACTED]
Mailing Address: [REDACTED]	
Fax: [REDACTED]	Email: [REDACTED]

Please complete the reverse side of this form.

Rebuttal Argument Signers Form

Each signer must designate in which capacity they are signing. Check the one box that applies.

No more than five signatures shall appear with any argument. If more than five signatures are submitted, the first five listed shall be printed.

Names and titles listed will be printed in the order that they are listed below.

If the signers are part of a bona fide association/organization, for each such signing individual(s), the title under the signer's name shall list the name of that bona fide association/organization and may include their position within that association/organization.

By signing below, the undersigned state that they have read the argument and believe it not to be false or misleading.

Governing Body of San Mateo County, a School District, or a Special District	Member of the Governing Body of San Mateo County, a School District, or a Special District	Bona Fide Association of Citizens/Organization	Individual
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1. Name: **Daniel Varela** Title: **Teamsters Local 853, Business Agent**

Phone: [Redacted] Email: [Redacted]

Signature: *[Handwritten Signature]* Date: **3/22/12**

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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2. Name: _____ Title: _____

Phone: _____ Email: _____

Address: _____

Signature: _____ Date: _____

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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3. Name: _____ Title: _____

Phone: _____ Email: _____

Address: _____

Signature: _____ Date: _____

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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4. Name: _____ Title: _____

Phone: _____ Email: _____

Address: _____

Signature: _____ Date: _____

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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5. Name: _____ Title: _____

Phone: _____ Email: _____

Address: _____

Signature: _____ Date: _____

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Submit a second form (this side only) for alternate signers attached to this form and the argument.

FOR OFFICIAL USE ONLY

Signers Registered N/A Signed Dated

Bona Fide Association Verified N/A Signed Dated

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1.	Name: <u>Michelle Rose</u> Title: <u>Small Business Owner</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Phone: [Redacted] Email: [Redacted] Address: [Redacted]				
	Signature: <u>[Signature]</u> Date: <u>3/23/12</u>				
2.	Name: _____ Title: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Phone: _____ Email: _____ Address: _____				
	Signature: _____ Date: _____				
3.	Name: _____ Title: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Phone: _____ Email: _____ Address: _____				
	Signature: _____ Date: _____				
4.	Name: _____ Title: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Phone: _____ Email: _____ Address: _____				
	Signature: _____ Date: _____				
5.	Name: _____ Title: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Phone: _____ Email: _____ Address: _____				
	Signature: _____ Date: _____				

Submit a second form (this side only) for alternate signers attached to this form and the argument.

FOR OFFICIAL USE ONLY				
Signers	<input type="checkbox"/> Registered	N/A	Signed	Dated
Bona Fide Association	<input type="checkbox"/> Verified	N/A	Signed	Dated

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1.	Name: JOHN ROEDER	Title: PRESIDENT, SILICON VALLEY TAXPAYERS' ASSOCIATION	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Phone: [REDACTED]		Email: [REDACTED]				
Signature: <i>John A. Roeder</i>		Date: 3-22-12				
2.	Name:	Title:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Phone:		Email:				
Address:						
Signature:		Date:				
3.	Name:	Title:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Phone:		Email:				
Address:						
Signature:		Date:				
4.	Name:	Title:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Phone:		Email:				
Address:						
Signature:		Date:				
5.	Name:	Title:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Phone:		Email:				
Address:						
Signature:		Date:				

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Bona Fide Association	<input type="checkbox"/> Verified	N/A	Signed	Dated

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1.	Name: Kelly Hunt	Title: Regional Vice President	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Phone: [Redacted]	Email: Enterprise Rent-a-Car Company of San Francisco				
	Address: [Redacted]					
	Signature: Kelly Hunt	Date: 3/22/12				
2.	Name:	Title:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Phone:	Email:				
	Address:					
	Signature:	Date:				
3.	Name:	Title:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Phone:	Email:				
	Address:					
	Signature:	Date:				
4.	Name:	Title:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Phone:	Email:				
	Address:					
	Signature:	Date:				
5.	Name:	Title:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Phone:	Email:				
	Address:					
	Signature:	Date:				

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Bona Fide Association	<input type="checkbox"/> Verified	N/A	Signed	Dated

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1	Name: <u>Jim McGuire</u>	Title: <u>Best Western Eurosvenor General Manager</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Phone: [REDACTED]	Email: [REDACTED]				
	Address: [REDACTED]					
	Signature: <u>[Signature]</u>	Date: <u>3-23-12</u>				
2.	Name:	Title:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Phone:	Email:				
	Address:					
	Signature:	Date:				
3.	Name:	Title:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Phone:	Email:				
	Address:					
	Signature:	Date:				
4.	Name:	Title:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Phone:	Email:				
	Address:					
	Signature:	Date:				
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	Address:					
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