



OFFICE OF
**ASSESSOR-COUNTY CLERK-
 RECORDER & ELECTIONS**
 COUNTY OF SAN MATEO

MARK CHURCH
 CHIEF ELECTIONS OFFICER &
 ASSESSOR-COUNTY CLERK-RECORDER

Ballot Measure Primary Argument Submission Form

A ballot argument will not be accepted unless accompanied by this completed **typed** 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, the name of the association and the printed name and signature of at least one of its principal officers. **Please make sure you are using proper format before submitting to the Elections Office.**

Word count limit for Primary Arguments = 300 words

Ballot Measure TBD for the Presidential Election to be held on November 5, 2024

Primary Argument in Favor of Primary Argument Against

This argument is submitted by (check ONLY ONE):	
<input type="checkbox"/>	The County of San Mateo Board of Supervisors or the Governing Body of a School District or Special District Name of Governing Body: Contact Person's Printed Name: Phone: _____ Email: _____
<input type="checkbox"/>	Member(s) of the County of San Mateo Board of Supervisors or the Governing Body of a School District or Special District Name of Governing Body: Contact Person's Printed Name: Phone: _____ Email: _____
<input type="checkbox"/>	Bona Fide Association of Citizens If this argument is filed by a bona fide association of citizens, the signers of the argument must be affiliated with the association and be authorized to sign the argument on its behalf. Provide the printed name and signature of at least one principal officer of the association. Name of Association: Contact Person's Printed Name: Phone: _____ Email: _____
<input checked="" type="checkbox"/>	Individual Voters Eligible to Vote on the Measure Contact Person's Printed Name: Amber Lee-Alva Phone: _____ Email: _____
<input type="checkbox"/>	Combination of Voters and Associations Contact Person's Printed Name: Phone: _____ Email: _____

Arguments will be emailed to the contact person listed here for review before they are printed in the Sample Ballot & Official Voter Information Pamphlets.

Please complete the reverse side of this form.

40 Tower Road, San Mateo, CA 94402

P 650.312.5222 F 650.312.5348 email registrar@smcacre.gov web www.smcacre.gov

Signature #1

Primary Argument Signers Form		Author	Verified
<p>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. Place a checkmark in the author column if the signer is the author of the argument. A signer can only list one title. Honorifics such as M.D., Dr., Esquire, etc. with a name are not accepted.</p> <p>If the signers are part of a bona fide association, there is no requirement that they be eligible to vote on the measure. However, for each such signing individual, the title under the signer's name must list the name of that bona fide association and may include their position within that association.</p> <p>By signing below, the undersigned state that they have read the argument and believe it not to be false or misleading.</p> <p>Type information clearly.</p>		<p>Check if the signer is the author of the argument. Authors must be signers.</p>	<p>(FOR OFFICIAL USE ONLY) Staff check once the eligibility of the signer is verified.</p>
1.	<p>Name: Lenny Mendonca Title: Small Business Owner Phone: [REDACTED] Address: [REDACTED] Signature: [REDACTED] Date: 8-12-2027</p>	<p><input checked="" type="checkbox"/></p>	<p><input type="checkbox"/></p>
2.	<p>Name: [REDACTED] Title: [REDACTED] Phone: [REDACTED] Address: [REDACTED] Signature: [REDACTED] Date: [REDACTED]</p>	<p><input type="checkbox"/></p>	<p><input type="checkbox"/></p>
3.	<p>Name: [REDACTED] Title: [REDACTED] Phone: [REDACTED] Address: [REDACTED] Signature: [REDACTED] Date: [REDACTED]</p>	<p><input type="checkbox"/></p>	<p><input type="checkbox"/></p>
4.	<p>Name: [REDACTED] Title: [REDACTED] Phone: [REDACTED] Address: [REDACTED] Signature: [REDACTED] Date: [REDACTED]</p>	<p><input type="checkbox"/></p>	<p><input type="checkbox"/></p>
5.	<p>Name: [REDACTED] Title: [REDACTED] Phone: [REDACTED] Address: [REDACTED] Signature: [REDACTED] Date: [REDACTED]</p>	<p><input type="checkbox"/></p>	<p><input type="checkbox"/></p>

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

2

Primary Argument Signers Form			Author	Verified
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1.	Name: Sandra Andreini Title: <i>48 Former Boys' + Girls' Club President</i> Phone: [Redacted] Email: [Redacted] Address: [Redacted] Signature: [Redacted] Date: <i>8/12/24</i>	<input checked="" type="checkbox"/>		
	Name: [Redacted] Title: [Redacted] Phone: [Redacted] Email: [Redacted] Address: [Redacted] Signature: [Redacted] Date: [Redacted]	<input type="checkbox"/>	<input type="checkbox"/>	
	Name: [Redacted] Title: [Redacted] Phone: [Redacted] Email: [Redacted] Address: [Redacted] Signature: [Redacted] Date: [Redacted]	<input type="checkbox"/>	<input type="checkbox"/>	
	Name: [Redacted] Title: [Redacted] Phone: [Redacted] Email: [Redacted] Address: [Redacted] Signature: [Redacted] Date: [Redacted]	<input type="checkbox"/>	<input type="checkbox"/>	
	Name: [Redacted] Title: [Redacted] Phone: [Redacted] Email: [Redacted] Address: [Redacted] Signature: [Redacted] Date: [Redacted]	<input type="checkbox"/>	<input type="checkbox"/>	
	Name: [Redacted] Title: [Redacted] Phone: [Redacted] Email: [Redacted] Address: [Redacted] Signature: [Redacted] Date: [Redacted]	<input type="checkbox"/>	<input type="checkbox"/>	
	Name: [Redacted] Title: [Redacted] Phone: [Redacted] Email: [Redacted] Address: [Redacted] Signature: [Redacted] Date: [Redacted]	<input type="checkbox"/>	<input type="checkbox"/>	

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#3

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1.	<p>Name: John Muller</p> <p>Phone: [REDACTED]</p> <p>Address: [REDACTED]</p> <p>Signature: [REDACTED]</p> <p>Date: 8/12/24</p>	<p>Title: Former Mayor, Half Moon Bay</p> <p>Email:</p>	<p><input checked="" type="checkbox"/></p> <p><input type="checkbox"/></p> <p>Pronouns: He/His: <input checked="" type="checkbox"/> She/Her: <input type="checkbox"/> They/Them: <input type="checkbox"/></p>
2.	<p>Name:</p> <p>Phone:</p> <p>Address:</p> <p>Signature:</p> <p>Date:</p>	<p>Title:</p> <p>Email:</p>	<p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p>Pronouns: He/His: <input type="checkbox"/> She/Her: <input type="checkbox"/> They/Them: <input type="checkbox"/></p>
3.	<p>Name:</p> <p>Phone:</p> <p>Address:</p> <p>Signature:</p> <p>Date:</p>	<p>Title:</p> <p>Email:</p>	<p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p>Pronouns: He/His: <input type="checkbox"/> She/Her: <input type="checkbox"/> They/Them: <input type="checkbox"/></p>
4.	<p>Name:</p> <p>Phone:</p> <p>Address:</p> <p>Signature:</p> <p>Date:</p>	<p>Title:</p> <p>Email:</p>	<p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p>Pronouns: He/His: <input type="checkbox"/> She/Her: <input type="checkbox"/> They/Them: <input type="checkbox"/></p>
5.	<p>Name:</p> <p>Phone:</p> <p>Address:</p> <p>Signature:</p> <p>Date:</p>	<p>Title:</p> <p>Email:</p>	<p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p>Pronouns: He/His: <input type="checkbox"/> She/Her: <input type="checkbox"/> They/Them: <input type="checkbox"/></p>

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#4

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1.	<p>Name: Amber Stariha</p> <p>Title: Cunha PTO President</p> <p>Phone: [REDACTED]</p> <p>Email: [REDACTED]</p> <p>Address: [REDACTED]</p> <p>Signature: [REDACTED]</p> <p>Date: 8/12/24</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.	<p>Name:</p> <p>Title:</p> <p>Phone:</p> <p>Email:</p> <p>Address:</p> <p>Signature:</p> <p>Date:</p>	<input type="checkbox"/>	<input type="checkbox"/>
3.	<p>Name:</p> <p>Title:</p> <p>Phone:</p> <p>Email:</p> <p>Address:</p> <p>Signature:</p> <p>Date:</p>	<input type="checkbox"/>	<input type="checkbox"/>
4.	<p>Name:</p> <p>Title:</p> <p>Phone:</p> <p>Email:</p> <p>Address:</p> <p>Signature:</p> <p>Date:</p>	<input type="checkbox"/>	<input type="checkbox"/>
5.	<p>Name:</p> <p>Title:</p> <p>Phone:</p> <p>Email:</p> <p>Address:</p> <p>Signature:</p> <p>Date:</p>	<input type="checkbox"/>	<input type="checkbox"/>

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

#5

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1.	Name: Mike Alifano	Title: Bond Oversight Committee Chair	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Phone: [REDACTED]	Email: [REDACTED]		
	Address: [REDACTED]		Pronouns:	
	Signature: [REDACTED]	Date: 08-12-2024	He/His: <input checked="" type="checkbox"/>	<input type="checkbox"/>
			She/Her: <input type="checkbox"/>	<input type="checkbox"/>
			They/Them: <input type="checkbox"/>	
2.	Name:	Title:	<input type="checkbox"/>	<input type="checkbox"/>
	Phone:	Email:		
	Address:		Pronouns:	
	Signature:	Date:	He/His: <input type="checkbox"/>	<input type="checkbox"/>
			She/Her: <input type="checkbox"/>	<input type="checkbox"/>
			They/Them: <input type="checkbox"/>	
3.	Name:	Title:	<input type="checkbox"/>	<input type="checkbox"/>
	Phone:	Email:		
	Address:		Pronouns:	
	Signature:	Date:	He/His: <input type="checkbox"/>	<input type="checkbox"/>
			She/Her: <input type="checkbox"/>	<input type="checkbox"/>
			They/Them: <input type="checkbox"/>	
4.	Name:	Title:	<input type="checkbox"/>	<input type="checkbox"/>
	Phone:	Email:		
	Address:		Pronouns:	
	Signature:	Date:	He/His: <input type="checkbox"/>	<input type="checkbox"/>
			She/Her: <input type="checkbox"/>	<input type="checkbox"/>
			They/Them: <input type="checkbox"/>	
5.	Name:	Title:	<input type="checkbox"/>	<input type="checkbox"/>
	Phone:	Email:		
	Address:		Pronouns:	
	Signature:	Date:	He/His: <input type="checkbox"/>	<input type="checkbox"/>
			She/Her: <input type="checkbox"/>	<input type="checkbox"/>
			They/Them: <input type="checkbox"/>	

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

Cabrillo Unified School District
Argument in Favor of Measure _.

Vote Yes on Measure _ to Improve Our Schools!

Start

As citizens, taxpayers and voters, we recognize the crucial role our local public schools play. They educate our children, prepare them for success, boost local home values and support our businesses. Our schools are the heart of our community.

14
13
12

Today, our local schools—Hatch Elementary, El Granada Elementary, Farallone View Elementary, Kings Mountain Elementary, Cunha Intermediate and Half Moon Bay High—need your support. **Vote YES on Measure _** to improve our schools and strengthen our community.

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Measure _ projects include:

- **Ensuring Safe Accessibility:** Creating greater accessibility in compliance with the Americans with Disabilities Act (ADA) to provide a safe and inclusive learning environment.
- **Improving Classrooms:** Upgrading classrooms to support relevant and engaging learning spaces.
- **Teacher/Staff Housing:** Building below-market rental housing for teachers and staff to make our district more competitive in attracting and retaining highly qualified personnel, while also allowing more educators to live in the communities where they work.
- **Early Childhood Education:** Constructing Early Kindergarten, preschool and afterschool facilities for the best educational start, laying the foundation for lifelong learning.

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Measure _ provides taxpayer safeguards and community benefits:

- **Guaranteed Local Investment:** By law, Measure _ funds cannot be taken by the state and spent elsewhere.
- **Transparency and Accountability:** Public disclosure of ALL spending, independent citizen oversight and annual audits ensure responsible use of funds.

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- **State Matching Funds:** Measure _ qualifies Cabrillo USD for additional state matching funds.
- **Funding Only for School Projects:** Funds cannot be used for administrators' salaries, pensions or benefits.

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Measure _ improves our schools and helps our district remain competitive while protecting taxpayers. Join parents, grandparents, guardians, teachers, neighbors, business owners and community leaders in voting **YES on Measure _ to preserve and protect our community's most valuable assets!**

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— end

Word Count: 293

264

FILED IN THE OFFICE OF THE
CHIEF ELECTIONS OFFICER
OF SAN MATEO COUNTY

AUG 13 2024

MARK CHURCH, Chief Elections Officer
By: [Signature]
DEPUTY CLERK