



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 _____ for the General Presidential 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: <u>Tarra Knotts</u> Phone: [REDACTED] Email: [REDACTED]
<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

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>			Check if the signer is the author of the argument. Authors must be signers.	(FOR OFFICIAL USE ONLY) Staff check once the eligibility of the signer is verified.
1.	Name: Chris Swiedler	Title: Chair, Parcel Oversight Committee		
	Phone: [REDACTED]	Email: [REDACTED]		
	Address: [REDACTED] Pacifica CA		Pronouns:	
	Signature: [REDACTED]	Date: 8/13/2024	He/His: <input checked="" type="checkbox"/>	She/Her: <input type="checkbox"/>
	They/Them: <input type="checkbox"/>			
2.	Name: Suzan Wallace	Title: Realtor, Lifelong resident	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Phone:	Email:		
	Address:		Pronouns:	
	Signature:	Date:	He/His: <input type="checkbox"/>	She/Her: <input type="checkbox"/>
			They/Them: <input type="checkbox"/>	
3.	Name: Tygarjas Bigstyk	Title: Pacifica City Councilmember	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Phone:	Email:		
	Address:		Pronouns:	
	Signature:	Date:	He/His: <input type="checkbox"/>	She/Her: <input type="checkbox"/>
			They/Them: <input type="checkbox"/>	
4.	Name: Rachel Merlo	Title: Local Teacher	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Phone:	Email:		
	Address:		Pronouns:	
	Signature:	Date:	He/His: <input type="checkbox"/>	She/Her: <input type="checkbox"/>
			They/Them: <input type="checkbox"/>	
5.	Name: Tarra Knotts	Title: Former PTO President	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Phone:	Email:		
	Address:		Pronouns:	
	Signature:	Date:	He/His: <input type="checkbox"/>	She/Her: <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.

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1.	Name: Chris Swiedler	Title: Chair, Parcel Oversight Committee	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Phone:	Email:		
Address:			Pronouns:	
Signature:		Date:	He/His: <input type="checkbox"/>	
			She/Her: <input type="checkbox"/>	
			They/Them: <input type="checkbox"/>	
2.	Name: Suzan Wallace	Title: Realtor, Lifelong resident	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	Phone:	Email:		
Address: <i>PACIFICA</i>			Pronouns:	
Signature:		Date: <i>8/13/2024</i>	He/His: <input type="checkbox"/>	
			She/Her: <input checked="" type="checkbox"/>	
			They/Them: <input type="checkbox"/>	
3.	Name: Tygarjas Bigstyc	Title: Pacifica City Councilmember	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	Phone:	Email:		
Address: <i>Pacifica, CA 94044</i>			Pronouns:	
Signature:		Date: <i>8/13/24</i>	He/His: <input checked="" type="checkbox"/>	
			She/Her: <input type="checkbox"/>	
			They/Them: <input type="checkbox"/>	
4.	Name: Rachel Merlo	Title: Local Teacher	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	Phone:	Email:		
Address: <i>Pacifica 94044</i>			Pronouns:	
Signature:		Date: <i>8/13/24</i>	He/His: <input type="checkbox"/>	
			She/Her: <input checked="" type="checkbox"/>	
			They/Them: <input type="checkbox"/>	
5.	Name: Tarra Knotts	Title: Former PTO President	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	Phone:	Email:		
Address: <i>Pacifica CA 94044</i>			Pronouns:	
Signature:		Date:	He/His: <input type="checkbox"/>	
			She/Her: <input checked="" type="checkbox"/>	
			They/Them: <input type="checkbox"/>	

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

Argument in Favor of Measure __.

Voting Yes on __ Protects the Key to Quality Education in Pacifica Schools — Excellent Local Educators.

Having a skilled and dedicated educator in the classroom is the most important element of providing high-quality education. However, Pacifica School District's (PSD) teacher and school staff compensation has not kept pace with the rising cost of living, causing PSD to lose some of their highly-qualified teachers to neighboring districts. Reliable local funding is crucial to ensuring we can attract and retain the best educators.

Unfortunately, Pacifica School District is one of the lowest funded Districts in San Mateo County. If we don't do something to change that soon, we risk losing even more great local teachers and school staff.

That's why we need Measure __.

It will provide a dedicated source of locally controlled funding to prevent painful layoffs and maintain high-quality academic programs, ensuring our students will keep pace with other children across the county.

Vote Yes on __ — Give Local Schools the Tools they Need to Help Our Students Succeed

- Attract and retain qualified teachers, counselors and school staff by providing competitive compensation to account for cost-of-living increases
- Enhance math, history, reading, and writing programs
- Expand hands-on science learning opportunities
- Maintain dedicated literacy instruction to help struggling students read at their grade level

Strict Fiscal Accountability Keeps Every Penny Local

- **Local Funds for Pacifica Schools:** All funds raised stay in local schools and cannot be taken by the State
- **Oversight and Transparency:** A citizens' oversight committee, public spending disclosures, and annual audits will ensure responsible spending
- **Senior Exemption Available:** Homeowners 65 and older are eligible for an exemption

A Yes vote on Measure __ will support Pacifica schools, keep local property values high and ensure our community remains strong.

Please join local parents, teachers, businesses, and community leaders in voting Yes on __!

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