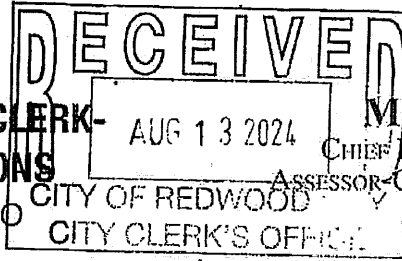




OFFICE OF  
**ASSESSOR-COUNTY CLERK-  
 RECORDER & ELECTIONS**  
 COUNTY OF SAN MATEO



**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 Presidential General 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"/>	<b>The County of San Mateo Board of Supervisors or the Governing Body of a School District or Special District</b>
	Name of Governing Body:
	Contact Person's Printed Name:
	Phone:      Email:
<input checked="" type="checkbox"/>	<b>Member(s) of the County of San Mateo Board of Supervisors or the Governing Body of a School District or Special District</b>
	Name of Governing Body: City of Redwood City City Council
	Contact Person's Printed Name: Chris Sturken
	Phone:      Email:
<input type="checkbox"/>	<b>Bona Fide Association of Citizens</b>
	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 type="checkbox"/>	<b>Individual Voters Eligible to Vote on the Measure</b>
	Contact Person's Printed Name:
	Phone:      Email:
<input type="checkbox"/>	<b>Combination of Voters and Associations</b>
	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**

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.

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.

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

Type information clearly.

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: Alice Kaufman	Title: <i>Parks</i> <del>Press</del> Commissioner	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Phone: [REDACTED]	Email: [REDACTED]		
	[REDACTED] Redwood City, CA 94063		Pronouns:	
		Date: 8/9/24	He/His: <input type="checkbox"/>	
			She/Her: <input checked="" type="checkbox"/>	
			They/Them: <input type="checkbox"/>	
2.	Name: Regina Van Brunt	Title: Business Advocate	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Phone: [REDACTED]	Email: [REDACTED]		
	[REDACTED] Redwood City, CA 94063		Pronouns:	
		Date: 8/9/2024	He/His: <input type="checkbox"/>	
			She/Her: <input checked="" type="checkbox"/>	
			They/Them: <input type="checkbox"/>	
3.	Name: David Kassouf	Title: Small Business Owner	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Phone: [REDACTED]	Email: [REDACTED]		
	[REDACTED] Redwood City, CA 94063		Pronouns:	
		Date: 8/11/24	He/His: <input type="checkbox"/>	
			She/Her: <input type="checkbox"/>	
			They/Them: <input type="checkbox"/>	
4.	Name: Dayna Marr	Title: Small Business Owner	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Phone: [REDACTED]	Email: [REDACTED]		
	[REDACTED] Redwood City, CA 94063		Pronouns:	
	Signature:	Date: 8/11/24	He/His: <input type="checkbox"/>	
			She/Her: <input checked="" type="checkbox"/>	
			They/Them: <input type="checkbox"/>	
5.	Name: Sahlk Khan	Title: Small Business Owner	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Phone: [REDACTED]	Email: [REDACTED]		
	[REDACTED] Redwood City, CA 94063		Pronouns:	
	Signature:	Date: 8/11/24	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.**

**Primary Argument Signers Form**

**Author      Verified**

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

Type information clearly.

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: Regina Van Brunt	Title: Business Advocate	<input type="checkbox"/>	<input type="checkbox"/>
	Ph			
	Ad			
	Signature	Date: August 9 <sup>th</sup> , 2024	Pronouns: He/His: <input type="checkbox"/> She/Her: <input checked="" type="checkbox"/> They/Them: <input type="checkbox"/>	
2.	Name: John Graham-Kyle	Title: Chef Owner at Bottle Shop	<input type="checkbox"/>	<input type="checkbox"/>
	Address: Redwood City CA 94063	Date: Aug 12 <sup>th</sup> 2024	Pronouns: He/His: <input checked="" type="checkbox"/> She/Her: <input type="checkbox"/> They/Them: <input type="checkbox"/>	
3.	Name: Sandra Balsoretti	Title: Head of School - CEO	<input type="checkbox"/>	<input type="checkbox"/>
	Address: Redwood City	Date: 8/12/2024	Pronouns: He/His: <input type="checkbox"/> She/Her: <input checked="" type="checkbox"/> They/Them: <input type="checkbox"/>	
4.	Name:	Title:	<input type="checkbox"/>	<input type="checkbox"/>
	Phone:	Email:		
	Address:		Pronouns: He/His: <input type="checkbox"/> She/Her: <input type="checkbox"/> They/Them: <input type="checkbox"/>	
	Signature:	Date:		
5.	Name:	Title:	<input type="checkbox"/>	<input type="checkbox"/>
	Phone:	Email:		
	Address:		Pronouns: He/His: <input type="checkbox"/> She/Her: <input type="checkbox"/> They/Them: <input type="checkbox"/>	
	Signature:	Date:		

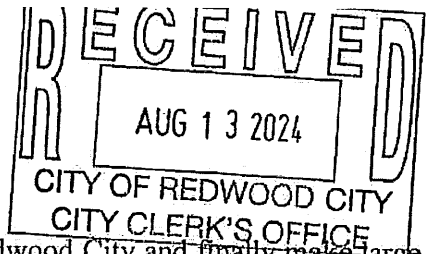
NO NO

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

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.	Name: Zareen Khan	Title: Small Business Owner	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	[Redacted]			
	Address: [Redacted] Redwood City, CA 94063		Pronouns:	
	Signature: [Redacted]	Date: 8/12/24	He/His: <input type="checkbox"/>	She/Her: <input checked="" 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"/>	She/Her: <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"/>	She/Her: <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"/>	She/Her: <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"/>	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.

CITY OF REDWOOD CITY  
ARGUMENT IN FAVOR OF MEASURE



START

Vote **YES** on Measure \_\_\_ to **LOWER TAXES** for small businesses in Redwood City and finally make large businesses and corporations **PAY THEIR FAIR SHARE** to fund critical local services and maintain our quality of life. Measure \_\_\_ **does not increase taxes for Redwood City residents.** 10

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16  
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Redwood City's current business license tax structure forces small, locally owned businesses to pay much higher tax rates compared to wealthier businesses, such as large corporations. We've allowed this injustice to go on for too long. 2

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Redwood City voters can END this unfairness by voting YES on 11

**YES** on \_\_\_ modernizes our decades old and outdated business license tax structure, to meet our community's needs today. Measure \_\_\_ ensures **Redwood City's large, wealthy businesses pay their fair share for the local services they use every day.** 5 6

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**YES** on \_\_\_ keeps us safe by maintaining 911 emergency response times, crime prevention, neighborhood police patrols, and on-duty firefighters, paramedics, and police officers. 9

16  
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24  
12

Vote **YES** on \_\_\_ to fix potholes and repair streets and sidewalks. 12

**YES** on \_\_\_ helps reduce flooding, water pollution, maintains storm drains, and maintains our local parks, open spaces, and sports fields. 4

17  
21

Measure \_\_\_ **does NOT tax childcare providers.** 6

Measure \_\_\_ **does NOT increase taxes on rental housing units.** 9

15

Measure \_\_\_ continues Redwood City's high standards for **FISCAL ACCOUNTABILITY** and transparency with annual independent financial audits and yearly reports to the community to ensure funds are spent for community priorities. 2

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Measure \_\_\_ gives our community **LOCAL CONTROL** over local funds. Sacramento politicians **CANNOT** touch a penny of Measure \_\_\_ funds. By law, **ALL** funds must be spent in Redwood City for local needs, allowing us to maintain our quality of life. 7

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19  
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Join Redwood City small business owners, firefighters, police officers, neighborhood leaders, and a unanimous City Council in voting **YES** on \_\_\_ - protect our small businesses and our quality of life! 15

13

For official information about Measure \_\_\_: [www.RedwoodCity.org](http://www.RedwoodCity.org)

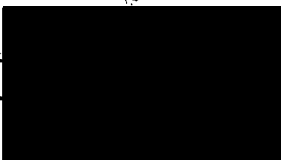
67 END

34

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

AUG 13 2024

MARK CH  
By: \_\_\_\_\_



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279