



## Ballot Measure Primary Argument Submission Form

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AUG 19 2016  
BELMONT CITY CLERK

A ballot 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 Primary Arguments = 300

Ballot Measure 'I' for the City of Belmont to be held on Nov. 8th 2016.

Primary Argument in Favor of  Primary Argument Against

This argument is submitted by: (check all that apply)

**The Legislative Body of the City of Belmont**  
If this argument is filed by the legislative body of the City of Belmont, fill in the name of the governing body below and fill in both sides of this form

Legislative Body:

Contact Person's Printed Name:

Contact Person's Signature:

Title:

Phone:

Email:

**Member(s) of the Legislative Body of the City of Belmont**  
If this argument is filed by any member(s) of the legislative body, fill in the information below and complete both sides of this form.

Member(s) of the Legislative Body:

City of Belmont

Name of Legislative Body:

Belmont City Council

Contact Person's Printed Name:

DONNA KIM

Title:

Council Member

If this argument is filed by a bona fide association of citizens/organization, the signers of the argument must be affiliated with the association/organization, be authorized to sign the argument on its behalf, provide the printed name and signature of at least one principal officer of the organization, and complete both sides of this form.

Name of Association/Organization:

Principal Officer's Printed Name and Title:

Principal Officer's Signature:

Contact Person's Printed Name:

Email:

Phone:

Fax:

**Individual(s) eligible to vote on the measure**

Individual signers must be eligible to vote on the measure.

Contact Person:

Phone:

Mailing Address:

Fax:

Email:

Please complete the reverse side of this form.

**Primary 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, there is no requirement that they be eligible to vote on the measure. However, 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.

Legislative Body of the City of Belmont	Member(s) of the Legislative Body of the City of Belmont	Bona Fide Association of Citizens/Organization	Individual(s) eligible to vote on the measure
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1.	Name: <i>Eric Reed</i>	Title: <i>Mayor City of Belmont</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
[Redacted]		Date: <i>8/17/16</i>				
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:				

NEXT PAGE

**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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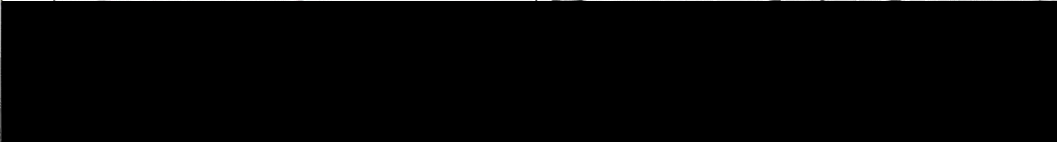
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2. 1. Name: JOHN VIOLET Title: BELMONT CITY TREASURER

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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Sig: [Redacted] Date: August 18, 2016

2. Name: [Redacted] Title:

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Phone: Email:

Address:

Signature: Date:

3. Name: Title:

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Phone: Email:

Address:

Signature: Date:

4. Name: Title:

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Phone: Email:

Address:

Signature: Date:

5. Name: Title:

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Phone: Email:

Address:

Signature: Date:

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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. 1. Name: NELSON, CONTEMPORARY TUNING OF PASTORAL...  
 Title: Belmont Heights Civic Improvement Association  
 Date: 08-18-2016

2. Name: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Signature: \_\_\_\_\_  
 Date: \_\_\_\_\_

3. Name: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Signature: \_\_\_\_\_  
 Date: \_\_\_\_\_

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4 1. Name: Ulla G. Foehr Title: Parks and Recreation Vice Chair

Date: 8/18/16

2. Name: [Redacted] Title: [Redacted]

Phone: [Redacted] Email: [Redacted]

Address: [Redacted]

Signature: [Redacted] Date: [Redacted]

3. Name: [Redacted] Title: [Redacted]

Phone: [Redacted] Email: [Redacted]

Address: [Redacted]

Signature: [Redacted] Date: [Redacted]

4. Name: [Redacted] Title: [Redacted]

Phone: [Redacted] Email: [Redacted]

Address: [Redacted]

Signature: [Redacted] Date: [Redacted]

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1. Name: **ALAN SARVER** Title: **PRESIDENT, SEQUOIA UNION HIGH SCHOOL DISTRICT BOARD OF TRUSTEES**

[Redacted Address]

Date: **8/18/16**

2. Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

3. Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

4. Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

5. Name: \_\_\_\_\_ Title: \_\_\_\_\_

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Address: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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## **ARGUMENT IN FAVOR OF MEASURE I**

Protect our LOCAL services. Vote **“YES” on I!**

Belmont is a special place to live with an amazing quality of life, but our infrastructure is deteriorating. Belmont’s streets are ranked worst in the County and in the bottom 8% in the Bay Area. Vote **YES on I.**

Belmont’s 50-year old storm drain system is inadequate, flooding and damaging our roads during major storms. Some neighborhoods don’t even have storm drains. Vote **YES on I.**

**YES on I** keeps your taxpayer dollars LOCAL to fund OUR needs and priorities such as:

**YES on I.** Fixing potholes and repairing the worst of our 69 miles of crumbling streets and sidewalks.

**YES on I.** Repairing deteriorated storm drains, protecting the environment and water quality by reducing runoff.

**YES on I.** Maintaining 911 emergency response times.

**YES on I.** Maintaining the quality of life services we all expect and deserve.

**YES on I** provides a reliable source of local funding to address badly-needed infrastructure repairs now, before they become even more expensive in the future.

**YES on I** helps ensure that visitors who add wear and tear to our roads will share the cost.

Sacramento has a history of taking Belmont revenues. By law, every penny of Measure I must be spent on our LOCAL needs, and cannot be taken by Sacramento politicians.

Here’s what Measure I won’t do:

Measure I is NOT a tax on your home or property.

Measure I is NOT applied to food purchased as groceries or prescription medications.

Measure I includes strong fiscal accountability provisions including a Citizens’ Committee to review and report on expenditures and mandatory annual independent Financial Audits by a certified public accountant to ensure funds are spent responsibly as promised.

Join a unanimous City Council, Mayor and your neighbors. Vote **“YES” on I!**

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AUG 19 2016

BELMONT CITY CLERK

Primary Argument Signers:

1. Eric Reed, Mayor
2. John Violet, Belmont City Treasurer
3. Nelson Corteway, Immediate Past President, Belmont Heights Civic Improvement Assoc.
4. Ulla Foehr, Parks and Recreation Vice Chair
5. Alan Sarver, President, Sequoia Union High School District Board of Trustees