Unlike the author of the argument against Measure B, we believe that providing a strong public education to all 3,324 Coastside elementary, middle and high school students is a top community priority. That is why we are voting Yes on B.

This ideologue—who blindly opposes every school measure in all of San Mateo County—) doesn't live on the Coastside and simply doesn't understand the facts.

Without increasing taxes by a single penny, we can continue to improve education for local students by voting Yes on B. Measure B shields our schools from the instability of the state budget situation by continuing a vital, stable source of funding—money that stays in our Coastside schools and cannot be taken away by the State.

Measure B simply renews an existing source of funding for our schools, which will otherwise expire. With over a 70% Yes vote, Coastside voters approved this funding for our schools in 2010. Without it, cuts to core academic programs are inevitable.

## Measure B prioritizes strong education in the classroom for all students by:

- Preserving strong academic reading, writing, math and science programs
- · Retaining qualified teachers and staff
- Protecting programs to keep struggling students on the right track
- Maintaining and supporting classroom technology
- Keeping all District schools open

By law, no funds can be used for administrators' salaries. Citizen oversight and annual audits are required.

Good schools benefit all of us. By keeping our schools strong, we keep our community strong.

Join us: vote Yes on B.

247

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





## **Ballot Measure Argument Rebuttal Submission Form**

If both an argument in favor of <u>and</u> 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 for the CABILIUNINE SCHOOL to be held on JUNE 3, 2014									
☐ Rebuttal to Argument in Favor of Measure ☐ 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 <u>anyone</u> 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: M LE ALIFAND Phone:									
Mailing Address  Fax:									

No more than five signatures and 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 significant 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.  In the mer.  The main Para Para Para Para Para Para Para Par	Rebuttal Argumen	t Signers Form				must designa ning. Check tl		
Date:    Date:	signatures are submit Names and titles listed if the signers are partindividual(s), the title association/organizal association/organizal By signing below, the	itted, the first five listed ed will be printed in the t of a bona fide associat e under the signer's nam tion and may include th tion. e undersigned state that	shall be printed. order that they are ion/organization, f ne shall list the nam eir position within	e listed below. or each such signing ne of that bona fide that	Special	ember of the Governing Body of in Mateo County, a School District, a Special District	ona Fide Association of tizens/Organization	dividual
Date:    Marcel   9, 20   4	1 Name:	<del>-</del>	Title:			Z % 2	A 5	=
Name:   Date:   Data	P John	M Palsons	Date:		/ 144	oon Ba		
Title:  Phone:  Email:  Address:  Signature:  Date:  Address:  Signature:  Date:  Date:  Signature:  Date:  Date:  Signature:  Date:  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	<b>47 7</b> 1	BELMONTE	Title: HATCH ELEM	TEATARY SCHOOL				
Address:    Signature:	Ż	-		24,2014				
Signature:   Date:	Phone:		Email:					
Address:  Signature: Date:  5. Name: Title:  Email:  Submit a second form (this side only) for alternate signers attached to this form and the argument.  FOR OFFICIAL USE ONLY  Signers  Title:  Date:  Date:  Submit a second form (this side only) for alternate signers attached to this form and the argument.  FOR OFFICIAL USE ONLY  Signers  Dated	Address:							
4.   Phone:   Email:	Signature:		Date:					
Address:    Signature:	4. Name:		Title:					
Signature:  Date:  5. Name:  Title:  Phone:  Email:  Address:  Signature:  Date:  Date:  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	Phone:		Email:					
Signature:   Date:   Date:   FOR OFFICIAL USE ONLY   Signed   Dated	Address:						F	
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 Registered N/A Signed Dated	Signature:		Date:	·				
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  Registered  N/A  Signed  Dated	5. Name:		Title:					
Signature:  Date:  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	Phone:		Email:					
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	Address:							
FOR OFFICIAL USE ONLY Signers Registered N/A Signed Dated	Signature:		Date:					
FOR OFFICIAL USE ONLY Signers Registered N/A Signed Dated	Submit a sec	cond form (this side o	nly) for alternate	signers attached	to this form a	nd the a	gument	•
		<b>-</b>						
Polic ( de Association   11 formed   17 A Signed Dated	Signers  Bona Fide Association	☐ Registered☐ Verified	N/A N/A	Signed Signed				

Rebuttal Argument Signers Form						they are signing. Check the <u>one</u> box that applies.				
signatures Names and If the signe individual(s association association By signing	are submitted, the littles listed will be rs are part of a bos, the title under the lorganization and lorganization.		II be printed. er that they are I organization, for hall list the name position within th	isted below. each such signing of that bona fide	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		
1. Name:	155A R	E'Y PAI	LENT OF 3 CABMI	a united scrool dis	THEOT			X		
		Da	Morch 2	77, 2014						
		Tit	e: ail:	,						
Phone: Address:		E40	idii.							
Signature:		Da	te:							
3. Name:	*,	Tit	e:							
Phone: Address:		Err	ail:							
Signature:		Da	te:							
4. Name:		Tit	le:							
Phone:		Em	nail:							
Address:										
Signature:			te:	-						
5. Name:	· <del></del>	Tit	le:							
Phone:		E	<u>-</u>		_					
Signature:		Da	ite:							
Sul	omit a second fo	rm (this side only	) for alternate s	igners attached t	o this form a	nd the a	rgument			
			FOR OFFICIAL L	SE ONLY						
Signers  Bona Fide Asse	ociation	<ul><li>☐ Registered</li><li>☐ Verified</li></ul>	N/A N/A	Signed Signed		ited ited				

Rebuttal Argument Si	gners Form			they are sign	ning. Check th	ie <u>one</u> box tł	at
signatures are submitte Names and titles listed was lift the signers are part of individual(s), the title urassociation/organization association/organization	ndersigned state that they	be printed. In that they are lise organization, for each list the name consistion within that	ted below. each such signing f that bona fide t	ing Body of San Mateo , a School District, or a Special	Member of the Governing Body of San Mateo County, a School District, or a Special District	Bona Fide Association of Citizens/Organization	Individual
1. Name: DIA BLEI	CSOE FOF YACKM Email	10 COXST COMMI 1: 3 2+ 14	NITY COUNCIL	ENNER	1942-199	#	V
Phone:  Address:  Signature:	# (/ Title:	l:					
3. Name: Phone: Address: Signature:	Title Emai	il:					
4. Name: Phone: Address: Signature:	Title Ema	il:					
5. Name: Phone: Address: Signature:	Title Ema	il:					
Submit a secor	nd form (this side only)			this form a	nd the a	rgument	
Signers Bona Fide Association	☐ Registered	FOR OFFICIAL US N/A N/A	E ONLY Signed Signed		ated ated		

Rebuttal Argument Si	gners Form			they are sig applies.	must designa ning. Check th		
No more than five signal signatures are submitted Names and titles listed of the signers are part of individual(s), the title ur association/organization association/organization By signing below, the urit not to be false or misl	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			
1. Name: PATRICE	C J. RyAN H	e: alf Moon Ban	Realtor				7
	Da	d.					
	Tit						
Phone:	Em	ail:					
Address:							
Signature:	Da	te:	-				
3. Name:	Tit	le:					
Phone:	Err	ail:					
Address:							
Signature:	Da	te:					
4. Name:	Tit	le:					
Phone:	En	nail:	<u></u>				
Address:							
Signature:	Da	te:					
5. Name:	Tit	le:					
Phone:	En	nail:	<u>.                                    </u>				
Address:		<u> </u>					
Signature:	Da	ite:					
Submit a secor	nd form (this side only			this form	and the a	rgumen	t.
Single	Registered	FOR OFFICIAL U	SE ONLY Signed	n	ated		
Signers  Bonn Fide Association		•	•		ated		
Bona Fide Association	☐ Verified	N/A	Signed	D	ated		