



Ballot Measure Primary Argument Submission Form

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. If the measure is presented to voters pursuant to an initiative petition in a special district election, please contact the Elections Office for special instructions.

Word count limit for Primary Arguments = 300

Ballot Measure U for the General Election to be held on November 3, 2015.

Primary Argument in Favor of Primary Argument Against

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

| | | |
|--------------------------|---|-----------------------------|
| <input type="checkbox"/> | The Governing Body of the County of San Mateo, a School District, or a Special District | |
| | If this argument is filed by the governing body of the County of San Mateo, a school district or a special district, fill in the name of the governing body on the line below and complete both sides of this form. | |
| | Governing Body: | |
| | Contact Person's Printed Name: | Contact Person's Signature: |
| | Title: | |
| | Phone: | Email: |

| | | |
|--------------------------|---|-----------------------------|
| <input type="checkbox"/> | Member(s) of the Governing Body of the County of San Mateo, a School District, or a Special District | |
| | If this argument is filed by any member(s) of the governing body, fill in the information below and complete both sides of this form. By statute, members of school district governing boards need board authorization to file an argument. | |
| | Member(s) of the Governing Body: | Name of Governing Body: |
| | Contact Person's Printed Name: | Contact Person's Signature: |
| | Title: | |
| | Phone: | Email: |

| | | |
|--------------------------|--|--------------------------------|
| <input type="checkbox"/> | Bona Fide Association of Citizens/Organization | |
| | 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: |

| | | |
|-------------------------------------|---|--|
| <input checked="" type="checkbox"/> | Individual(s) eligible to vote on the measure | |
| | Individual signers must be eligible to vote on the measure. | |
| | Contact Person: | |
| | <u>CAROL BONNER</u> | |

Please complete the reverse side of this form.

Each signer must designate in which capacity they are signing. Check the one box that applies.

Primary Argument Signers Form

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.

| | | | |
|--|---|--|---|
| Governing Body of San Mateo County, a School District, or a Special District | Member(s) of the Governing Body of San Mateo County, a School District, or a Special District | Bona Fide Association of Citizens/Organization | Individual(s) eligible to vote on the measure |
|--|---|--|---|

1. Name: CAROL BONNER Title: CITY CLERK

Phone: [Redacted] Email: [Redacted]

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

2. Name: JIM RUANE Title: MAYOR, CITY OF SAN BRAVO

Phone: [Redacted] Email: [Redacted]

| | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|--------------------------|--------------------------|

3. Name: Michael Salazar Title: Vice Mayor

Phone: [Redacted] Email: [Redacted]

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

4. Name: IRENE D'CONNELL Title: Council Member

Phone: [Redacted] Email: [Redacted]

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

5. Name: _____ Title: _____

Phone: _____ Email: _____

Address: _____

Signature: _____ Date: _____

| | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|--------------------------|--------------------------|

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 |

ARGUMENT IN FAVOR OF MEASURE U

A yes vote on **Measure U** ensures that the selection of the City Clerk for the City of San Bruno be based on qualifications and experience, not the results of a political campaign. As current City Clerk, I endorse this measure.

Elections should be for policy makers. The Clerk position is administrative in nature and mostly directed by statute. The needs of the community have grown and the complexity of the Clerk's position have increased since our first elected City Clerk took office 100 years ago, yet the elected qualifications remain the same – eighteen years of age and a registered voter in San Bruno.

The person who would fill this role needs to have professional skills and expertise in elections, political practices law, open meeting laws, records retention, conflict-of-interest regulations and contract practices. They need to be conversant with state and local statutes and ordinances.

In the vast majority of California cities, the City Clerk is an appointed position subject to the same evaluation and hiring practices as with other city employees. A **YES** vote would bring our City in line with the modern practices of other cities. It would assure that the position of City Clerk is filled by someone with the experience and qualifications necessary for the job. Not having a qualified City Clerk could put the City in legal jeopardy in many areas.

As the City Clerk, I am committed to quality local government and ask you to join me and other civic leaders in voting Yes on Measure U.

Dated: August 14, 2015

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

AUG 14 2015

