

Argument in Favor of Measure A

Vote Yes on A to continue providing a high quality education for neighborhood high school students.

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Our high schools build strong educational foundations in core academic subject areas and develop career and technical skills that set students on a path to future success in college and 21st-century careers.

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To ensure that our local high schools continue offering a challenging, varied, and top-quality curriculum as student enrollment grows, Measure A is critical now.

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Our high-performing high schools have drawn families to our communities, causing a surge in student enrollment. Student enrollment has increased by 20 percent over the last 12 years and is projected to grow by another 20 percent in the next 7 years.

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To meet the growing demand for science classes and college requirements in core academic subjects as student enrollment increases, our schools require additional science labs and classrooms.

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Measure A will avoid school overcrowding, help protect our high schools' diverse curriculum, and ensure students can enroll in the classes they require.

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Vote Yes on A to provide additional classrooms and labs, as well as updated technology, to continue excellent academic programs as student enrollment grows, including:

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- Science, math, and other core academics
- Career training and vocational programs
- Advanced programs that prepare students for college and careers
- Technology training for 21st-century skills

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Measure A Requires Fiscal Accountability

- Measure A funds benefit all local high schools and cannot be taken by the state
- By law, no funds can be used for administrators' salaries
- Measure A qualifies our high schools for future state matching funds
- Citizen oversight and annual audits are required, ensuring all funds are used for voter-approved purposes

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Join parents, teachers, and community leaders: vote Yes on A to prepare local graduates to excel in college and our competitive economy.

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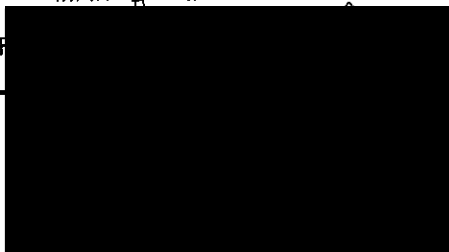
GreatSequoiaHighSchools.org

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

MAR 13 2014

MAF
By -



298



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 A for the Sequoia Union High School District to be held on June 3, 2014.

Primary Argument in Favor of Primary Argument Against

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

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: _____

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: _____

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: _____

Individual(s) eligible to vote on the measure
 Individual signers must be eligible to vote on the measure.

Contact Person: Julia Horak Phone: [REDACTED]

Mailing Address: [REDACTED]

Fax: [REDACTED]

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.

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
A

1.	Name: <i>Alicia Aguirre</i>	Title: <i>Former RWC Mayor - Council Mbr</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Phone: [Redacted]					
	Address: [Redacted]					
	Signature: [Redacted]	Date: <i>3/6/14</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:				

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

Bona Fide Association Verified N/A Signed Dated

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2
A

1.	Name: JOHN R. VIOLET	Title: BELMONT CITY TREASURER	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Phone:	Email:				
	Address:					
	Signature:	Date: MARCH 8, 2014				
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:				
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3/1	Name: <i>Linda Teutschel</i>	Title: <i>San Carlos S.C./Citizen of the Year</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Phone: [REDACTED]					
	Address: [REDACTED]					
	Signature: [REDACTED]	Date: <i>3/13/14</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"/>
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	Signature:	Date:				
5.	Name:	Title:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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A

1.	Name: Deborah Stipek	Title: Dean, Graduate School of Education	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	[Redacted]	Email: Stanford				
	[Redacted]	Date: 3-12-14				
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:				
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	Signature:	Date:				
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5

A

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1.	Name: STEVE WESTLY Title: FORMER SR V.P. @ BAY District Alumnus Sequoia Union High School FARMER CONTROLLER/CHIEF FISHER	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Phone: [REDACTED]					
Address: [REDACTED]					
Signature: [REDACTED]					
Date: 9/10/14					
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: _____					

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Bona Fide Association	<input type="checkbox"/> Verified	N/A	Signed	Dated