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 M for the **Ghil'ee Unified School District** to be held on ________________

☑ 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.

**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:** [Redacted]

**Phone:** [Redacted]

**Mailing Address:** [Redacted]

**Fax:** [Redacted]

**Email:** [Redacted]

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.org web www.smcacre.org
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.

<table>
<thead>
<tr>
<th>Name:</th>
<th>Title:</th>
</tr>
</thead>
<tbody>
<tr>
<td>LENNY MENOUNCA</td>
<td>LOCAL BUSINESS OWNER</td>
</tr>
</tbody>
</table>

Phone: [Redacted]

Address: [Redacted]

Signature: [Redacted]

Date: 3/16/18

Submit a second form (this side only) for alternate signers attached to this form and the argument.
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<table>
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<tr>
<th>Name</th>
<th>Title</th>
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<tbody>
<tr>
<td>Naomi Patridge</td>
<td>Term Half Moon Bay Mayor</td>
</tr>
<tr>
<td>Sandra Andreini</td>
<td>Local Business Owner</td>
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signature of at least one of its principal officers. If the measure is presented to voters pursuant to an
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Word count limit for Primary Arguments = 300

Ballot Measure _______________ for the _______________ to be held on __________.

☐ 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: ___________________________

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   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: ___________________________
   Mailing Address: ___________________________
   Fax: ___________________________ Email: ___________________________

Please complete the reverse side of this form.

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<tr>
<th>1.</th>
<th>Name:</th>
<th>Title:</th>
<th>Governing Body of San Mateo County Special District</th>
<th>Membership of the Governing Body of a Special School District</th>
<th>Bona Fide Association of Citizens/Organization</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Jan Gray</td>
<td>44 Year Coastside Resident</td>
<td>[ ]</td>
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<tr>
<td></td>
<td></td>
<td>14911 Via Nouveau</td>
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</tr>
<tr>
<td></td>
<td></td>
<td>Half Moon Bay, CA 94019</td>
<td>Date: 3/12/18</td>
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<th>2.</th>
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FOR OFFICIAL USE ONLY

Signers | Registered | N/A | Signed | Dated |
Bona Fide Association | Verified | N/A | Signed | Dated |
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- Primary Argument in Favor of □
- Primary Argument Against □

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

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    - Contact Person’s Printed Name: ________________________
    - Contact Person’s Signature: ________________________
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    - Principal Officer’s Signature: ________________________
    - Contact Person’s Printed Name: ________________________
    - Contact Person’s Signature: ________________________
    - Phone: ________________________
    - Email: ________________________
    - Fax: ________________________

- Individual(s) eligible to vote on the measure
  - Individual signers must be eligible to vote on the measure.
    - Contact Person: ________________________
    - Mailing Address: ________________________
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<th>Bona Fide Association of Citizen's Organization</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>John M Parsons</td>
<td>Certified Public Accountant</td>
<td></td>
<td>✅</td>
</tr>
<tr>
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Submit a second form (this side only) for alternate signers attached to this form and the argument.
Argument in Favor of Measure M

Vote YES on Measure M to repair and improve our aging local elementary, middle and high schools and ensure all Coastside students receive a 21st-century education.

While some of our schools in Cabrillo Unified School District have been updated, many are over 50 years old and in serious need of repairs and updates to meet today's academic and safety standards.

Measure M will provide a dedicated local source of funding to support a safe and modern learning environment for our elementary and middle school students.

Providing a high-quality education relies on excellent teachers and staff, and Measure M will ensure all schools have updated classrooms, science labs, computer and learning technology to attract the best teachers to our community. We need Measure M to help prepare our students for success in college and their future careers.

Vote YES on Measure M to:
- Replace leaky roofs
- Keep schools clean, well maintained and in good condition
- Perform essential safety repairs and maintenance on classrooms and facilities
- Update classrooms and science labs
- Upgrade fire and earthquake safety
- Equip classrooms with 21st-century learning technology

Measure M requires strict fiscal accountability:
- Local control ensures every penny of Measure M goes directly to local classrooms and school facilities - no money could be taken by the State
- Independent citizen oversight and annual audits are required
- No funding could ever be used for administrators' salaries or pensions

We are fortunate to live in an area that supports our Coastside schools, helping keep our community a desirable place to live. Even if you do not have school-age children, protecting the quality of our schools and the quality of life in our community is a wise investment that helps keep our property values strong.

Join parents, teachers and community leaders in the Coastside community in supporting our great local schools – vote YES on M.