



OFFICE OF
**ASSESSOR-COUNTY CLERK-
 RECORDER & ELECTIONS**
 COUNTY OF SAN MATEO

MARK CHURCH
 CHIEF ELECTIONS OFFICER &
 ASSESSOR-COUNTY CLERK-RECORDER

Ballot Measure Primary Argument Submission Form

A ballot argument will not be accepted unless accompanied by this completed **typed** 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, the name of the association and the printed name and signature of at least one of its principal officers. **Please make sure you are using proper format before submitting to the Elections Office.**

Word count limit for Primary Arguments = 300 words

Ballot Measure _____ for the General Election _____ to be held on November 5, 2024.

Primary Argument in Favor of Primary Argument Against

This argument is submitted by (check ONLY ONE):

<input checked="" type="checkbox"/>	The City of San Bruno City Council
	Name of Governing Body: San Bruno City Council
	Contact Person's Printed Name: Michael Salazar
	Phone: [REDACTED] Email: [REDACTED]
<input type="checkbox"/>	Member(s) of the City of San Bruno City Council
	Name of Governing Body:
	Contact Person's Printed Name:
	Phone: Email:
<input type="checkbox"/>	Bona Fide Association of Citizens
	If this argument is filed by a bona fide association of citizens, the signers of the argument must be affiliated with the association and be authorized to sign the argument on its behalf. Provide the printed name and signature of at least one principal officer of the association.
	Name of Association:
	Contact Person's Printed Name:
	Phone: Email:
<input type="checkbox"/>	Individual Voters Eligible to Vote on the Measure
	Contact Person's Printed Name:
	Phone: Email:
<input type="checkbox"/>	Combination of Voters and Associations
	Contact Person's Printed Name:
	Phone: Email:

Arguments will be emailed to the contact person listed here for review before they are printed in the Sample Ballot & Official Voter Information Pamphlets.

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.gov web www.smcacre.gov

Primary Argument Signers Form			Author	Verified
<p>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. Place a checkmark in the author column if the signer is the author of the argument. A signer can only list one title. Honorifics such as M.D., Dr., Esquire, etc. with a name are not accepted.</p> <p>If the signers are part of a bona fide association, there is no requirement that they be eligible to vote on the measure. However, for each such signing individual, the title under the signer's name must list the name of that bona fide association and may include their position within that association.</p> <p>By signing below, the undersigned state that they have read the argument and believe it not to be false or misleading.</p> <p>Type information clearly.</p>			<p>Check if the signer is the author of the argument. Authors must be signers.</p>	<p>(FOR OFFICIAL USE ONLY) Staff check once the eligibility of the signer is verified.</p>
1.	Name: Rico Medina	Title: Mayor, City of San Bruno	<input type="checkbox"/>	<input type="checkbox"/>
	Phone: [REDACTED]	Email: [REDACTED]		
	Address: [REDACTED]		Pronouns:	
	Signature: [REDACTED]	Date: 8/13/2024	He/His: <input type="checkbox"/>	
			She/Her: <input type="checkbox"/>	
			They/Them: <input type="checkbox"/>	
2.	Name: Michael Salazar	Title: Vice Mayor, City of San Bruno	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Phone: [REDACTED]	Email: [REDACTED]		
	Address: [REDACTED]		Pronouns:	
	Signature: [REDACTED]	Date: 8/13/2024	He/His: <input checked="" type="checkbox"/>	
			She/Her: <input type="checkbox"/>	
			They/Them: <input type="checkbox"/>	
3.	Name: Sandy Alvarez	Title: Councilmember, City of San Bruno	<input type="checkbox"/>	<input type="checkbox"/>
	Phone: [REDACTED]	Email: [REDACTED]		
	Address: [REDACTED]		Pronouns:	
	Signature: [REDACTED]	Date: 8/9/2024	He/His: <input type="checkbox"/>	
			She/Her: <input checked="" type="checkbox"/>	
			They/Them: <input type="checkbox"/>	
4.	Name: Tom Hamilton	Title: Councilmember, City of San Bruno	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Phone: [REDACTED]	Email: [REDACTED]		
	Address: [REDACTED]		Pronouns:	
	Signature: [REDACTED]	Date: 8/9/2024	He/His: <input checked="" type="checkbox"/>	
			She/Her: <input type="checkbox"/>	
			They/Them: <input type="checkbox"/>	
5.	Name: Marty Medina	Title: Councilmember, City of San Bruno	<input type="checkbox"/>	<input type="checkbox"/>
	Phone: [REDACTED]	Email: [REDACTED]		
	Address: [REDACTED]		Pronouns:	
	Signature: [REDACTED]	Date: 8/9/24	He/His: <input checked="" type="checkbox"/>	
			She/Her: <input checked="" type="checkbox"/>	
			They/Them: <input type="checkbox"/>	

Submit a second form (this side only) for alternate signers attached to this form and the argument.

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1.	Name: Jim Ruane	Title: Former San Bruno Mayor	<input type="checkbox"/>	<input type="checkbox"/>
	Phone: [REDACTED]	Email: [REDACTED]		
	Address: [REDACTED]		Pronouns:	
	Signature: [REDACTED]	Date: 08/13/2024	He/His:	<input type="checkbox"/>
			She/Her:	<input type="checkbox"/>
			They/Them:	<input type="checkbox"/>
2.	Name: John Marty	Title: Former San Bruno Treasurer	<input type="checkbox"/>	<input type="checkbox"/>
	Phone: [REDACTED]	Email: [REDACTED]		
	Address: [REDACTED]		Pronouns:	
	Signature: [REDACTED]	Date: 8/13/24	He/His:	<input checked="" type="checkbox"/>
			She/Her:	<input type="checkbox"/>
			They/Them:	<input type="checkbox"/>
3.	Name:	Title:	<input type="checkbox"/>	<input type="checkbox"/>
	Phone:	Email:		
	Address:		Pronouns:	
	Signature:	Date:	He/His:	<input type="checkbox"/>
			She/Her:	<input type="checkbox"/>
			They/Them:	<input type="checkbox"/>
4.	Name:	Title:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Phone:	Email:		
	Address:		Pronouns:	
	Signature:	Date:	He/His:	<input type="checkbox"/>
			She/Her:	<input type="checkbox"/>
			They/Them:	<input type="checkbox"/>
5.	Name:	Title:	<input type="checkbox"/>	<input type="checkbox"/>
	Phone:	Email:		
	Address:		Pronouns:	
	Signature:	Date:	He/His:	<input type="checkbox"/>
			She/Her:	<input type="checkbox"/>
			They/Them:	<input type="checkbox"/>

Submit a second form (this side only) for alternate signers attached to this form and the argument.

Argument in Favor of Measure ___

Our community faces critical infrastructure challenges that demand our immediate attention. Despite our efforts to reduce overall costs, including eliminating non-essential functions and services and reducing staffing costs, we need to raise additional funding to address these specific urgent needs. This measure provides essential funding exclusively for:

- **Storm-Drains and Flooding:** Our storm drains are over 100 years old, putting us at risk of failure, flooding, and water pollution.
- **Potholes and Streets:** Our roads are deteriorating, causing damage to vehicles and hindering emergency response. Measure G has provided additional dedicated funding for streets, but it is not enough to address the full need.
- **Fire Stations and Safety:** Our aging fire stations are at risk of failure in earthquakes and natural disasters. Upgrading them is crucial for maintaining our readiness.

The bonds can generate up to \$3.3 million annually. No funds will go to administrators, and the State of California cannot touch this money. A citizen oversight committee will ensure transparency and accountability. This measure is supported by a broad coalition of city leaders and residents.

It's time to invest in our future. Vote YES for a safer, more resilient San Bruno.

RECEIVED

AUG 13 2024

CITY CLERK'S OFFICE