



# County of Santa Clara Office of the Registrar of Voters

## Ballot Measure Argument Form

Office Use Only	
<p>This <b>Ballot Measure Argument Form</b> must be submitted for every ballot primary argument and rebuttal argument, with required signatures and author information. The County of Santa Clara Office of the Registrar of Voters allows electronic submission of documents if the scanned copy is clear and readable. You may email your completed form and attach the argument in Microsoft Word version to <a href="mailto:candidateservices@rov.sccgov.org">candidateservices@rov.sccgov.org</a>. Any errors will be printed on the County Voter Information Guide and/or ballot exactly as submitted. A proof will be sent to the primary filer for confirmation that it matches the argument as submitted—no other corrections will be accepted.</p>	Time/Date Stamp
Date of Election: _____	
Primary Argument due date (E-84): _____ Examination Period (E-83 to E-74): _____	
Rebuttal Argument due date (E-77): _____ Examination Period (E-76 to E-67): _____	
SECTION 1: ARGUMENT INFORMATION	
Measure Letter _____ (if available) – letters will be assigned after 5:00 p.m. on E-88: _____	
Select Who You are, and Which Argument You Are Submitting	
Proponent:	Opponent:
<input type="checkbox"/> Primary Argument in Favor	<input type="checkbox"/> Primary Argument Against
<input type="checkbox"/> Rebuttal Argument to Primary Argument Against	<input type="checkbox"/> Rebuttal Argument to Primary Argument in Favor

**SECTION 2: AUTHOR INFORMATION**

**Declaration Related to Proponent / Opponent Primary and Rebuttal Arguments**  
(Elections Code §§ 9161, 9164, 9167, 9170, 9501, 9501.5, 9504, 9600)

**Please Select the Correct Line**

- I am an Author of the Proponent Argument (noted above) for Measure \_\_\_\_\_ being submitted. I support this measure.
- I am an Author of the Opponent Argument (noted above) for Measure \_\_\_\_\_ being submitted. I oppose this measure.

For any argument (primary or rebuttal) submitted on behalf of an organization or bona fide association of citizens, the "Argument Signer Form" in Section 3 below must be completed by a principal officer of the organization or bona fide association of citizens and the organization must submit one of the following:

- its articles of incorporation, articles of association, partnership documents, bylaws, or similar documents;
- letterhead containing the name of the organization and its principal officers; **OR**
- if the organization or association is a primarily formed committee established to support or oppose the measure, its statement of organization (FPPC Form 410) filed pursuant to Government Code 84101.

**Office Use Only**

**Verified Individual Submitter as a:**

- Registered Voter in District
- Governing Board Member
- Principal Officer of Organization

**Organization Submitted Required Documentation:**

- articles of incorp. or assoc., bylaws, or similar
- letterhead
- FPPC Form 410
  
- One (1) to five (5) signers submitted.

**Staff Initials** \_\_\_\_\_

**SECTION 3: ARGUMENT TEXT**



**PLEASE ATTACH A COPY OF YOUR PRIMARY / REBUTTAL ARGUMENT TO THIS FORM.**

The text of your primary and/or rebuttal argument will be printed exactly as submitted. Type your primary and/or rebuttal argument with the desired formatting. Ensure that your primary and/or rebuttal argument meets the legal word limit. You may request that specific text is printed in bold, italic, or bold italic font type.



The County of Santa Clara Office of the Registrar of Voters uses standard typefaces, font sizes, headers, and bullets in all measure related documents. In addition, measure related documents use the following formatting standards: 1) indent increments will be set at 0.25"; 2) spacing will be standardized to language-appropriate number of spaces following periods, colons, commas, and semicolons; 3) tabs will be used for numbered and/or bulleted indented text; and 4) signers will be formatted as conformed signatures with titles below the name. All measure related documents submitted to the Office of the Registrar of Voters will be formatted to the prescribed standards.

**PLEASE NOTE:** If the primary and/or rebuttal argument is handwritten or a revision is unclear, the County of Santa Clara Office of the Registrar of Voters staff will interpret the handwritten information to the best of their abilities. That interpretation is final.

# Section 3 continued...

Select Signing Order for Each Signatory Below (1, 2, 3, etc.)	Argument Signer Form
The undersigned author(s) of the attached argument hereby state that such argument is true and correct to the best of <b>their</b> knowledge and belief.	
<ol style="list-style-type: none"> <li>1.</li> <li>2.</li> <li>3.</li> <li>4.</li> <li>5.</li> </ol>	<p><b>Gender:</b>  <input type="checkbox"/> Masculine / <input type="checkbox"/> Feminine / <input type="checkbox"/> Androgynous or Non-binary / <input type="checkbox"/> Other: _____</p> <p><b>I am a:</b>  <input type="checkbox"/> Registered Voter in District / <input type="checkbox"/> Governing Board Member / <input type="checkbox"/> Principal Officer of the Organization Submitting the Argument</p> <p><b>Name of Signer (to be printed on argument):</b> _____</p> <p><b>[IF APPLICABLE] Title (to be printed on argument):</b> _____</p> <p><b>[IF APPLICABLE] Name of Organization or Bona Fide Association of Citizens (to be printed on argument):</b>            _____</p> <p><b>[For individuals] Residential Address (where you are registered to vote):</b>            _____</p> <p><b>[For governing board members and principal officers] Business Address:</b>            _____</p> <p><b>Phone:</b> _____ <b>Email:</b> _____</p>
<b>SIGNATURE</b> 	Under penalty of perjury, I attest the above information meets the required criteria for an Individual or for an Organization or Bona Fide Association of Citizens for purposes of submitting an argument: _____ _____
<ol style="list-style-type: none"> <li>1.</li> <li>2.</li> <li>3.</li> <li>4.</li> <li>5.</li> </ol>	<p><b>Gender:</b>  <input type="checkbox"/> masculine / <input type="checkbox"/> feminine / <input type="checkbox"/> androgynous or non-binary / <input type="checkbox"/> other: _____</p> <p><b>I am a:</b>  <input type="checkbox"/> Registered Voter in District / <input type="checkbox"/> Governing Board Member / <input type="checkbox"/> Principal Officer of the Organization Submitting the Argument</p> <p><b>Name of Signer (to be printed on argument):</b> _____</p> <p><b>[IF APPLICABLE] Title (to be printed on argument):</b> _____</p> <p><b>[IF APPLICABLE] Name of Organization or Bona Fide Association of Citizens (to be printed on argument):</b>            _____</p> <p><b>[For individuals] Residential Address (where you are registered to vote):</b>            _____</p> <p><b>[For governing board members and principal officers] Business Address:</b>            _____</p> <p><b>Phone:</b> _____ <b>Email:</b> _____</p>
<b>SIGNATURE</b> 	Under penalty of perjury, I attest the above information meets the required criteria for an Individual or for an Organization or Bona Fide Association of Citizens for purposes of submitting an argument: _____ _____

# Section 3 continued...

Select Signing Order for Each Signatory Below (1, 2, 3, etc.)	<b>Argument Signer Form</b> The undersigned author(s) of the attached argument hereby state that such argument is true and correct to the best of <b>their</b> knowledge and belief.
1.  2.  3.  4.  5.	<p><b>Gender:</b>  <input type="checkbox"/> Masculine / <input type="checkbox"/> Feminine / <input type="checkbox"/> Androgynous or Non-binary / <input type="checkbox"/> Other: _____</p> <p><b>I am a:</b>  <input type="checkbox"/> Registered Voter in District / <input type="checkbox"/> Governing Board Member / <input type="checkbox"/> Principal Officer of the Organization Submitting the Argument</p> <p><b>Name of Signer (to be printed on argument):</b> _____</p> <p><b>[IF APPLICABLE] Title (to be printed on argument):</b> _____</p> <p><b>[IF APPLICABLE] Name of Organization or Bona Fide Association of Citizens (to be printed on argument):</b>                      _____</p> <p><b>[For individuals] Residential Address (where you are registered to vote):</b>                      _____</p> <p><b>[For governing board members and principal officers] Business Address:</b>                      _____</p> <p><b>Phone:</b> _____ <b>Email:</b> _____</p>
<b>SIGNATURE</b> 	Under penalty of perjury, I attest the above information meets the required criteria for an Individual or for an Organization or Bona Fide Association of Citizens for purposes of submitting an argument: _____
1.  2.  3.  4.  5.	<p><b>Gender:</b>  <input type="checkbox"/> masculine / <input type="checkbox"/> feminine / <input type="checkbox"/> androgynous or non-binary / <input type="checkbox"/> other: _____</p> <p><b>I am a:</b>  <input type="checkbox"/> Registered Voter in District / <input type="checkbox"/> Governing Board Member / <input type="checkbox"/> Principal Officer of the Organization Submitting the Argument</p> <p><b>Name of Signer (to be printed on argument):</b> _____</p> <p><b>[IF APPLICABLE] Title (to be printed on argument):</b> _____</p> <p><b>[IF APPLICABLE] Name of Organization or Bona Fide Association of Citizens (to be printed on argument):</b>                      _____</p> <p><b>[For individuals] Residential Address (where you are registered to vote):</b>                      _____</p> <p><b>[For governing board members and principal officers] Business Address:</b>                      _____</p> <p><b>Phone:</b> _____ <b>Email:</b> _____</p>
<b>SIGNATURE</b> 	Under penalty of perjury, I attest the above information meets the required criteria for an Individual or for an Organization or Bona Fide Association of Citizens for purposes of submitting an argument: _____

# Section 3 continued...

Select Signing Order for Each Signatory Below (1, 2, 3, etc.)	<b>Argument Signer Form</b>
The undersigned author(s) of the attached argument hereby state that such argument is true and correct to the best of <b>their</b> knowledge and belief.	
<b>1.</b>  <b>2.</b>  <b>3.</b>  <b>4.</b>  <b>5.</b>	<p><b>Gender:</b>  <input type="checkbox"/> Masculine / <input type="checkbox"/> Feminine / <input type="checkbox"/> Androgynous or Non-binary / <input type="checkbox"/> Other: _____</p> <p><b>I am a:</b>  <input type="checkbox"/> Registered Voter in District / <input type="checkbox"/> Governing Board Member / <input type="checkbox"/> Principal Officer of the Organization Submitting the Argument</p> <p><b>Name of Signer (to be printed on argument):</b> _____</p> <p><b>[IF APPLICABLE] Title (to be printed on argument):</b> _____</p> <p><b>[IF APPLICABLE] Name of Organization or Bona Fide Association of Citizens (to be printed on argument):</b>            _____</p> <p><b>[For individuals] Residential Address (where you are registered to vote):</b>            _____</p> <p><b>[For governing board members and principal officers] Business Address:</b>            _____</p> <p><b>Phone:</b> _____ <b>Email:</b> _____</p>
<b>SIGNATURE</b>  	<p>Under penalty of perjury, I attest the above information meets the required criteria for an Individual or for an Organization or Bona Fide Association of Citizens for purposes of submitting an argument:</p> <p>_____</p>

<b>SECTION 3 CHECKLIST</b>	
<b>Office Use Only</b>	
<p><b>Primary Argument Checklist (check all that apply):</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Author(s) meets criteria to sign?</li> <li><input type="checkbox"/> Author's title as signed meets criteria?</li> <li><input type="checkbox"/> Residential address meets criteria for eligible individual voter to sign?</li> <li><input type="checkbox"/> Argument Signer Form signed by author(s)?</li> <li><input type="checkbox"/> Signing order indicated?</li> <li><input type="checkbox"/> Only author's name is listed on name line and matches signed name?</li> <li><input type="checkbox"/> Author's TYPED or LEGIBLY WRITTEN title is on title line, if applicable?</li> <li><input type="checkbox"/> Author's gender is selected?</li> <li><input type="checkbox"/> Original or scanned signatures are clear and readable for verification?</li> <li><input type="checkbox"/> Primary Argument does not exceed 300 words?</li> <li><input type="checkbox"/> Author's contact information is filled out?</li> <li><input type="checkbox"/> Author's document(s) filed by deadline?</li> </ul> <p><b>Staff Initials</b> _____</p>	<p><b>Rebuttal Argument Checklist (check all that apply):</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Authors filed written authorization, if different authors submitted?</li> <li><input type="checkbox"/> Argument Signer Form signed by author?</li> <li><input type="checkbox"/> Signing order indicated?</li> <li><input type="checkbox"/> Only author's name is listed on name line and matches signed name?</li> <li><input type="checkbox"/> Author's TYPED or LEGIBLY WRITTEN title is on title line, if applicable?</li> <li><input type="checkbox"/> Author's gender is selected?</li> <li><input type="checkbox"/> Original or scanned signatures are clear and readable for verification?</li> <li><input type="checkbox"/> Rebuttal Argument does not exceed 250 words?</li> <li><input type="checkbox"/> Author's contact information is filled out?</li> <li><input type="checkbox"/> Author's document(s) filed by deadline?</li> </ul> <p><b>Staff Initials</b> _____</p>

## SECTION 4: LIST OF MEASURE SUPPORTERS OR OPPONENTS TO APPEAR ON THE BALLOT LABEL

[Assembly Bill 1416](#) was signed by the Governor and is effective as of January 1, 2023. This legislation allows primary argument signers to provide a list of individuals, associations, nonprofit organizations, or businesses that are signers or are listed within the text of the argument who support or oppose a ballot measure to be listed under the ballot label. If you wish to submit a list of supporters or opponents, please complete Section 4 by providing a list of names of the individuals, associations, nonprofit organizations, and businesses to be listed as supporters or opponents. Please refer to page 9 Section 6: Appendix A for additional guidelines regarding supporters and opponents. A sample ballot label is provided on page 10, in Section 6, Appendix B.

**Every individual, association, nonprofit organization, or business listed as a supporter or opponent must sign the consent form included in Section 5.**

Each supporter / opponent shall be separated by a semicolon. An individual, association, nonprofit organization, or business shall not be listed unless they support or oppose the measure and meet the criteria specified in this form.

Any association, nonprofit organization, or business listed as a supporter or opponent (1) must have existed for at least four years, and (2) must not have been originally created as a committee described in Government Code section 82013.

The list of all supporters / opponents shall be listed in the order they will appear on the ballot and may not exceed 125 characters in length.

To calculate the 125-character limit, please count spaces between and before names, as well as the semicolons, spaces, and period at the end of the name. Use the worksheet below to ensure your character count meets the required criteria.

List of Names **[check one]**:

- Supporters  
 Opponents

LIST OF INDIVIDUALS, ASSOCIATIONS, NONPROFIT ORGANIZATIONS, AND/OR BUSINESSES	# of Characters	GENDER
1. _____;		<input type="checkbox"/> masculine / <input type="checkbox"/> feminine / <input type="checkbox"/> androgynous or non-binary <input type="checkbox"/> other: _____
2. _____;		<input type="checkbox"/> masculine / <input type="checkbox"/> feminine / <input type="checkbox"/> androgynous or non-binary <input type="checkbox"/> other: _____
3. _____;		<input type="checkbox"/> masculine / <input type="checkbox"/> feminine / <input type="checkbox"/> androgynous or non-binary <input type="checkbox"/> other: _____
4. _____;		<input type="checkbox"/> masculine / <input type="checkbox"/> feminine / <input type="checkbox"/> androgynous or non-binary <input type="checkbox"/> other: _____
5. _____.		<input type="checkbox"/> masculine / <input type="checkbox"/> feminine / <input type="checkbox"/> androgynous or non-binary <input type="checkbox"/> other: _____
<b>GRAND TOTAL (not to exceed 125 characters)</b> _____		

You must submit with your list of supporters or opponents a signed consent from every supporter or opponent. A consent form is included Section 5 below. You may use as many copies of Section 5 as needed to cover every supporter or opponent listed above.

If the list above or the consent forms do not meet the requirements of Elections Code 9170, the elections official will require the proponent or submitter of the argument to resubmit supporting documentation by 5:00 p.m. on E-82 [Date: \_\_\_\_\_] to meet election related deadlines.

**Proponent's Initials:** \_\_\_\_\_ I UNDERSTAND, that if I am told that the list of supporters/opponents above and the related consent forms do not meet the requirements of Elections Code 9170, and I do not resubmit the documents, only supporters or opponents who are verified as meeting the requirements of Elections Code 9170 will be printed under the ballot label.

**REQUIREMENTS IF NO LIST IS SUBMITTED**

If no list of supporters / opponents is provided by the proponents or opponents of the measure, or there are none that meet the requirements of Elections Code § 9170, "Supporters / Opponents" shall be followed by "None Submitted" on the ballot label. Please indicate below that no list will be submitted, as applicable:

- A list of Supporters **will not be** submitted by the Proponents or Submitter of the argument in favor.
- A list of Opponents **will not be** submitted by the Proponents or Submitter of the argument against.

**Supporters or Opponents to Appear on the Ballot Label shall meet one (1) of three (3) criteria (check one):**

**Office Use Only**

**A.** An association, nonprofit organization, or business that was not originally created as a committee described in Section 82013 of the Government Code and that has been in existence for at least four years.

**Verified**

**B.** A current or former elected official, who may be listed with the official's title (e.g., "State Senator Mary Smith," "Assembly Member Carlos Garcia," or "former Eureka City Council Member Amy Lee"). These titles may be shortened (e.g. "Senator" or "Sen." for "State Senator" or "Asm." for "Assembly Member").

**Staff Initials**  
\_\_\_\_\_

**C.** An individual who is not a current or former elected official may be listed only with the individual's first and last name and an honorific (e.g., "Dr.," "M.D.," "Ph.D.," or "Esquire"), with no other title or designation, unless it is a title representing an association, nonprofit organization, or business that meets the requirements of (A) or (B) above and that is eligible to be listed as the individual supporter or opponent of the measure.

Submitter of Information shall include a signed statement attesting that the list of supporters/opponents meets the required criteria. Refer to Section 5 for Submitter Information Consent Form.

**Supporters or Opponents to Appear on the Ballot Label shall meet additional criteria (check all that apply):**

**Office Use Only**

Reviewed all information prior to the submittal and/or resubmittal of documents.

**Verified**

Does not list a political party and is not a representative of a political party.

Does not exceed 125 characters in length (spaces, commas, semicolons, and any other characters count toward the 125-character limit.)

**Staff Initials**  
\_\_\_\_\_

List may be shortened using acronyms, abbreviations, or by leaving out words in the entity's name.

**ADMINISTRATORS OF CITY ELECTIONS ONLY:** By E-84 \_\_\_\_\_, an elections official that receives a list of supporters or opponents for inclusion under the ballot label, shall, after confirming compliance with the law, forward that list to the county elections official. If the list is not in compliance with the law, after submitting to the County of Santa Clara Office of the Registrar of Voters, the elections official agrees to resubmit documents by 5:00 p.m. on E-82 \_\_\_\_\_ that meets the requirements of Elections Code 9170.

**SECTION 5: BALLOT LABELSUPPORTER/OPPONENT CONSENT FORM(S)**

If there is a question or issue with a submission, the County of Santa Clara Office of the Registrar of Voters will contact the submitter. The submitter is the person who delivers the primary and/or rebuttal arguments, and/or supporting materials to the County of Santa Clara Office of the Registrar of Voters. Every supporter / opponent, or representative of a supporter / opponent, must sign a consent form in order to be included in the ballot label.

**This page may be copied so that a consent form is submitted for every supporter or opponent. Every supporter or opponent must sign their own consent form, and that form must be included in your submission.**

**SUPPORTER / OPPONENT SIGNER FORM**

***Note: if an individual uses the name of an association, nonprofit organization, or business in their title to be included in the list of supporters or opponents, a representative of that association, nonprofit organization, or business must complete this consent form. The individual supporter/opponent and the representative may be the same person if appropriate. If no representative of the organization or business completes this form, individuals may only use an honorific (e.g. "Dr.," "M.D.," "Ph.D.," or "Esquire") and no title that includes an organization or business name.***

**This individual OR association, nonprofit organization, or business:\***

- 1)  Supports or  Opposes the measure.

***[If an association, nonprofit organization, or business is listed as a supporter/opponent or used in an individual's title]***  
**This association, nonprofit organization, or business:\***

- 1)  Has been in existence for at least four years.
- 2)  Was not originally created as a committee described in Government Code § 82013.

Full name of individual OR representative of association, nonprofit organization, or business\* (print or type)

\_\_\_\_\_

Phone Number (cell / direct) \_\_\_\_\_

Address\* \_\_\_\_\_

Email Address \_\_\_\_\_

Under penalty of perjury, I attest the above information is true and accurate to the best of my knowledge:

**SIGNATURE** 

\_\_\_\_\_

Date: \_\_\_\_\_

\* Required information.



## SECTION 6: APPENDIX A

### GUIDELINES FOR BALLOT LABEL LIST OF NAMES OF SUPPORTERS / OPPONENTS

1. No Supporters or Opponents may be a political party or a representative of a political party.
2. The list of Supporters or Opponents shall not exceed 125 characters in length (spaces, commas, semicolons, and any other character count toward the 125-character limit).
3. Each Supporter or Opponent on the list is separated by a semicolon.
4. Names of nonprofit organizations or businesses on the list may be shortened by the use of acronyms, abbreviations, or by leaving out words in the entity's name.
5. Every Supporter or Opponent listed that is a nonprofit organization, a business, or an individual whose title includes a nonprofit organization or business, shall include a signed statement by a representative of the nonprofit organization or business, under penalty of perjury, that includes its name and business address and attests it meets the criteria: 1) association, nonprofit organization, or business supports or opposes the measure; 2) association, nonprofit organization, or business has been in existence for at least four years; and, 3) that it was not originally created as a committee under Government Code 82013.
6. For every Supporter or Opponent listed that is an individual, the proponents or opponents shall include a signed statement by the individual that includes the individual's name and address and attests that the individual supports or opposes the measure.
7. A representative of every association, nonprofit organization, or business that is listed as a supporter or opponent, or that is included in the title of an individual supporter or opponent, must submit with the list of supporters or opponents an attestation that the entity has been in existence for at least four years and was not originally formed as a committee under Government Code 82013.
8. Review the information above prior to the submittal and/or resubmittal of documents.
9. Within one week of receipt, a city elections official that administers city elections that received a list of supporters or opponents for inclusion on the ballot label of similar description, shall, after confirming compliance with the law, forward that list to the county elections official.
10. All submissions are viewable by the public.

MEASURES SUBMITTED TO THE VOTERS  
MEDIDAS SOMETIDAS A LOS VOTANTES

CITY  
CIUDAD

CITY OF EVERGREEN  
CIUDAD DE EVERGREEN

**G** Shall the City Charter be amended to:

expand the Independent Police Auditor's oversight, including review of officer-involved shootings and use of force incidents causing death or great bodily injury, review of department-initiated investigations against officers, and other technical amendments; increase the Planning Commission to 11 members with Council appointing one member from each Council District and one "at-large" member; and allow the Council to establish timelines for redistricting when Census results are late?

Example List

**Supporters:** John Doe, League of Women Voters/Liga de Mujeres Votantes; Mary Doe, CA Teachers Assoc/Asociación de Maestros de Calif.; Will Doe, Latino Fnd./Fundación Latina; Hillary Doe, Fresno Chamber of Commerce/Cámara de Comercio de Fresno

**Opponents:** John Doe, League of Women Voters/Liga de Mujeres Votantes; Mary Doe, CA Teachers Assoc/Asociación de Maestros de Calif.; Will Doe, Latino Fnd./Fundación Latina; Hillary Doe, Fresno Chamber of Commerce/Cámara de Comercio de Fresno