ARGUMENT FILER CHECKLIST

Have you completed or complied with the following?

- □ Authors meet criteria to sign
- □ Author's title as signed meets criteria
- □ Check which criteria author is signing pursuant to
- Residential address completed if author meets eligible voter criteria to sign
- □ Required form statement signed by author
- □ One to five author signatures
- □ Author signatures numbered in order of appearance
- □ Only author's name on name line
- Only author's TYPED title on title line
- □ Author's TYPED name exactly matches signed name
- □ Author's gender circled
- □ All signatures are original signatures
- Contact information supplied
- □ Not more than 300 words
- File argument by deadline

REBUTTAL ARGUMENT FILER CHECKLIST

Have you completed or complied with the following?

If different authors, submit written authorization
Required form statement signed by author
One to five author signatures
Author signatures numbered in order of appearance
Only author's name on name line
Only author's title TYPED on title line
Author's TYPED name exactly matches signed name
Author's gender circled
All signatures are original signatures
Not more than 250 words
Contact information supplied

□ File rebuttal argument by deadline



SANTA CLARA COUNTY REGISTRAR OF VOTERS

ARGUMENT DECLARATION BY AUTHOR(S) OR PROPONENT(S)

(Elections Code § 9161, 9164, 9501, 9501.5, 9600)

The	undersigned author(s)	of the argument in favor of/	against ballot me	easure at the	
		(circ	cle one)	(letter)	
		election for the			
	(title of election)		(name	of jurisdiction)	
to be	e held on	hereby s	state that such ar	gument is true and correc	ct to the best
	(date of election)				
of		knowledge and belie	f.		
	(his / her / their)				
1.					
••	Signature	Date	_	Residential Address	M / F
	Type Title to Appea	r on Argument		Print Name as Signature	
Auth	or meets criteria of:	Gov. Bd. Member	Principal Office	er of Bona Fide Assoc	Reg. Voter in Dist.
2.	Signature	Date		Residential Address	
	Type Title to Appea	 ur on Argument		Print Name as Signature	M/F e will appear in VIP*
Auth	or mosts criteria of:	Gov. Bd. Member	Principal Office	or of Bona Fide Assoc	Pag Voter in Dist
	or meets chteria or	Gov. Bd. Member		er of Boria Fide Assoc	Neg. Voter in Dist.
3.	Cignoture			Residential Address	
	Signature	Date		Residential Address	M/F
	Type Title to Appea	ır on Argument		Print Name as Signature	
Auth	or meets criteria of:	Gov. Bd. Member	Principal Office	er of Bona Fide Assoc	Reg. Voter in Dist.
4.					
	Signature	Date		Residential Address	
	Type Title to Appea	ır on Argument		Print Name as Signature	M / F e will appear in VIP*
Auth	or meets criteria of:	Gov. Bd. Member	Principal Office	er of Bona Fide Assoc.	Reg. Voter in Dist.
5.			- '	_	
J.	Signature	Date		Residential Address	M / F
	Type Title to Appea	r on Argument		Print Name as Signature	
Auth	or meets criteria of: _	Gov. Bd. Member	_ Principal Office	r of Bona Fide Assoc	Reg. Voter in Dist.
	IP = Voter Information I	Pamphlet			
Con	tact Person		Telephone #		Fax #

SANTA CLARA COUNTY **REGISTRAR OF VOTERS**

REBUTTAL ARGUMENT DECLARATION BY AUTHOR(S) OR OTHER PERSON(S) AUTHORIZED BY AUTHOR (Elections Code § 9164, 9167, 9504, 9600)

The ι	undersigned author(s) of the rebuttal to t	the argument in favo	or of/against ballot meas	sure at the
			(circle one)	(letter)
	election for	the		
	(title of election)		(name of jurisdiction	on)
to be	held on	_ hereby state that s	such argument is true an	d correct to the best
	(date of election)			
of	knowledge	e and belief.		
	(his / her / their)			
1.				
	Signature	Date		
				M / F
2.	Type Title to Appear on Rebuttal		Print Name as Signatu voter information pamp	
۷.	Signature	Date		
				M/F
3.	Type Title to Appear on Rebuttal		Print Name as Signatu voter information pamp	
J.	Signature	Date		
	Type Title to Appear on Rebuttel		Print Name as Signatu	M / F
	Type Title to Appear on Rebuttal		voter information pamp	
4.	Signature	 Date		
	eig.iata.o	24.0		
	Type Title to Appear on Rebuttal		Print Name as Signatu	M / F re will appear in
-			voter information pamp	
5.	Signature	Date		
				M/F
	Type Title to Appear on Rebuttal		Print Name as Signatu voter information pamp	re will appear in
Cont	act Person	Telephone #		Fax #



SANTA CLARA COUNTY REGISTRAR OF VOTERS

REBUTTAL SIGNER AUTHORIZATION

The author of an argument may sign the rebuttal argument or may authorize in writing any other person to author/sign the rebuttal argument. Below is a sample of written authorization that is required when the author of the argument does not sign the rebuttal argument but instead has another person sign in their place. All required signatures must be <u>original</u> signatures.

Date of Election		_	
As a signer on the Argument	in favor of / against (circle one)	Measure in the	
		, I authorize	
(Jurisd	iction)	,	
	to sign the rel	buttal argument in my place.	
(new rebuttal signer)		<i>y</i> , ,	
Signature		Printed Name	
Date of Election		_	
As a signer on the Argument	in favor of / against (circle one)	Measure in the	
		, I authorize	
(Juriso	liction)		
(new rebuttal signer)	to sign the rel	buttal argument in my place.	
Signature		Printed Name	