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
- ❑ Not more than 300 words
- ❑ Contact information supplied
- ❑ File argument by deadline
- ❑ All signers have signed form and argument itself.

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 measure _____ at the
                                                 (circle one)   (letter)

_____General_____ election for the _____City of San Jose_____
        (title of election)   (name of jurisdiction)

to be held on _____November 3, 2020_____ hereby state that such argument is true and correct to the best
               (date of election)

of _____ knowledge and belief.
       (his / her / their)

1. _____   _____
   Signature   Date   Residential Address
                                                                                  M / F
   Type Title to Appear on Argument   Print Name as Signature will appear in VIG*

Author meets criteria of: _____ Gov. Bd. Member _____ Principal Officer of Bona Fide Assoc. _____ Reg. Voter in Dist.

2. _____   _____
   Signature   Date   Residential Address
                                                                                  M / F
   Type Title to Appear on Argument   Print Name as Signature will appear in VIG*

Author meets criteria of: _____ Gov. Bd. Member _____ Principal Officer of Bona Fide Assoc. _____ Reg. Voter in Dist.

3. _____   _____
   Signature   Date   Residential Address
                                                                                M / F
   Type Title to Appear on Argument   Print Name as Signature will appear in VIG*

Author meets criteria of: _____ Gov. Bd. Member _____ Principal Officer of Bona Fide Assoc. _____ Reg. Voter in Dist.

4. _____   _____
   Signature   Date   Residential Address
                                                                                M / F
   Type Title to Appear on Argument   Print Name as Signature will appear in VIG*

Author meets criteria of: _____ Gov. Bd. Member _____ Principal Officer of Bona Fide Assoc. _____ Reg. Voter in Dist.

5. _____   _____
   Signature   Date   Residential Address
                                                                                M / F
   Type Title to Appear on Argument   Print Name as Signature will appear in VIG*

Author meets criteria of: _____ Gov. Bd. Member _____ Principal Officer of Bona Fide Assoc. _____ Reg. Voter in Dist.

Contact Person   Telephone #   Email Address

* VIG = Voter Information Guide

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