

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)
Primary / General _____ election for the _____ City of San Jose _____
(title of election. Circle one) (name of jurisdiction)

to be held on _____ 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

Type Title to Appear on Argument Print Name as Signature will appear in VIG*
M / F

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

2. _____
Signature Date Residential Address

Type Title to Appear on Argument Print Name as Signature will appear in VIG*
M / F

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

3. _____
Signature Date Residential Address

Type Title to Appear on Argument Print Name as Signature will appear in VIG*
M / F

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

4. _____
Signature Date Residential Address

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

5. _____
Signature Date Residential Address

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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