

OFFICE OF ASSESSOR-COUNTY CLERKRECORDER & ELECTIONS COUNTY OF SAN MATEO

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

Ballot Measure Primary Argument Submission Form

A ballot argument shall not be accepted unless accompanied by this completed 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/organization, the name of the association/organization and the printed name and signature of at least one of its principal officers. If the measure is presented to voters pursuant to an initiative petition in a special district election, please contact the Elections Office for special instructions. Word count limit for Primary Arguments = 300 Brisbaue School DisTrict

Ballot Measure ________ to be held on 6-5-18.

Ballot	Measure	for the primary	to be held on 6-5-18.				
Pri	mary Argument in Favor of	Primary A	Argument Against				
This	argument is submitted b	y: (check all that apply	η				
		overning body of the County	teo, a School District, or a Special District of San Mateo, a school district or a special district, fill in the both sides of this form.				
	Contact Person's Printed Name:		Contact Person's Signature:				
	Title:						
	Phone:		Email:				
	Member(s) of the Governing Body of the County of San Mateo, a School District, or a Special District If this argument is filed by any member(s) of the governing body, fill in the information below and complete both sides of this form. By statute, members of school district governing boards need board authorization to file an argument.						
	Member(s) of the Governing Body:		Name of Governing Body:				
	Contact Person's Printed Name:		Contact Person's Signature:				
	Title:						
	Phone:		Email:				
U C	Bona Fide Association of Citizens/Organization If this argument is filed by a bona fide association of citizens/organization, the signers of the argument must be affiliated with the association/organization, be authorized to sign the argument on its behalf, provide the printed name and signature of at least one principal officer of the organization, and complete both sides of this form.						
	Name of Association/Organization: SILCON VALLE Principal Officer's Printed Name an	Taxpayer	S Association.				
	Mark W. A. Hink (Contact Person's Printed Name: MARK HINK Phone	IE	Email:				
	Individual(s) eligible to Individual signers must be eligil Contact Person:		Phone:				
	Mailing Address:						
	Fax:		Email:				

Please complete the reverse side of this form.

	Primary Argument Signers Form			Each signer must designate in			
				which capacity they are signing. Check the one box that applies.			
	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.		Governing Body of San Mateo County, a School District, or a Special District	dy			
	If the signers are part of a bona fide association/organization, there is no requirement that they be eligible to vote on the measure. However, for each such signing individual(s), the title under the signer's name shall list the name of that bona fide association/organization and may include their position within that association/organization.			Member(s) of the Governing Bo of San Mateo County, a School District, or a Special District	Bona Fide Association of Citizens/Organization	Individual(s) eligible to vote on the measure	
	By signing below, the undersigned state that they have read the argument and believe it not to be false or misleading.			Memb of San Distric	Bona	Individ	
Author	1. MARK W.A. HINKLE	Fresidenti Taxpayers Associat	TON		U		
tho	Signature: //	Morgan Hill, CA 95037					
	2. Harland Harrison	Chair of Son Mateo County	A		V		
	Signat	Belmont 1 A 94002 Date: 3-16-18					
	3. Name:	Title:					
	Phone:	Email:					
	Address:						
	Signature:	Date:					
	4. Name:	Title:					
	Phone:	Email:					
	Address:						
	Signature:	Date:					
	5. Name:	Title:					
	Phone:	Email:					
	Address:						
	Signature:	Date:					
Submit a second form (this side only) for alternate signers attached to this form and the							
	Signers Registe			Dated			
	Bona Fide Association	d N/A Signed		Dated			

Brisbane School District \$166 Parcel Tax: Argument Against Measure L

The district not only wants the 2013 parcel tax for 10 years they're already getting, they want an increase of \$118 per year more for 5 years. And that's on top of 2 bond \{\gamma} measures of \$48M and \$25M funded since 2010.

Have they earned this extension that will cost you \$1,328 over the next 8 years (on top \)7 of the property taxes you are already paying)?

Let's look at the student test scores for Math learners attaining proficiency: \2

2015-16 school year results: 52% meeting proficiency.

That means 48% do NOT meet standards.

Source: California Department of Education Data Partnership 2

If you got 52% on a test, that would be an F grade, would it not? 16

Should you, the voters, reward a 48% failure rate with more money?

If no, we encourage you to vote NO on Measure L. \0

Brisbane School Districts' is already spending \$17,019 per student compared to the statewide average of \$11,431. That 149% above the average. For an average class size of 26 students, that's \$442,494 per class per year.

The average salary and benefits for teachers is \$92,347 per shortened work year. | 3

Yet, they want more of your hard earned money to pad their salaries and fat pension | | plans.

The measure says that none of the funds will be used for administration. But, funds \square generated separately from this parcel tax can be used for administration expenses \text{

Tell the Brisbane School District Board to be fiscally responsible by voting NO On Measure L.

If you reward failure, you will get more failure!

For more information please visit us at 7

http://www.svtaxpayers.org/2018-brisbane-school-parcel-tax

FILED IN THE OFFICE OF THE CHIEF ELECTIONS OFFICER OF SAN MATEO COUNTY, CALIF.

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