



OFFICE OF  
**ASSESSOR-COUNTY CLERK-  
 RECORDER & 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 *City of Foster City*  
 Ballot Measure   P   for the   primary   to be held on   June 5, 2018  .

Primary Argument in Favor of       Primary Argument Against

**This argument is submitted by: (check all that apply)**

|                                     |   |
|-------------------------------------|---|
| <input type="checkbox"/>            | <p><b>The Governing Body of the County of San Mateo, a School District, or a Special District</b><br/>         If this argument is filed by the governing body of the County of San Mateo, a school district or a special district, fill in the name of the governing body on the line below and complete both sides of this form.</p> <p>Governing Body:</p> <p>Contact Person's Printed Name: _____ Contact Person's Signature: _____</p> <p>Title: _____</p> <p>Phone: _____ Email: _____</p>  |
| <input type="checkbox"/>            | <p><b>Member(s) of the Governing Body of the County of San Mateo, a School District, or a Special District</b><br/>         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.</p> <p>Member(s) of the Governing Body: _____ Name of Governing Body: _____</p> <p>Contact Person's Printed Name: _____ Contact Person's Signature: _____</p> <p>Title: _____</p> <p>Phone: _____ Email: _____</p>  |
| <input checked="" type="checkbox"/> | <p><b>Bona Fide Association of Citizens/Organization</b><br/>         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.</p> <p>Name of Association/Organization:<br/>         Libertarian Party of San Mateo County CA</p> <p>Principal Officer's Printed Name and Title: _____ Prin _____<br/>         Harland Harrison, Chair</p> <p>Contact Person's Printed Name: _____ Email: _____<br/>         Harland Harrison</p> <p>_____ Fax: _____</p> |
| <input type="checkbox"/>            | <p><b>Individual(s) eligible to vote on the measure</b><br/>         Individual signers must be eligible to vote on the measure.</p> <p>Contact Person: _____ Phone: _____</p> <p>Mailing Address: _____</p> <p>Fax: _____ Email: _____</p>   |

**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. |   |  |  |
|---|--|--|---|--|--|
| <p>No more than five signatures shall appear with any argument. If more than five signatures are submitted, the first five listed shall be printed.</p> <p>Names and titles listed will be printed in the order that they are listed below.</p> <p>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.</p> <p>By signing below, the undersigned state that they have read the argument and believe it not to be false or misleading.</p> |  | Governing Body of San Mateo County, a School District, or a Special District                   | Member(s) of the Governing Body of San Mateo County, a School District, or a Special District | <input checked="" type="checkbox"/> Bona Fide Association of Citizens/Organization | <input type="checkbox"/> Individual(s) eligible to vote on the measure |
| 1.  | Name: <u>MARK W.A. HINKLE</u><br>Title: <u>President: Silicon Valley Taxpayers Association</u> |  |   |  |  |
| Address: <u>Morgan Hill, CA 95037</u>   |  |  |   |  |  |
| Date: <u>3-16-18</u>  |  |  |   |  |  |
| Signature: <u>[Redacted]</u>  |  |  |   |  |  |
| 2.  | Name: <u>Harland Harrison</u><br>Title: <u>Chair, Libertarian Party of San Mateo County CA</u> |  |   |  |  |
| Address: <u>Belmont CA 94002</u>  |  |  |   |  |  |
| Date: <u>3-16-18</u>  |  |  |   |  |  |
| Signature: <u>[Redacted]</u>  |  |  |   |  |  |
| 3.  | Name: _____<br>Title: _____  |  |   |  |  |
| Address: _____  |  |  |   |  |  |
| Date: _____   |  |  |   |  |  |
| Signature: _____  |  |  |   |  |  |
| 4.  | Name: _____<br>Title: _____  |  |   |  |  |
| Address: _____  |  |  |   |  |  |
| Date: _____   |  |  |   |  |  |
| Signature: _____  |  |  |   |  |  |
| 5.  | Name: _____<br>Title: _____  |  |   |  |  |
| Address: _____  |  |  |   |  |  |
| Date: _____   |  |  |   |  |  |
| Signature: _____  |  |  |   |  |  |

**Submit a second form (this side only) for alternate signers attached to this form and the argument.**

FOR OFFICIAL USE ONLY

|                       |                                     |     |        |       |
|-----------------------|-------------------------------------|-----|--------|-------|
| Signers               | <input type="checkbox"/> Registered | N/A | Signed | Dated |
| Bona Fide Association | <input type="checkbox"/> Verified   | N/A | Signed | Dated |

CITY OF FOSTER CITY/  
EMID  
18 MAR 16 PM 4:36

Argument Against Measure P (Foster City Bond) *RH*

10 The City of Foster City realizes its levee needs \$90,000,000 of  
10 improvements to meet Federal, FEMA, standards. With interest, the City  
9 estimates the taxpayers will pay a total of \$155,122,284. RECEIVED

10 These bonds must be repaid by Ad Valorem property taxes. In  
10 California, the Ad Valorem taxes are very unequal. Some families must  
12 pay many times what neighbors pay, for the very same floor plan. The  
5 tax collector does not care.

13 Foster City does face problems from a once-in-100-year flood, but is  
11 that even the most urgent danger? With the San Andreas fault running  
9 straight through the Peninsula, and with Foster City built on  
10 vulnerable fill land, concern for the inevitable earthquake seems more  
8 urgent than the slow rise in sea level.

12 The levee protects about 8,000 properties in San Mateo as well as the  
10 9,000 in Foster City, according to the Daily Journal. Why don't the  
12 people in San Mateo who are also protected by this levee, pay their  
13 share of the \$155,122,284? And why don't they get a vote on this  
2 important issue?

11 Slowly rising sea level would surely affect the entire Bay Area. This  
4 is a regional problem, with regional benefits and costs. In fact,  
8 Alameda County expressed concern that Foster City's levee work could  
10 negatively impact its communities. Why does Foster City have to do  
3 this all alone?

12 This is a regional problem; it needs a regional solution. Why does  
9 Foster City have to pay the \$90,000,000 all by itself?

4 Vote "No" on Measure P.

1 <http://www.svtaxpayers.org/2018-fostercity-bond>