

# Argument In Favor of Measure X

## MEASURE X – Business License Gross Receipts Tax for Parking Facilities: 300 Words

The County of San Mateo provides a broad range of public safety, medical, and human services to over 720,000 residents.

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Unfortunately, the cost of providing these services is increasing, while state and federal support is dwindling. Due to the global economic downturn, many more local residents are in need, further stressing our safety net.

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To address these challenges, over the past six years San Mateo County has eliminated 500 positions, reduced departmental budgets, consolidated departments, closed county facilities, and negotiated reductions in labor costs to achieve over \$70 million in ongoing savings.

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Despite this progress, San Mateo County continues to rely on reserves to balance our budget. Next year, San Mateo County will face another \$28 million budget deficit, an amount that could exceed \$50 million by 2017, even while utilizing reserves.

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To meet the needs of our communities, we must find new revenues while continuing to pursue cost-cutting efforts. One way to help close the budget gap is the measure before you, an eight percent (8%) business license tax on gross receipts of operators of commercial parking facilities in the unincorporated County area.

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This measure would raise approximately \$5 million without significantly impacting the pocketbooks of County residents and provide for local revenue that cannot be diverted by the state.

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The San Francisco International Airport, where many vehicle rental facilities are located, is owned by the City and County of San Francisco and as a government pays no taxes to San Mateo County. San Francisco receives over \$30,000,000 annually from the airport while San Mateo County derives comparatively little. It's time for San Mateo County to share in the benefits.

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By voting YES for this measure you are helping to ensure that San Mateo County will remain an enjoyable and prosperous place to live for many years to come.

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

MAR 16 2012

By: MARK CHURCH, Chief Elections Officer  
DEPUTY CLERK

285 words



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

Ballot Measure Primary Argument Submission Form

MAR 16 2012

MARK CHURCH, Chief Elections Officer
By: [Signature]
DEPUTY CLERK

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.

Word count limit for Primary Arguments = 300

Ballot Measure Measure X for the Primary Election to be held on June 5, 2012

[X] Primary Argument in Favor of [ ] Primary Argument Against

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

The Governing Body of the County of San Mateo, a School District, or a Special District
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.
Governing Body:
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: Adrienne J Tissier
Name of Governing Body: San Mateo County Board of Supervisors
Contact Person's Printed Name: David Burruto
Contact Person's Signature: [Signature]
Title: Chief of Staff, San Mateo County Supervisor Dave Pine
Phone: [Redacted] Email: [Redacted]

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:
Principal Officer's Printed Name and Title: Principal Officer's Signature:
Contact Person's Printed Name: Email:
Phone: Fax:

Individual(s) eligible to vote on the measure
Individual signers must be eligible to vote on the measure.
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.

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.

By signing below, the undersigned state that they have read the argument and believe it not to be false or misleading.

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	Bona Fide Association of Citizens/Organization	Individual(s) eligible to vote on the measure
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1. Name: <b>ADRIENNE J. TISSIER</b>	Title: <b>PRESIDENT, SAN MATEO COUNTY BOARD OF SUPERVISORS</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Phone: [REDACTED]	Email: [REDACTED]				
Address: [REDACTED]					
Signature: <i>[Signature]</i>	Date: <b>3/15/12</b>				
2. Name: <b>CAROL GROM</b>	Title: <b>SUPERVISOR, SAN MATEO COUNTY</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Phone: [REDACTED]	Email: [REDACTED]				
Address: [REDACTED]					
Signature: <i>[Signature]</i>	Date: <b>3-15-12</b>				
3. Name: <b>Ann E. Campbell</b>	Title: <b>San Mateo County Superintendent of Schools</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Phone: [REDACTED]	Email: [REDACTED]				
Address: [REDACTED]					
Signature: <i>[Signature]</i>	Date: <b>3/16/12</b>				
4. Name: <b>Lennie Roberts</b>	Title: <b>Environmental Advocate</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Phone: [REDACTED]	Email: [REDACTED]				
Address: [REDACTED]					
Signature: <i>[Signature]</i>	Date: <b>3/16/12</b>				
5. Name: <b>James P. Fox</b>	Title: <b>Retired District Attorney</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Phone: [REDACTED]	Email: [REDACTED]				
Address: [REDACTED]					
Signature: <i>[Signature]</i>	Date: <b>3/16/12</b>				

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