

ARGUMENT IN FAVOR OF MEASURE P

Vote YES on Measure P: help protect (San Carlos) elementary and middle schools' strong academic programs, including reading, writing, math and hands-on science education, from cuts. Measure P protects locally controlled funds—that can't be taken by the State—to support outstanding education for our students.

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Our local schools are among the best in California, and our students continue to excel. However, our per-student State funding remains among the lowest in San Mateo County.<sup>1</sup>

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Since 2003, our community has supported San Carlos schools with stable, local funding to offset the gap between the actual cost of providing a high-quality education and the inadequate State funding our schools receive.

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Although the State is slowly restoring funding in some districts after a decade of cuts, State officials continue to see our small San Carlos School District as a low priority.

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Without passing Measure P, existing local funding will expire this year, and our schools will have to make drastic cuts to academic programs.

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Local, voter-approved funds have been used as promised, helping to protect reading, writing and math programs and providing hands-on science curriculum.

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Vote YES on Measure P to:

- Maintain hands-on science programs
- Emphasize math, science, reading and writing skills
- Expand programs like design, engineering, music and world languages
- Attract, train and retain highly qualified teachers
- Maintain programs that support bringing all students up to the highest level possible in reading, writing and math

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Measure P funds stay in San Carlos classrooms:

- All money is controlled locally and cannot be taken by the State
- No money can be used for administrator salaries

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Join us in voting YES on Measure P to continue providing great education in San Carlos schools.

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

FEB 12 2015

MARK C

By



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<sup>1</sup> Sources: www.ed-data.k12.ca.us, http://www.scsdk8.org/aboutscsd/bonds\_parcel\_taxes/



### 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

Ballot Measure P for the Special Election to be held on May 5, 2015.

Primary Argument in Favor of       Primary Argument Against

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

<input type="checkbox"/>	<b>The Governing Body of the County of San Mateo, a School District, or a Special District</b> 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:
<input type="checkbox"/>	<b>Member(s) of the Governing Body of the County of San Mateo, a School District, or a Special District</b> 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:
<input type="checkbox"/>	<b>Bona Fide Association of Citizens/Organization</b> 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:
<input checked="" type="checkbox"/>	<b>Individual(s) eligible to vote on the measure</b> Individual signers must be eligible to vote on the measure.	
	Contact Person:	
	Mail:	
	Fax:	

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

3)	Name: <b>LINDA TEUTSCHEL</b>	Title: <b>FORMER SAN CARLOS</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Phone: [Redacted]	Email: [Redacted]				
	Address: [Redacted]	CITIZEN OF THE YEAR				
	Signature: [Redacted]	Date: <b>2/11/15</b>				
2)	Name: <b>Lauren Pachkowski</b>	Title: <b>San Carlos PTA coordinating Council</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Phone: [Redacted]	Email: [Redacted]				
	Address: [Redacted]					
	Signature: [Redacted]	Date: <b>2/11/15</b>				
3.	Name:	Title:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Phone:	Email:				
	Address:					
	Signature:	Date:				
4.	Name: <b>Marianne Jett</b>	Title: <b>San Carlos Education Foundation President</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Phone: [Redacted]	Email: [Redacted]				
	Address: [Redacted]					
	Signature: [Redacted]	Date: <b>2.12.15</b>				
5.	Name: <b>Ted Lempert</b>	Title: <b>Former Assembly Member</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Phone: [Redacted]	Email: [Redacted]				
	Address: [Redacted]					
	Signature: [Redacted]	Date: <b>2-12-15</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

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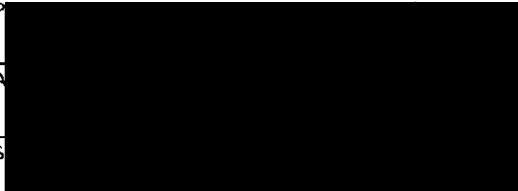
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1.	Name: <b>Ron Collins</b>	Title: <b>Mayor, City of San Carlos</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	P A S 					
	Date: <b>Feb. 12, 2015</b>					
	Signature:		Date:			
2.	Name:	Title:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Phone:	Email:				
	Address:					
	Signature:		Date:			
3.	Name:	Title:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Phone:	Email:				
	Address:					
	Signature:		Date:			
4.	Name:	Title:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Phone:	Email:				
	Address:					
	Signature:		Date:			
5.	Name:	Title:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Phone:	Email:				
	Address:					
	Signature:		Date:			

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