

Argument Against San Carlos School District Parcel Tax Measure

Measure ___ proponents say they want to “retain qualified and experienced teachers.”

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They imply that if we don't pass this tax increase, we will lose teachers to other districts in San Mateo County. Is that true?

Let's compare salaries of San Carlos School District with another, comparable district in our county: Burlingame School District.

	San Carlos School District	Burlingame School District	+/- (dollars)	+/- (percent)
Lowest Salary Offered	\$44,463	\$40,352	+4,111	+10.19%
B.A. + 60 units	\$65,706	\$67,220	-1,514	-2.3%
Highest Salary Offered	\$84,412	\$80,948	+3,464	+4.28%
Average Salary:	\$68,379	\$65,336	+3,043	+4.66%

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(Source: Education Data Partnership, www.Ed-Data.K12.ca.us)

Nearly all San Carlos School District salaries are higher! Sounds like the proponents fear that our most “qualified and experienced” teachers will abandon their positions for lower-paying jobs elsewhere in the County.

Do you share their fear?

But surely, the higher salaries here are producing superior academic results. Right?

Again, let's compare:

Students' STAR ⁽¹⁾ test scores	San Carlos School District	Burlingame School District
English	81%	81%
Math	78%	77%
Science	88%	86%
History	79%	83%
Average:	81.5%	81.75%

In 2011-12,⁽²⁾ Burlingame School District's and our students' levels nearly matched.

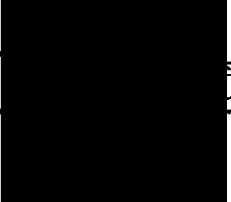
But it cost Burlingame much less:

San Carlos School District is spending over 12% more (\$9,292/year!) per student⁽³⁾ than Burlingame— for virtually the same results.

Yet they think they deserve a tax increase.

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

Do you agree with them?

By  s Officer

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Meantime, although the District is spending \$9,292 per student,⁽³⁾ their revenues are \$9,517 per student.⁽³⁾

So, they're letting \$225/year per student go unused?

Instead of asking us to tax ourselves even more, **they should issue us refunds!**

Clearly, more money doesn't equal higher test scores or better education.

Restore financial sanity to our schools! Vote NO on Measure __.

For more information: www.SVTaxpayers.org/2015-san-carlos-sd-parcel-tax

(1) California's Standardized Testing and Reporting Program

(2) Latest figures available.

(3) Based on Average Daily Attendance (ADA).

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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 San Carlos School District 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"/>	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:
<input type="checkbox"/>	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:
<input checked="" type="checkbox"/>	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: <u>Silicon Valley Taxpayers Association</u>	
Principal Officer's Printed Name and Title: <u>Mark W.A. Hinkle: President</u>	Principal Officer's Signature: [Redacted]
Contact Person's Printed Name: <u>Mark W.A. Hinkle</u>	Email: [Redacted]
Phone: [Redacted]	Fax: <u>N/A</u>
<input checked="" type="checkbox"/>	Individual(s) eligible to vote on the measure Individual signers must be eligible to vote on the measure.
Contact Person: <u>Michael G. Steiner</u>	Phone: [Redacted]
Mailing Address: [Redacted]	
Fax: [Redacted]	

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
1.	Name: <u>Mark W.A. Hinkle</u> Title: <u>President, Silicon Valley Taxpayers Association</u> Phone: [Redacted] Address: [Redacted] Signature: [Redacted] Date: <u>2/13/15</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.	Name: <u>Harland Harrison</u> Title: <u>Secretary, Libertarian Party of San Mateo County</u> Phone: [Redacted] Address: [Redacted] Signature: [Redacted] Date: <u>2/13/2015</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.	Name: <u>Michael G. Stogner</u> Title: <u>Resident of San Carlos</u> Phone: [Redacted] Address: [Redacted] Signature: [Redacted] Date: <u>2/13/2015</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4.	Name: _____ Title: _____ Phone: _____ Address: _____ Signature: _____ Date: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	Name: _____ Title: _____ Phone: _____ Address: _____ Signature: _____ Date: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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