Office of the City Clerk
330 W. 20th Avenue
San Mateo, CA 94403

Ballot Measure Rebuttal Argument Submission Form

If both an argument in favor of and an argument against a measure have been selected for publication in the Sample Ballot & Official Voter Information Pamphlet, a **typed** rebuttal to the argument in favor of or the argument against the measure may be submitted as outlined in this form.

The author(s) of the primary argument of the measure may prepare and submit a rebuttal argument or may authorize in writing any other person or persons to prepare, submit or sign the rebuttal argument.

A rebuttal argument will 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, the name of the association and the printed name and signature of at least one of its principal officers.

Word count limit for Rebuttal Arguments = 250 words

Ballot Measure H for the Statewide General Election to be held on Nov 03, 2026.

☑ Rebuttal to Argument in Favor of Measure H ☐ Rebuttal to Argument Against Measure _____

Signed by Same Individual(s) Selected for the Voter Information Pamphlet for the Primary Argument	
If the rebuttal argument is signed by the same individual(s) as those already selected for the Voter Information Pamphlet for the primary argument, check the following box and **skip** the back side of this form.	
☐	Rebuttal Argument Is Signed by Same Individual(s) Selected for the Voter Information Pamphlet for the Primary Argument
	Contact Person's Printed Name:
	Phone: / Email:

Signed by Different Individual(s) than Individual(s) Selected for the Voter Information Pamphlet for the Primary Argument	
The author(s) of the primary argument may authorize *any other person or persons* to sign the rebuttal argument. If signers are new for the rebuttal argument, please check the following box, complete the back side of this form and attach the written authorization (the Authorization Form for Change in Signers of Rebuttal Argument) from the primary argument author(s).	
☑	Rebuttal Argument Is Signed by New Signers as Authorized by Primary Argument Author(s)
	Contact Person's Printed Name: Taso Zagrafos
	[redacted]

Arguments will be emailed to the contact person listed here for review before they are printed in the Sample Ballot & Official Voter Information Pamphlets.

Please complete the reverse side of this form.

City Clerk, Martin McTaggart: mmctaggart@cityofsanmateo.org

Rebuttal Argument Signers Form			Pronouns
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. A signer can only list one title. Honorifics such as M.D., Dr., Esquire, etc. with a name are not accepted. If the signers are part of a bona fide association, for each such signing individual(s), the title under the signer's name shall list the name of that bona fide association and may include their position within that association. By signing below, the undersigned state that they have read the argument and believe it not to be false or misleading. **Type** information clearly.			Check one of the boxes below
1.	Name: Thomas Morgan	Title: President of San Mateo United	He/ His: ☑ She/ Her: ☐ They/ Them: ☐
[redacted]		Date: 8/16/2026	
		Title:	He/ His: ☐ She/ Her: ☐ They/ Them: ☐
Phone:		Email:	
Address:			
Signature:		Date:	
3.	Name:	Title:	He/ His: ☐ She/ Her: ☐ They/ Them: ☐
Phone:		Email:	
Address:			
Signature:		Date:	
4.	Name:	Title:	He/ His: ☐ She/ Her: ☐ They/ Them: ☐
Phone:		Email:	
Address:			
Signature:		Date:	
5.	Name:	Title:	He/ His: ☐ She/ Her: ☐ They/ Them: ☐
Phone:		Email:	
Address:			
Signature:		Date:	

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

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1. Name: Charles Hoeltz	Title: Retired Supervisor	He/ His: ☒
[redacted]		She/ Her: ☐
[redacted]	Date: 8/[redacted]/2025	They/ Them: ☐
2. Name:	Title:	He/ His: ☐
Phone:	Email:	She/ Her: ☐
Address:		They/ Them: ☐
Signature:	Date:	
3. Name:	Title:	He/ His: ☐
Phone:	Email:	She/ Her: ☐
Address:		They/ Them: ☐
Signature:	Date:	
4. Name:	Title:	He/ His: ☐
Phone:	Email:	She/ Her: ☐
Address:		They/ Them: ☐
Signature:	Date:	
5. Name:	Title:	He/ His: ☐
Phone:	Email:	She/ Her: ☐
Address:		They/ Them: ☐
Signature:	Date:	

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Pronouns — Check one of the boxes below

1.	Name: James Cravalho	Title: Retired Contractor	He/His: ☒
	[redacted]		She/Her: ☐
	[redacted]	Date: 8/16/26	They/Them: ☐
2.	Name:	Title:	He/His: ☐
	Phone:	Email:	She/Her: ☐
	Address:		They/Them: ☐
	Signature:	Date:	
3.	Name:	Title:	He/His: ☐
	Phone:	Email:	She/Her: ☐
	Address:		They/Them: ☐
	Signature:	Date:	
4.	Name:	Title:	He/His: ☐
	Phone:	Email:	She/Her: ☐
	Address:		They/Them: ☐
	Signature:	Date:	
5.	Name:	Title:	He/His: ☐
	Phone:	Email:	She/Her: ☐
	Address:		They/Them: ☐
	Signature:	Date:	

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1.	Name: Arvout ter Schure	Title: District 9 S.M.C. Dz. Parks Commissioner	He/ His: ☒ She/ Her: ☐ They/ Them: ☐
	[redacted]	Date: 08/16/2026	
2.	Name:	Title:	He/ His: ☐ She/ Her: ☐ They/ Them: ☐
	Phone:	Email:	
	Address:		
	Signature:	Date:	
3.	Name:	Title:	He/ His: ☐ She/ Her: ☐ They/ Them: ☐
	Phone:	Email:	
	Address:		
	Signature:	Date:	
4.	Name:	Title:	He/ His: ☐ She/ Her: ☐ They/ Them: ☐
	Phone:	Email:	
	Address:		
	Signature:	Date:	
5.	Name:	Title:	He/ His: ☐ She/ Her: ☐ They/ Them: ☐
	Phone:	Email:	
	Address:		
	Signature:	Date:	

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Check one of the boxes below

1.	Name: Thomas Weissmiller	Title: Army Veteran	He/ His: ☒
	[redacted]		She/ Her: ☐
	[redacted]	Date: 08/17/2026	They/ Them: ☐
2.		Title:	He/ His: ☐
Phone:		Email:	She/ Her: ☐
Address:			
Signature:		Date:	They/ Them: ☐
3.	Name:	Title:	He/ His: ☐
Phone:		Email:	She/ Her: ☐
Address:			
Signature:		Date:	They/ Them: ☐
4.	Name:	Title:	He/ His: ☐
Phone:		Email:	She/ Her: ☐
Address:			
Signature:		Date:	They/ Them: ☐
5.	Name:	Title:	He/ His: ☐
Phone:		Email:	She/ Her: ☐
Address:			
Signature:		Date:	They/ Them: ☐

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