



CITY AND COUNTY OF SAN FRANCISCO DEPARTMENT OF ELECTIONS

John Arntz, Director

Ballot Argument Control Sheet A

Control Sheet A must be submitted for every ballot argument, with required signatures and author information. If your argument has more than one author, you must also submit Control Sheet B with required signatures and information for all additional authors.

For an argument submitted on behalf of an organization, the "Individual" section must also be completed by a principal officer of the organization who must be a registered San Francisco voter.

If an argument states that an individual or organization other than the author supports or the ballot measure, or agrees with or endorses the argument, a completed and signed Form is required.

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DEPARTMENT OF ELECTIONS	
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Rebuttal to Opponent Argument **D**

Facilitate typesetting, and reduce the possibility of transcription error by sending an electronic copy of your ballot argument text within 24 hours after submission to the Department at publications@sfgov.org.

Section 1: Argument Information

Proposition **D**

Proponent Argument ☐

Rebuttal to Proponent Argument ☐

Paid Argument in Favor ☐

Opponent Argument ☐

Rebuttal to Opponent Argument ☒

Paid Argument Against ☐

Section 2: Author Information

Declaration Related to Proponent and Opponent Arguments

I attest under the penalty of perjury that I am an Author of the **Proponent Argument** for Proposition ____ being submitted and that I am not a Non-supporter of this measure. A Non-supporter is defined as a person who, with respect to a measure:

- Is a treasurer, officer, or member of a committee that has made or plans to make expenditures in opposition to the measure;
- Has received or been promised any compensation or thing of value from such a committee to perform consulting services for that committee; or
- Has authorized their name or likeness to appear on campaign literature or in advertising that advocates for the defeat of the measure.

I attest under the penalty of perjury that I am an Author of the **Opponent Argument** for Proposition ____ being submitted and that I am not a Supporter of this measure. A Supporter is defined as a person who with respect to a measure:

- Is a treasurer, officer, or member of a committee that has made or plans to make expenditures in support of the measure;
- Has received or been promised any compensation or thing of value from such a committee to perform consulting services for that committee; or
- Has authorized their name or likeness to appear on campaign literature or in advertising that advocates for the adoption of the measure.

Complete the following to indicate whether the Author is an individual or an organization:

Individual (or principal officer of Organization) ☒

Full Name (Print) **Adrian Tirtanadi**

Title (If Applicable) **Executive Director**

San Francisco Address (Where you are Registered) [REDACTED]

Signature → [REDACTED]

Email [REDACTED]

Organization (Entity) ☐ (If selected, complete both the Individual Author section and the Organization section)

Name of Organization (Print) **Open Door Legal**

Who should be listed as an Author for your Organization?

Only the Organization ☐

Both the Officer and the Organization ☒

* Check if the title or identifying information is for identification purposes only, if you are signing as an individual and not of behalf of an organization. ☐

Signature → [REDACTED]

Email [REDACTED]

Section 3: Submitter Information

The submitter is the person who delivers the argument and supporting materials to the Department. If there is a question or issue with a submission, the Department will contact the submitter.

Full Name (Print) **Francis Falzon**

Phone [REDACTED]

Mailing Address [REDACTED]

Signature → [REDACTED]

Email [REDACTED]

Section 4: Information for Paid Arguments

Paid arguments must include information about the true source of funds for the publication of the argument. It is also required to indicate whether the true source of funds is a recipient committee. This information will be printed below the argument and the author information in the Voter Information Pamphlet.

The true source of funds for the printing fee of this argument:

Is the true source of funds a recipient committee, as defined by CA Gov. Code §82013?

Yes ☐ No ☐

If the true source(s) of funds is a recipient committee, list the three largest contributors below:

1.
2.
3.

Section 5: Argument Text

The text of your argument will be printed exactly as submitted. Ensure that your argument meets the legal word limit. You may request that specific argument text be printed in bold, italic, or bold italic type. Type your argument with the desired formatting, or underline the argument text to be formatted and in the left column, mark "B" for bold, "I" for italics, or "BI" for bold italics. Other special formatting is not permitted. **Include author information in argument text.**

Format B, I, BI	Keep Text Within the Vertical Lines	# of words per line
	<p>A letter from domestic violence survivor Karen Miron:</p> <p>"My name is Karen Miron. I'm a mother, daughter, and domestic violence survivor. I want to tell you why Proposition D is necessary for every person who has been in my situation.</p> <p>My ex-boyfriend was abusive. When he was mad, he would hit me; I've had a fractured nose, multiple black eyes, and bruises all over my body. In 2015, I had our daughter, Avi. One day he started shoving me again and I picked up Avi and left. I saw the fear in her eyes and realized I didn't want to continue the cycle of abuse that I had experienced.</p> <p>I fought for full custody, but my ex-boyfriend abused the system. Like many domestic violence survivors, I felt lost and stuck. If my ex-boyfriend had custody, I was sure Avi would be in danger. But I had no money to protect her. Many women like me don't have resources or help. So they stay, thinking it's their only option.</p> <p>I was lucky to get help from Open Door Legal. They fought alongside me to get full custody, and we won. But not every domestic violence survivor is as lucky as I was. I am so excited to hear that our city wants to protect survivors like myself and my daughter. Legal services helped me protect my family and build our future.</p> <p>Please vote Yes on Proposition D to provide a right to legal counsel for domestic violence survivors like me."</p> <p>Executive Director Adrian Tirtanadi, Open Door Legal, non-profit legal service provider</p>	
If handwritten information or a revision is unclear, Department staff will interpret the handwritten information to the best of their abilities; this interpretation is final.		
Total Word Count		

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Total # of words=	X \$2/word =	+ \$200 publication fee =	Staff Initials
# of signatures submitted in lieu of publication fee		Receipt #	
X \$0.50/signature		Check #	
Adjusted Fee Total		Amount Paid	



CITY AND COUNTY OF SAN FRANCISCO
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Ballot Argument Assignment Form

Under certain circumstances, the individual or entity entitled to author a proponent, opponent, or rebuttal argument, may assign the right to author the argument to another individual or entity.

If an eligible author assigns the right to author the proponent, opponent, or rebuttal argument to someone else a completed and signed Assignment Form is required.

Anyone assigned to author an argument must be eligible under SFMEC §545 to author an argument.

For details related to the assignment of the right to submit proponent, opponent, and rebuttal arguments see SFMEC §550(c)(d).

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Section 1: Argument Information

Proposition D

Proponent Argument ☐

Rebuttal to Proponent Argument ☐

Opponent Argument ☐

Rebuttal to Opponent Argument ☒

Section 2: Proponent/Opponent Information

By signing below, I assign the right to submit the ballot argument for Proposition D and confirm that I am entitled to assign the right to submit the argument to someone else.

Full Name (Print) Catherine Stefani

Title (If Applicable) Supervisor

San Francisco Address (Where you are Registered) [REDACTED]

Signature 

Email [REDACTED]

Section 3: Assignment Information

By signing below, I accept the assignment to submit the ballot argument for Proposition D and confirm that I am an eligible author.

Full Name (Print) Adrian Tirtanadi

Phone [REDACTED]

San Francisco Address (Where you are Registered) [REDACTED]

Signature 

Email [REDACTED]

Section 1: Argument Information

Proposition

Proponent Argument ☐

Rebuttal to Proponent Argument ☐

Opponent Argument ☐

Rebuttal to Opponent Argument ☐


Section 2: Proponent/Opponent Information

By signing below, I assign the right to submit the ballot argument for Proposition and confirm that I am entitled to assign the right to submit the argument to someone else.

Full Name (Print)

Title (If Applicable)

San Francisco Address (Where you are Registered)

Signature 

Email

Section 3: Assignment Information

By signing below, I accept the assignment to submit the ballot argument for Proposition and confirm that I am an eligible author.

Full Name (Print)

Phone

San Francisco Address (Where you are Registered)

Signature 

Email



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DEPARTMENT OF ELECTIONS

John Arntz, Director

Ballot Argument Consent Form

If an argument states that an individual or organization other than the author supports or opposes the ballot measure, or agrees with or endorses the argument, a completed and signed Consent Form is required.

Because anyone listed as an author or mentioned in an argument should have the opportunity to review the argument, the full text of the argument must appear on all Consent Forms.

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Proposition D

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Format B, I, BI	Keep Text Within the Vertical Lines	# of words per line
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<i>If handwritten information or a revision is unclear, Department staff will interpret the handwritten information to the best of their abilities; this interpretation is final.</i>		
Total Word Count		

Section 3: Consent Required

I verify that I have read the complete text of the ballot argument above, and authorize that my name or the name of my organization, which I am an authorized representative of, may be printed, exactly as it appears in the text of the argument in the Voter Information Pamphlet.

Full Name (Print) KAREN MIRON

Name of Organization (if applicable)

Signature

