



CITY AND COUNTY OF SAN FRANCISCO
DEPARTMENT OF ELECTIONS

John Arniz, 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 opposes the ballot measure, or agrees with or endorses the argument, a completed and signed Consent Form is required.

Facilitate typesetting, and reduce the possibility of transcription error by sending an email 24 hours after submission to the Department at publications@sfgov.org.

Office Use Only
2022 AUG 18 AM 10:34
DEPARTMENT OF ELECTIONS
Time/Date Stamp

PAID YES A-1

Section 1: Argument Information

Proposition A

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) LEO MARTINEZ

Title (If Applicable) VICE-PRESIDENT

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

Signature [REDACTED]

Email MARTINEZLEO5R@YAHOO.COM

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

Name of Organization (Print) RETIRED FIRE FIGHTERS AND SPOUSES

Who should be listed as an Author for your Organization? ASSOCIATION OF THE S.F.F.D.

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 [REDACTED]

Signature [REDACTED]

Section 3: Submitter

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) TIMOTHY O'BRIEN

Phone [REDACTED]

Mailing Address [REDACTED]

Signature [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:

RETIRED FIRE FIGHTERS AND SPOUSES ASSOCIATION OF THE S.F.F.D

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:

-
-
-

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>RESTORE RETIREMENT BENEFITS FOR RETIRED FIRE FIGHTERS, THEIR SPOUSES AND WIDOW(ER)S.</p> <p>Proposition A restores a method of calculating annual retirement pay increases for older (average age 85) retirees, spouses and widow(er)s. Having been retired over 25 years, we have seen inflation erode our ability to remain independent. Support us and vote YES ON PROPOSITION A.</p> <p>LEO MARTINEZ, VICE-PRESIDENT RETIRED FIRE FIGHTERS AND SPOUSES ASSOCIATION OF THE S.F.F.D.</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		56

Office Use Only				
Total # of words= 56 X \$2/word = 112 + \$200 publication fee = \$312				Staff Initials
# of signatures submitted in lieu of publication fee		Receipt #		ms
X \$0.50/signature		Check #		
Adjusted Fee Total		Amount Paid		



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.

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DEPARTMENT OF ELECTIONS

Time/Date Stamp

PAID YES A-2

Section 1: Argument Information

Proposition A

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.

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- 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) Moises Garcia

Title (If Applicable)

San Francisco Address (Where you are Registered)

Signature

Email

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

Name of Organization (Print) San Francisco Democratic Central Committee

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

Email

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) FEDERICO J. SAULIER

Phone

Mailing Address

Signature

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
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Section 2: Argument Text

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Format B, I, BI	Keep Text Within the Vertical Lines	# of words per line
<p>As San Franciscans we must stand up and fight to have our most vulnerable retired SENIOR City Workers pension benefits restored</p> <p>Prop A only applies to only 4,500 former city employees who retired before Nov. 6, 1996 who are being denied their supplemental Cost of Living Adjustment. This group of Seniors has an average age of 86 and older. Because of this group's advanced age, time is running out</p> <p>Many of these retirees are now living on less than \$22,000 a year.</p> <p>These City workers on Prop A dedicated their lives to serving the City of San Francisco, only to have a pension benefit taken away. It is the only time in the history of San Francisco that a pension benefit was taken away</p> <p>Let's right this wrong - before it's too late. Please vote YES on Prop A!</p> <p>Moises Gracia San Francisco Democratic Central Committee</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

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

125

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Total # of words= 125	X \$2/word = 250	+ \$200 publication fee = 450		
# 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 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 opposes the ballot measure, or agrees with or endorses the argument, a completed and signed Consent Form is required.

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.

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PAID YES A-3

Section 1: Argument Information

Proposition A

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) Mike Casey

Title (If Applicable) President

San Francisco Address (Where you are Registered) _____

Signature _____

Email _____

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

Name of Organization (Print) San Francisco Labor Council

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 on behalf of an organization. ☐

Signature _____

Email _____

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) FEDERICO J. SAUCHEZ Phone _____

Mailing Address _____

Signature _____

Email _____

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>Vote Yes on Prop A - Restoring Retirees Pension Benefits</p> <p>The Labor Community of San Francisco stands united in its effort to restore what our brother and sisters fought and earned working so hard for the City of San Francisco. Most workers gave 30 years of service and retired before November 6, 1996. They need your help with Yes Vote on Prop A. 75% of this small group of seniors are miscellaneous workers with benefits less than \$22,000.</p> <p>Join us in helping the very people that fought for our wages working conditions. Solidarity is at the core of the labor movement. The time is now. Vote Yes on A!!!</p> <p>San Francisco Labor Council</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.		103
Total Word Count		

Office Use Only				
Total # of words= 103 X \$2/word = 206 + \$200 publication fee = 406				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
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.

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2022 AUG 22 PM 4:37
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Time/Date Stamp

PAID YES A-4

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 A

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

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- 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:

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- 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)

Lawrence J. Mazzola Jr.

Title (If Applicable)

President

San Francisco Address (Where you live)

Signature



Organization (Entity) ☒

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

Name of Organization (Print)

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



Email

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)

FEDERICO J. SANCHEZ

Phone

Mailing Address

Signature



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.

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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>Section 2: Argument Text</p> <p>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.</p>		
Format B, I, BI	Keep Text Within the Vertical Lines	# of words per line
	<p>Vote Yes on Prop A- Restoring Retirees Pension Benefits</p> <p>The Labor Community of San Francisco stands united in its effort to restore what our union brothers and sisters fought and earned working so hard for the City of San Francisco. Most workers gave 30 years of service and retired before November 6, 1996. They need your help with Yes Vote on Prop A. 75% of this small group of seniors are miscellaneous workers with benefits less than \$22,000.</p> <p>Join us in helping the very people that fought for our wages working conditions. Solidarity is at the core of Labor movement. The time is now, Vote Yes on A!!!</p> <p>LARRY MAZZOLA JR.</p>	
<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.</p>		
Total Word Count		
<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.</p>		
Total Word Count		101

Office Use Only				Staff Initials
Total # of words= 101		X \$2/word = 202	+ \$200 publication fee = 402	
# of signatures submitted in lieu of publication fee		Receipt #		
X \$0.50/signature		Check #		
Adjusted Fee Total		Amount Paid		



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John Arntz, Director

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DEPARTMENT OF ELECTIONS

Time/Date Stamp

PAID YES A-5

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Section 1: Argument Information

Proposition A

Proponent Argument ☐

Rebuttal to Proponent Argument ☐

Paid Argument in Favor ☒

Opponent Argument ☐

Rebuttal to Opponent Argument ☐

Paid Argument Against ☐

Section 2: Author Information

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- 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) Imelda Carrasco

Title (If Applicable)

chicano/Latino
Chair

San Francisco Address (Where you are Registered)

Signature

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

Name of Organization (Print) Latin X democratic club

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, not on behalf of the organization. ☐

Signature

Section 3: Sub

The submitter is the _____
a submission, the Department will contact the submitter.

Full Name (Print)

FEDERICO J. SANCHEZ

Phone

Mailing Address

Signature

Section 4: Information for Paid Arguments

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Format B, I, BI	Keep Text Within the Vertical Lines	# of words per line									
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# of signatures submitted in lieu of publication fee		Receipt #	
X \$0.50/signature		Check #	
Adjusted Fee Total		Amount Paid	

131



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 opposes the ballot measure, or agrees with or endorses the argument, a completed and signed Consent Form is required.

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DEPARTMENT OF ELECTIONS
Time/Date Stamp
PAID YES A-6

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 A

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) MARIE JOBLING

Title (If Applicable)

San Francisco Address (Where you are Registered)

Signature

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

Name of Organization (Print)

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

Email

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)

FEDERICO J. SAUCHEZ

Phone

Mailing Address

Signature

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																											
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John Arntz, Director

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PAID YES A-7

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Paid Argument in Favor ☒

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- 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) LARRY G. FINE

Title (If Applicable)

San Francisco Address (Where you are Registered)

Signature

Email

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

Name of Organization (Print)

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

Email

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)

FEDERICO J. SANCHEZ Phone

Mailing Address

Signature

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