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CITY CLERK'S OFFICE

County of Yolo Elections Office

Ballot Measure Argument Form

		Office Use Only
<p>This Ballot Measure Argument Form must be submitted for every ballot measure direct argument and rebuttal argument, with required signatures and author information.</p> <p>The Yolo County Elections Office allows electronic submission of documents if the scanned copy is clear and readable. You may email your completed form and attach the argument in Microsoft Word version to candidateservices@yolocounty.org.</p> <p>If you submit this form in person at the Yolo County Elections Office, please send an electronic copy of your ballot measure argument text in Microsoft Word within 24 hours after submission to candidateservices@yolocounty.org. This will facilitate typesetting and reduce the possibility of transcription error.</p> <p>Documents submitted and filed by deadline will be the final version. Any errors will be printed on the County Voter Information Guides and/or ballot exactly as submitted. A proof will be sent to the primary filer for confirmation that it matches the argument as submitted—no other corrections will be accepted.</p>		
Date of Election: <u>November 5, 2024</u>		
Direct Argument due date (E- <u>110</u>): <u>July 18, 2024</u>		
Examination Period (E- <u>110</u> to E- <u>100</u>): <u>July 18, 2024 to July 28, 2024</u>		
Rebuttal Argument due date (E- <u>99</u>): <u>July 29, 2024</u>		
Examination Period (E- <u>99</u> to E- <u>89</u>): <u>July 29, 2024 to August 8, 2024</u>		
SECTION 1: ARGUMENT INFORMATION		
Jurisdiction: <u>City of Woodland</u>		
Measure Letter <u>U</u> (if available) – letters will be assigned after 5:00 p.m. on E-88 or earlier: _____		
Filer Contact (name, email, phone): <u>Matt Rexroad 916 539 0455 matt@rexroad.com</u>		
Select Who You are, and Which Argument You Are Submitting		
Proponent:	Opponent:	
<input type="checkbox"/> Direct Argument in Favor	<input checked="" type="checkbox"/> Direct Argument Against	
<input type="checkbox"/> Rebuttal Argument to Direct Argument Against	<input type="checkbox"/> Rebuttal Argument to Direct Argument in Favor	

SECTION 2: AUTHOR INFORMATION

Declaration Related to Proponent / Opponent Primary and Rebuttal Arguments
(Elections Code §§ 9161, 9164, 9167, 9170, 9501, 9501.5, 9504, 9600)

Please Select the Correct Line

- I am an Author of the Proponent Argument (noted above) for Measure U being submitted. I support this measure.
- I am an Author of the Opponent Argument (noted above) for Measure U being submitted. I oppose this measure.

For any argument (direct or rebuttal) submitted on behalf of an organization or bona fide association of citizens, the "Argument Signer Form" in Section 3 below must be completed by a principal officer of the organization or bona fide association of citizens and the organization must submit one of the following:

- its articles of incorporation, articles of association, partnership documents, bylaws, or similar documents;
- letterhead containing the name of the organization and its principal officers; **OR**
- if the organization or association is a primarily formed committee established to support or oppose the measure, its statement of organization (FPPC Form 410) filed pursuant to Government Code 84101.

Office Use Only

Verified Individual Submitter as a:

- Registered Voter in District
- Governing Board Member
- Principal Officer of Organization

Organization Submitted Required Documentation:

- articles of incorporation or association, bylaws, or similar
- letterhead
- FPPC Form 410
- One (1) to five (5) signers submitted.

Staff Initials _____

SECTION 3: ARGUMENT TEXT

PLEASE ATTACH A COPY OF YOUR DIRECT / REBUTTAL ARGUMENT TO THIS FORM.

The text of your direct and/or rebuttal argument will be printed exactly as submitted. Type your direct and/or rebuttal argument with the desired formatting. Ensure that your direct and/or rebuttal argument meets the legal word limit. You may request that specific text is printed in bold, italic, or bold italic font type.

The Yolo County Elections Office uses standard typefaces, font sizes, headers, and bullets in all measure-related documents. In addition, measure-related documents use the following formatting standards: 1) indent increments will be set at 0.25"; 2) spacing will be standardized to language-appropriate number of spaces following periods, colons, commas, and semicolons; 3) tabs will be used for numbered and/or bulleted indented text; and 4) signers will be formatted as conformed signatures with titles below the name. All measure-related documents submitted to the Yolo County Elections Office will be formatted to the prescribed standards.

PLEASE NOTE: If the direct and/or rebuttal argument is handwritten or a revision is unclear, the Yolo County Elections Office staff will interpret the handwritten information to the best of their abilities. That interpretation is final.

Measure U is a regressive tax hike that will cost the average Woodland resident approximately \$270 per year, at a time when families are facing soaring grocery bills, utility rate increases, crippling high gas prices, and tax increases from numerous different government agencies. Our residents can't afford an unfair, unnecessary sales tax hike.

Unlike other proposals, Measure U doesn't include safeguards or exemptions to protect seniors and low-income families. Under Measure U, the wealthiest families will pay the same as our least fortunate. That is unfair and not who we are as a community.

Don't just take our word for it. Listen to the politicians that put Measure U on the ballot. Councilwoman Victoria Fernandez suggested that a tax of this type unfairly penalizes the City's lower income residents who are paying a much larger portion of their income on sales taxes than the higher income residents. Councilwoman Mayra Vega spoke out against the sales tax measure because she says that many local residents are currently dealing with large increases to their homeowners insurance and upcoming utility rate increases from PG&E, and they cannot afford another tax increase right now. A spokesperson for the City of Woodland even said that the City does not really need the extra funds which would be raised by the ballot measure and nothing would need to be cut if the measure fails.

We agree. The City of Woodland needs to live within its means and use existing tax revenue to maintain services. It is inappropriate to keep going to taxpayers and asking for more. Say NO to an unfair, unnecessary sales tax hike. Vote NO on Measure U.

Section 3 continued...

Check Signing Order for Each Signatory Below (1, 2, 3, etc.)

Argument Signer Form

The undersigned author(s) of the attached argument hereby state that such argument is true and correct to the best of their knowledge and belief.

1. **Gender:**
 Masculine / Feminine / Androgynous or Non-binary / Other: _____

2. **I am a:**
 Registered Voter in District / Governing Board Member / Principal Officer of the Organization Submitting the Argument

3. **Name of Signer (to be printed on argument):** JUSTIN SMITH

4. **[IF APPLICABLE] Signer's Title (to be printed on argument):**
K-12 EDUCATOR

5. **[IF APPLICABLE] Name of Organization or Bona Fide Association of Citizens (to be printed on argument):**

[For individuals] Residential Address (where you are registered to vote):
620 WILDWOOD WAY, WOODLAND, CA 95695

[For governing board members and principal officers] Business Address:

Phone: (925) 518-7588 **Email:** noteforjustin@gmail.com

SIGNATURE  Under penalty of perjury, I attest the above information meets the required criteria for an Individual or for an Organization or Bona Fide Association of Citizens for purposes of submitting an argument:


1. **Gender:**
 Masculine / Feminine / Androgynous or Non-binary / Other: _____

2. **I am a:**
 Registered Voter in District / Governing Board Member / Principal Officer of the Organization Submitting the Argument

3. **Name of Signer (to be printed on argument):** Kellie Morgan

4. **[IF APPLICABLE] Signer's Title (to be printed on argument):**
Downtown Business Woman

5. **[IF APPLICABLE] Name of Organization or Bona Fide Association of Citizens (to be printed on argument):**

[For individuals] Residential Address (where you are registered to vote):
207 W. Monte Vista Circle Wld., CA 95695

[For governing board members and principal officers] Business Address:

Phone: 530-681-0135 **Email:** Kellie@4gobrats.com

SIGNATURE  Under penalty of perjury, I attest the above information meets the required criteria for an Individual or for an Organization or Bona Fide Association of Citizens for purposes of submitting an argument:


Section 3 continued...

Cross out Signing Order for Each Signatory Below (1, 2, 3, etc.)	Argument Signer Form
The undersigned author(s) of the attached argument hereby state that such argument is true and correct to the best of their knowledge and belief.	
<ol style="list-style-type: none"> 1. 2. 3. 4. 5. 	<p>Gender: <input checked="" type="checkbox"/> Masculine / <input type="checkbox"/> Feminine / <input type="checkbox"/> Androgynous or Non-binary / <input type="checkbox"/> Other: <u>Male</u></p> <p>I am a: <input checked="" type="checkbox"/> Registered Voter in District / <input type="checkbox"/> Governing Board Member / <input type="checkbox"/> Principal Officer of the Organization Submitting the Argument</p> <p>Name of Signer (to be printed on argument): <u>Alfredo S. Lopez</u></p> <p>[IF APPLICABLE] Signer's Title (to be printed on argument): <u>Body Shop Owner</u></p> <p>[IF APPLICABLE] Name of Organization or Bona Fide Association of Citizens (to be printed on argument): <u>1241 Armfield Ave</u></p> <p>[For individuals] Residential Address (where you are registered to vote): 311 C St <u>Woodland, CA 95776</u></p> <p>[For governing board members and principal officers] Business Address: </p> <p>Phone: <u>530-383-3158</u> Email: <u>alopez9303@SBCGlobal.net</u></p>
<p>SIGNATURE</p> 	<p>Under penalty of perjury, I attest the above information meets the required criteria for an Individual or for an Organization or Bona Fide Association of Citizens for purposes of submitting an argument:</p> <p><u>Alfredo S. Lopez</u></p>
<ol style="list-style-type: none"> 1. 2. 3. 4. 5. 	<p>Gender: <input checked="" type="checkbox"/> Masculine / <input type="checkbox"/> Feminine / <input type="checkbox"/> Androgynous or Non-binary / <input type="checkbox"/> Other: <u>MALE</u></p> <p>I am a: <input checked="" type="checkbox"/> Registered Voter in District / <input type="checkbox"/> Governing Board Member / <input type="checkbox"/> Principal Officer of the Organization Submitting the Argument</p> <p>Name of Signer (to be printed on argument): <u>AMRIK SAHOTA</u></p> <p>[IF APPLICABLE] Signer's Title (to be printed on argument): Business and Ag <u>Small Businessman and Farmer</u></p> <p>[IF APPLICABLE] Name of Organization or Bona Fide Association of Citizens (to be printed on argument): </p> <p>[For individuals] Residential Address (where you are registered to vote): <u>721 EDGEWOOD COURT WOODLAND 95776</u></p> <p>[For governing board members and principal officers] Business Address: </p> <p>Phone: <u>530-681-8643</u> Email: <u>AMRIK SAHOTA@SBCGLOBAL.NET</u></p>
<p>SIGNATURE</p> 	<p>Under penalty of perjury, I attest the above information meets the required criteria for an Individual or for an Organization or Bona Fide Association of Citizens for purposes of submitting an argument:</p> <p><u>Amrik Sahota</u></p>

Section 3 continued...

Cross out Signing Order for Each Signatory Below (1, 2, 3, etc.)	Argument Signer Form
	The undersigned author(s) of the attached argument hereby state that such argument is true and correct to the best of their knowledge and belief.
1.	Gender: <input checked="" type="checkbox"/> Masculine / <input type="checkbox"/> Feminine / <input type="checkbox"/> Androgynous or Non-binary / <input type="checkbox"/> Other: _____
2.	I am a: <input checked="" type="checkbox"/> Registered Voter in District / <input type="checkbox"/> Governing Board Member / <input type="checkbox"/> Principal Officer of the Organization Submitting the Argument
3.	Name of Signer (to be printed on argument): <u>JEFFREY NAFF</u>
4.	[IF APPLICABLE] Signer's Title (to be printed on argument): <u>RETIRED POLICE OFFICER</u>
5.	[IF APPLICABLE] Name of Organization or Bona Fide Association of Citizens (to be printed on argument): _____
	[For individuals] Residential Address (where you are registered to vote): <u>307 W SOUTHWOOD DR, WOODLAND CA 95695</u>
	[For governing board members and principal officers] Business Address: _____
	Phone: <u>530-681-3202</u> Email: <u>JNAFF@SBCGLOBAL.NET</u>
SIGNATURE 	Under penalty of perjury, I attest the above information meets the required criteria for an Individual or for an Organization or Bona Fide Association of Citizens for purposes of submitting an argument: <u>Jeffrey Naff</u>

SECTION 3 CHECKLIST	
Office Use Only	
<p>Direct Argument Checklist (check all that apply):</p> <ul style="list-style-type: none"> <input type="checkbox"/> Author(s) meets criteria to sign? <input type="checkbox"/> Author's title as signed meets criteria? <input type="checkbox"/> Residential address meets criteria for eligible individual voter to sign? <input type="checkbox"/> Argument Signer Form signed by author(s)? <input type="checkbox"/> Signing order indicated? <input type="checkbox"/> Only author's name is listed on name line and matches signed name? <input type="checkbox"/> Author's TYPED or LEGIBLY WRITTEN title is on title line, if applicable? <input type="checkbox"/> Author's gender is selected? <input type="checkbox"/> Original or scanned signatures are clear and readable for verification? <input type="checkbox"/> Direct Argument does not exceed 300 words? <input type="checkbox"/> Author's contact information is filled out? <input type="checkbox"/> Author's document(s) filed by deadline? <p>Staff Initials _____</p>	<p>Rebuttal Argument Checklist (check all that apply):</p> <ul style="list-style-type: none"> <input type="checkbox"/> Authors filed written authorization, if different authors submitted? <input type="checkbox"/> Argument Signer Form signed by author(s)? <input type="checkbox"/> Signing order indicated? <input type="checkbox"/> Only author's name is listed on name line and matches signed name? <input type="checkbox"/> Author's TYPED or LEGIBLY WRITTEN title is on title line, if applicable? <input type="checkbox"/> Author's gender is selected? <input type="checkbox"/> Original or scanned signatures are clear and readable for verification? <input type="checkbox"/> Rebuttal Argument does not exceed 250 words? <input type="checkbox"/> Author's contact information is filled out? <input type="checkbox"/> Author's document(s) filed by deadline? <p>Staff Initials _____</p>

SECTION 4: LIST OF MEASURE SUPPORTERS OR OPPONENTS TO APPEAR ON THE BALLOT LABEL

[Assembly Bill 1416](#) was signed by the Governor and is effective as of January 1, 2023. This legislation allows direct argument signers to provide a list of individuals, associations, nonprofit organizations, or businesses that are signers or are listed within the text of the argument who support or oppose a ballot measure to be listed under the ballot label. If you wish to submit a list of supporters or opponents, please complete Section 4 by providing a list of names of the individuals, associations, nonprofit organizations, and businesses to be listed as supporters or opponents. Please refer to page 9 Section 6: Appendix A for additional guidelines regarding supporters and opponents. A sample ballot label is provided on page 10, in Section 6, Appendix B.

Every individual, association, nonprofit organization, or business listed as a supporter or opponent must sign the consent form included in Section 5.

Each supporter / opponent shall be separated by a semicolon. An individual, association, nonprofit organization, or business shall not be listed unless they support or oppose the measure and meet the criteria specified in this form.

Any association, nonprofit organization, or business listed as a supporter or opponent (1) must have existed for at least four years, and (2) must not have been originally created as a committee described in Government Code section 82013.

The list of all supporters / opponents may not exceed 125 characters in length.

To calculate the 125-character limit, please count spaces between and before names, as well as the semicolon at the end of the name. Use the worksheet below to ensure your character count meets the required criteria.

List of Names **[check one]:**

- Supporters
- Opponents

Opponents: Justin Smith, ~~K-12 educator~~; Kellie Morgan; Alfredo Lopez; Amrik Sahota, ~~farmer~~; Jeffrey Naff, ~~retired police officer~~

LIST OF INDIVIDUALS, ASSOCIATIONS, NONPROFIT ORGANIZATIONS, AND/OR BUSINESSES	# of Characters	GENDER
Justin Smith, K-12 educator <i>mf</i> ;	29	<input checked="" type="checkbox"/> masculine / <input type="checkbox"/> feminine / <input type="checkbox"/> androgynous or non-binary <input type="checkbox"/> other: _____
Kellie Morgan;	15	<input type="checkbox"/> masculine / <input checked="" type="checkbox"/> feminine / <input type="checkbox"/> androgynous or non-binary <input type="checkbox"/> other: _____
Alfredo Lopez;	15	<input checked="" type="checkbox"/> masculine / <input type="checkbox"/> feminine / <input type="checkbox"/> androgynous or non-binary <input type="checkbox"/> other: _____
Amrik Sahota, farmer <i>mf</i> ;	22	<input checked="" type="checkbox"/> masculine / <input type="checkbox"/> feminine / <input type="checkbox"/> androgynous or non-binary <input type="checkbox"/> other: _____
Jeffrey Naff, retired police officer <i>mf</i> ;	36	<input checked="" type="checkbox"/> masculine / <input type="checkbox"/> feminine / <input type="checkbox"/> androgynous or non-binary <input type="checkbox"/> other: _____
GRAND TOTAL (not to exceed 125 characters) <u>117</u>		

You must submit with your list of supporters or opponents a signed consent from every supporter or opponent. A consent form is included Section 5 below. You may use as many copies of Section 5 as needed to cover every supporter or opponent listed above.

If the list above or the consent forms do not meet the requirements of Elections Code 9170, the elections official will require the proponent or submitter of the argument to resubmit supporting documentation by 5:00 p.m. on E- 110 [Date: July 18, 2024] to meet election related deadlines.

Proponent's Initials: *mf* I UNDERSTAND, that if I am told that the list of supporters/opponents above and the related consent forms do not meet the requirements of Elections Code 9170, and I do not resubmit the documents, only supporters or opponents who are verified as meeting the requirements of Elections Code 9170 will be printed under the ballot label.

REQUIREMENTS IF NO LIST IS SUBMITTED

If no list of supporters / opponents is provided by the proponents or opponents of the measure, or there are none that meet the requirements of Elections Code § 9170, "Supporters / Opponents" shall be followed by "None Submitted" on the ballot label. Please indicate below that no list will be submitted, as applicable:

- A list of Supporters **will not be** submitted by the Proponents or Submitter of the argument in favor.
- A list of Opponents **will not be** submitted by the Proponents or Submitter of the argument against.

Supporters or Opponents to Appear on the Ballot Label shall meet one (1) of three (3) criteria (check one):

Office Use Only

- A.** An association, nonprofit organization, or business that was not originally created as a committee described in Section 82013 of the Government Code and that has been in existence for at least four years.
- B.** A current or former elected official, who may be listed with the official's title (e.g., "State Senator Mary Smith," "Assembly Member Carlos Garcia," or "former Eureka City Council Member Amy Lee"). These titles may be shortened (e.g. "Senator" or "Sen." for "State Senator" or "Asm." for "Assembly Member").
- C.** An individual who is not a current or former elected official may be listed only with the individual's first and last name and an honorific (e.g., "Dr.," "M.D.," "Ph.D.," or "Esquire"), with no other title or designation, unless it is a title representing an association, nonprofit organization, or business that meets the requirements of (A) or (B) above and that is eligible to be listed as the individual supporter or opponent of the measure.

Verified
Staff Initials

Submitter of Information shall include a signed statement attesting that the list of supporters/opponents meets the required criteria. Refer to Section 5 for Submitter Information Consent Form.

Supporters or Opponents to Appear on the Ballot Label shall meet additional criteria (check all that apply):

Office Use Only

- Reviewed all information prior to the submittal and/or resubmittal of documents.
- Does not list a political party and is not a representative of a political party.
- Does not exceed 125 characters in length (spaces, commas, semicolons, and any other characters count toward the 125-character limit.)
- List may be shortened using acronyms, abbreviations, or by leaving out words in the entity's name.

Verified
Staff Initials

ADMINISTRATORS OF CITY ELECTIONS ONLY: By E- 110 , July 18, 2024 _____, an elections official that receives a list of supporters or opponents for inclusion under the ballot label, shall, after confirming compliance with the law, forward that list to the county elections official.

If the list is not in compliance with the law, after submitting to the Yolo County Elections Office, the elections official agrees to resubmit documents by 5:00 p.m. on E- 108 , July 20, 2024 _____, that meet the requirements of Elections Code 9170.

SECTION 5: BALLOT LABEL SUPPORTER/OPPONENT CONSENT FORM(S)

If there is a question or issue with a submission, the Yolo County Elections Office will contact the submitter. The submitter is the person who delivers the direct and/or rebuttal arguments, and/or supporting materials to the Yolo County Elections Office. Every supporter / opponent, or representative of a supporter / opponent, must sign a consent form in order to be included in the ballot label.

This page may be copied so that a consent form is submitted for every supporter or opponent. Every supporter or opponent must sign their own consent form, and that form must be included in your submission.

SUPPORTER / OPPONENT SIGNER CONSENT FORM

Note: if an individual uses the name of an association, nonprofit organization, or business in their title to be included in the list of supporters or opponents, a representative of that association, nonprofit organization, or business must complete this consent form. The individual supporter/opponent and the representative may be the same person if appropriate.

If no representative of the organization or business completes this form, individuals may only use an honorific (e.g. "Dr.," "M.D.," "Ph.D.," or "Esquire") and no title that includes an organization or business name.

This individual OR association, nonprofit organization, or business:*

- 1) Supports or Opposes the measure.

[If an association, nonprofit organization, or business is listed as a supporter/opponent or used in an individual's title] This association, nonprofit organization, or business:*

- 1) Has been in existence for at least four years.
2) Was not originally created as a committee described in Government Code § 82013.

Full name of individual OR representative of association, nonprofit organization, or business* (print or type)

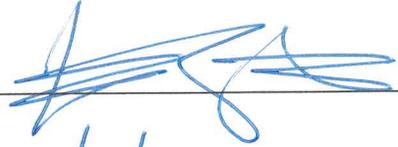
JUSTIN SMITH

Phone Number (cell / direct) (925) 518-7588

Address* 620 WILDWOOD WAY, WOODLAND, CA 95695

Email Address noteforjustin@gmail.com

Under penalty of perjury, I attest the above information is true and accurate to the best of my knowledge:

SIGNATURE  

Date: 7/17/24

* Required information.

SECTION 5: BALLOT LABELSUPPORTER/OPPONENT CONSENT FORM(S)

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If no representative of the organization or business completes this form, individuals may only use an honorific (e.g. "Dr.," "M.D.," "Ph.D.," or "Esquire") and no title that includes an organization or business name.

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- 1) Supports or Opposes the measure.

[If an association, nonprofit organization, or business is listed as a supporter/opponent or used in an individual's title]
This association, nonprofit organization, or business:*

- 1) Has been in existence for at least four years.
- 2) Was not originally created as a committee described in Government Code § 82013.

Full name of individual OR representative of association, nonprofit organization, or business* (print or type)

Kellie Mosager

Phone Number (cell / direct) 530-681-0135

Address* 207 W. Monte Vista Circle Woodland CA 95698

Email Address Kellie@leglorats.com

Under penalty of perjury, I attest the above information is true and accurate to the best of my knowledge:

SIGNATURE  Kellie Mosager

Date: 7-17-24

* Required information.

SECTION 5: BALLOT LABELSUPPORTER/OPPONENT CONSENT FORM(S)

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If no representative of the organization or business completes this form, individuals may only use an honorific (e.g. "Dr.," "M.D.," "Ph.D.," or "Esquire") and no title that includes an organization or business name.

This individual OR association, nonprofit organization, or business:*

- 1) Supports or Opposes the measure.

[If an association, nonprofit organization, or business is listed as a supporter/opponent or used in an individual's title]

This association, nonprofit organization, or business:*

- 1) Has been in existence for at least four years.
- 2) Was not originally created as a committee described in Government Code § 82013.

Full name of individual OR representative of association, nonprofit organization, or business* (print or type)

JEFFREY NAFF

Phone Number (cell / direct) 530-681-3202

Address* 307 W SOUTHWOOD DR, WOODLAND CA 95695

Email Address JNAFF@SBCGLOBAL.NET

Under penalty of perjury, I attest the above information is true and accurate to the best of my knowledge:

SIGNATURE  

Date: 7/17/24

* Required information.

SECTION 5: BALLOT LABELSUPPORTER/OPPONENT CONSENT FORM(S)

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SUPPORTER / OPPONENT SIGNER CONSENT FORM

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If no representative of the organization or business completes this form, individuals may only use an honorific (e.g. "Dr.," "M.D.," "Ph.D.," or "Esquire") and no title that includes an organization or business name.

This individual OR association, nonprofit organization, or business:*

- 1) Supports or Opposes the measure.

[If an association, nonprofit organization, or business is listed as a supporter/opponent or used in an individual's title] This association, nonprofit organization, or business:*

- 1) Has been in existence for at least four years.
- 2) Was not originally created as a committee described in Government Code § 82013.

Full name of individual OR representative of association, nonprofit organization, or business* (print or type)

Alfredo S. Lopez

Phone Number (cell / direct) 530-383-3158

Address* 1241 Arm Field. Ave Woodland. CA. 95776

Email Address alopez9303@sbcglobal.net

Under penalty of perjury, I attest the above information is true and accurate to the best of my knowledge:

SIGNATURE  

Date: 7-17-2024

* Required information.

SECTION 5: BALLOT LABELSUPPORTER/OPPONENT CONSENT FORM(S)

If there is a question or issue with a submission, the Yolo County Elections Office will contact the submitter. The submitter is the person who delivers the direct and/or rebuttal arguments, and/or supporting materials to the Yolo County Elections Office. Every supporter / opponent, or representative of a supporter / opponent, must sign a consent form in order to be included in the ballot label.

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This individual OR association, nonprofit organization, or business:*

- 1) Supports or Opposes the measure.

[If an association, nonprofit organization, or business is listed as a supporter/opponent or used in an individual's title]
This association, nonprofit organization, or business:*

- 1) Has been in existence for at least four years.
- 2) Was not originally created as a committee described in Government Code § 82013.

Full name of individual OR representative of association, nonprofit organization, or business* (print or type)

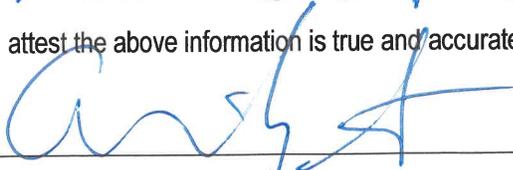
AMRIK SAHOTA

Phone Number (cell / direct) 530 - 681 - 8643

Address* 721 EDGWOOD CT. WOODLAND, CA 95698

Email Address AMRIK.SAHOTA@SBC41ORCA1.NET

Under penalty of perjury, I attest the above information is true and accurate to the best of my knowledge:

SIGNATURE  

Date: 7/17/24

* Required information.

SECTION 6: APPENDIX A

GUIDELINES FOR BALLOT LABEL LIST OF NAMES OF SUPPORTERS / OPPONENTS

1. No Supporters or Opponents may be a political party or a representative of a political party.
2. The list of Supporters or Opponents shall not exceed 125 characters in length (spaces, commas, semicolons, and any other character count toward the 125-character limit).
3. Each Supporter or Opponent on the list is separated by a semicolon.
4. Names of nonprofit organizations or businesses on the list may be shortened by the use of acronyms, abbreviations, or by leaving out words in the entity's name.
5. Every Supporter or Opponent listed that is a nonprofit organization, a business, or an individual whose title includes a nonprofit organization or business, shall include a signed statement by a representative of the nonprofit organization or business, under penalty of perjury, that includes its name and business address and attests it meets the criteria:
 - 1) association, nonprofit organization, or business supports or opposes the measure;
 - 2) association, nonprofit organization, or business has been in existence for at least four years; and,
 - 3) that it was not originally created as a committee under Government Code 82013.
6. For every Supporter or Opponent listed that is an individual, the proponents or opponents shall include a signed statement by the individual that includes the individual's name and address and attests that the individual supports or opposes the measure.
7. A representative of every association, nonprofit organization, or business that is listed as a supporter or opponent, or that is included in the title of an individual supporter or opponent, must submit with the list of supporters or opponents an attestation that the entity has been in existence for at least four years and was not originally formed as a committee under Government Code 82013.
8. Review the information above prior to the submittal and/or resubmittal of documents.
9. Within one week of receipt, a city elections official that administers city elections that received a list of supporters or opponents for inclusion on the ballot label of similar description, shall, after confirming compliance with the law, forward that list to the county elections official.
10. All submissions are viewable by the public.

CITY

**CITY OF WOODLAND
Measure M**

Shall the measure authorizing the City of Woodland to accept at least \$300,000,000 in federal and state contribution, or up to 99% of the project costs, to provide flood control for the City of Woodland and authorizing construction of the Lower Cache Creek Flood Risk Management Project, as outlined in the measure, be

adopted? **Supporters:** Tania Garcia-Cadena, Mayor; City Council Member Tom Stallard; City Council Member Richard Lansburgh **Opponents:** Garret Driver, Yolo Farm Bur; Ray Perkins, Fmr YoloCo Ag Comm; Mark Mezger, Yolo Taxpayers Assoc; Eric Paulsen, Yolo Farm Bur



Yes

No



County of Yolo Elections Office

Ballot Measure Argument Form

		Office Use Only
<p>This Ballot Measure Argument Form must be submitted for every ballot measure direct argument and rebuttal argument, with required signatures and author information.</p> <p>The Yolo County Elections Office allows electronic submission of documents if the scanned copy is clear and readable. You may email your completed form and attach the argument in Microsoft Word version to candidateservices@yolocounty.org.</p> <p>If you submit this form in person at the Yolo County Elections Office, please send an electronic copy of your ballot measure argument text in Microsoft Word within 24 hours after submission to candidateservices@yolocounty.org. This will facilitate typesetting and reduce the possibility of transcription error.</p> <p>Documents submitted and filed by deadline will be the final version. Any errors will be printed on the County Voter Information Guides and/or ballot exactly as submitted. A proof will be sent to the primary filer for confirmation that it matches the argument as submitted—no other corrections will be accepted.</p>		
Date of Election: <u>November 5, 2024</u>		
Direct Argument due date (E- <u>110</u>): <u>July 18, 2024</u>		
Examination Period (E- <u>110</u> to E- <u>100</u>): <u>July 18, 2024 to July 28, 2024</u>		
Rebuttal Argument due date (E- <u>99</u>): <u>July 29, 2024</u>		
Examination Period (E- <u>99</u> to E- <u>89</u>): <u>July 29, 2024 to August 8, 2024</u>		
SECTION 1: ARGUMENT INFORMATION		
Jurisdiction: <u>City of Woodland</u>		
Measure Letter <u>U</u> (if available) – letters will be assigned after 5:00 p.m. on E-88 or earlier: _____		
Filer Contact (name, email, phone): <u>Matt Rexroad matt@rexroad.com (916) 539-0455</u>		
Select Who You are, and Which Argument You Are Submitting		
Proponent:	Opponent:	
<input type="checkbox"/> Direct Argument in Favor	<input type="checkbox"/> Direct Argument Against	
<input type="checkbox"/> Rebuttal Argument to Direct Argument Against	<input checked="" type="checkbox"/> Rebuttal Argument to Direct Argument in Favor	

SECTION 2: AUTHOR INFORMATION

Declaration Related to Proponent / Opponent Primary and Rebuttal Arguments

(Elections Code §§ 9161, 9164, 9167, 9170, 9501, 9501.5, 9504, 9600)

Please Select the Correct Line

- I am an Author of the Proponent Argument (noted above) for Measure U being submitted. I support this measure.
- I am an Author of the Opponent Argument (noted above) for Measure U being submitted. I oppose this measure.

For any argument (direct or rebuttal) submitted on behalf of an organization or bona fide association of citizens, the "Argument Signer Form" in Section 3 below must be completed by a principal officer of the organization or bona fide association of citizens and the organization must submit one of the following:

- its articles of incorporation, articles of association, partnership documents, bylaws, or similar documents;
- letterhead containing the name of the organization and its principal officers; **OR**
- if the organization or association is a primarily formed committee established to support or oppose the measure, its statement of organization (FPPC Form 410) filed pursuant to Government Code 84101.

Office Use Only

Verified Individual Submitter as a:

- Registered Voter in District
 Governing Board Member
 Principal Officer of Organization

Organization Submitted Required Documentation:

- articles of incorporation or association, bylaws, or similar
 letterhead
 FPPC Form 410

 One (1) to five (5) signers submitted.

Staff Initials _____

SECTION 3: ARGUMENT TEXT

PLEASE ATTACH A COPY OF YOUR DIRECT / REBUTTAL ARGUMENT TO THIS FORM.

The text of your direct and/or rebuttal argument will be printed exactly as submitted. Type your direct and/or rebuttal argument with the desired formatting. Ensure that your direct and/or rebuttal argument meets the legal word limit. You may request that specific text is printed in bold, italic, or bold italic font type.

The Yolo County Elections Office uses standard typefaces, font sizes, headers, and bullets in all measure-related documents. In addition, measure-related documents use the following formatting standards: 1) indent increments will be set at 0.25"; 2) spacing will be standardized to language-appropriate number of spaces following periods, colons, commas, and semicolons; 3) tabs will be used for numbered and/or bulleted indented text; and 4) signers will be formatted as conformed signatures with titles below the name. All measure-related documents submitted to the Yolo County Elections Office will be formatted to the prescribed standards.

PLEASE NOTE: If the direct and/or rebuttal argument is handwritten or a revision is unclear, the Yolo County Elections Office staff will interpret the handwritten information to the best of their abilities. That interpretation is final.

The supporters of Measure U have made all sorts of promises about where the money generated from the tax hike will go. These are deeply untruthful arguments.

Measure U does not guarantee a single penny for homelessness, police protection, or fire services.

City officials could use the money from Measure U for anything they want, including pay raises for themselves. Measure U does not fund the critical services that residents expect, it just creates a multi-million-dollar slush fund for city officials and politicians to spend on whatever perks and pet projects they desire— on your dime. If Measure U passes, the average taxpayer in Woodland would see a tax increase of approximately \$270 per year.

Measure U worsens the cost-of-living crisis our residents are facing.

Woodland residents are already dealing with large increases to their homeowners insurance, an upcoming utility rate increase from PG&E, and proposed increases to their property taxes. We can't afford to pay even more. Worst of all, because of Measure U, working families with lower incomes will pay a much larger portion of their income on sales taxes than the higher income residents.

Don't let the dishonest arguments from the Measure U proponents fool you. No money from Measure U has to be spent on homelessness, public safety, or other essential services. City officials and politicians can spend it on whatever they want. Woodland residents are already struggling to get by. Enough is enough.

Vote NO on the Measure U tax hike.

Section 3 continued...

Check Signing Order for Each Signatory Below (1, 2, 3, etc.)

Argument Signer Form

The undersigned author(s) of the attached argument hereby state that such argument is true and correct to the best of their knowledge and belief.

1. **Gender:**
 Masculine / Feminine / Androgynous or Non-binary / Other: _____

2. **I am a:**
 Registered Voter in District / Governing Board Member / Principal Officer of the Organization Submitting the Argument

3. **Name of Signer (to be printed on argument):** JUSTIN SMITH

4. **[IF APPLICABLE] Signer's Title (to be printed on argument):**
K-12 EDUCATOR

5. **[IF APPLICABLE] Name of Organization or Bona Fide Association of Citizens (to be printed on argument):**

[For individuals] Residential Address (where you are registered to vote):
620 Wildwood Way, Woodland, CA 95695

[For governing board members and principal officers] Business Address:

Phone: (925) 518-7588 **Email:** note for justin@gmail.com

SIGNATURE  Under penalty of perjury, I attest the above information meets the required criteria for an Individual or for an Organization or Bona Fide Association of Citizens for purposes of submitting an argument:


1. **Gender:**
 Masculine / Feminine / Androgynous or Non-binary / Other: _____

2. **I am a:**
 Registered Voter in District / Governing Board Member / Principal Officer of the Organization Submitting the Argument

3. **Name of Signer (to be printed on argument):** Kellie Morgan

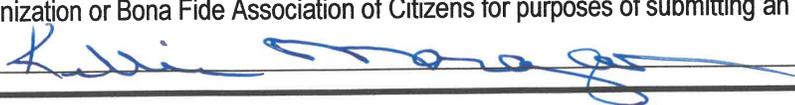
4. **[IF APPLICABLE] Signer's Title (to be printed on argument):**
Downtown Business Woman

5. **[IF APPLICABLE] Name of Organization or Bona Fide Association of Citizens (to be printed on argument):**

[For individuals] Residential Address (where you are registered to vote):
207 W. Monte Vista Circle W.D., CA 95695

[For governing board members and principal officers] Business Address:

Phone: 530.681.0135 **Email:** kellie@yborato.com

SIGNATURE  Under penalty of perjury, I attest the above information meets the required criteria for an Individual or for an Organization or Bona Fide Association of Citizens for purposes of submitting an argument:


Section 3 continued...

Cross out Signing Order for Each Signatory Below (1, 2, 3, etc.) **Argument Signer Form**

The undersigned author(s) of the attached argument hereby state that such argument is true and correct to the best of their knowledge and belief.

<p>1.</p> <p>2.</p> <p>3.</p> <p>4.</p> <p>5.</p>	<p>Gender: <input checked="" type="checkbox"/> Masculine / <input type="checkbox"/> Feminine / <input type="checkbox"/> Androgynous or Non-binary / <input type="checkbox"/> Other: _____</p> <p>I am a: <input checked="" type="checkbox"/> Registered Voter in District / <input type="checkbox"/> Governing Board Member / <input type="checkbox"/> Principal Officer of the Organization Submitting the Argument</p> <p>Name of Signer (to be printed on argument): <u>Alfredo S. Lopez</u></p> <p>[IF APPLICABLE] Signer's Title (to be printed on argument): <u>Auto Body owner</u></p> <p>[IF APPLICABLE] Name of Organization or Bona Fide Association of Citizens (to be printed on argument): _____</p> <p>[For individuals] Residential Address (where you are registered to vote): <u>1241 Armfield Ave Woodland CA 95776</u></p> <p>[For governing board members and principal officers] Business Address: _____</p> <p>Phone: <u>530-383-3158</u> Email: <u>alopez9303@sbcglobal.net</u></p>
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SIGNATURE Under penalty of perjury, I attest the above information meets the required criteria for an Individual or for an Organization or Bona Fide Association of Citizens for purposes of submitting an argument:

Alfredo S. Lopez

<p>1.</p> <p>2.</p> <p>3.</p> <p>4.</p> <p>5.</p>	<p>Gender: <input checked="" type="checkbox"/> Masculine / <input type="checkbox"/> Feminine / <input type="checkbox"/> Androgynous or Non-binary / <input type="checkbox"/> Other: _____</p> <p>I am a: <input checked="" type="checkbox"/> Registered Voter in District / <input type="checkbox"/> Governing Board Member / <input type="checkbox"/> Principal Officer of the Organization Submitting the Argument</p> <p>Name of Signer (to be printed on argument): <u>AMRIK SAHOTA</u></p> <p>[IF APPLICABLE] Signer's Title (to be printed on argument): <u>FARM CT/BUSINESS MAN</u></p> <p>[IF APPLICABLE] Name of Organization or Bona Fide Association of Citizens (to be printed on argument): _____</p> <p>[For individuals] Residential Address (where you are registered to vote): <u>721 EDGEWOOD CT. WOODLAND 95695</u></p> <p>[For governing board members and principal officers] Business Address: _____</p> <p>Phone: <u>530-681-8643</u> Email: <u>AMRIKSAHOTA@SRCGLOBAL.NET</u></p>
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SIGNATURE Under penalty of perjury, I attest the above information meets the required criteria for an Individual or for an Organization or Bona Fide Association of Citizens for purposes of submitting an argument:

Amrik Sahota

Section 3 continued...

Cross out Signing Order for Each Signatory Below (1, 2, 3, etc.)	Argument Signer Form
	The undersigned author(s) of the attached argument hereby state that such argument is true and correct to the best of their knowledge and belief.
1.	Gender: <input checked="" type="checkbox"/> Masculine / <input type="checkbox"/> Feminine / <input type="checkbox"/> Androgynous or Non-binary / <input type="checkbox"/> Other: _____
2.	I am a: <input checked="" type="checkbox"/> Registered Voter in District / <input type="checkbox"/> Governing Board Member / <input type="checkbox"/> Principal Officer of the Organization Submitting the Argument
3.	Name of Signer (to be printed on argument): <u>JEFFREY NAFF</u>
4.	[IF APPLICABLE] Signer's Title (to be printed on argument): <u>RETIRED POLICE OFFICER</u>
5.	[IF APPLICABLE] Name of Organization or Bona Fide Association of Citizens (to be printed on argument): _____
	[For individuals] Residential Address (where you are registered to vote): <u>307 W SOUTHWOOD DR, WOODLAND CA 95695</u>
	[For governing board members and principal officers] Business Address: _____
	Phone: <u>530-681-3202</u> Email: <u>JNAFF@SBCGLOBAL.NET</u>
SIGNATURE 	Under penalty of perjury, I attest the above information meets the required criteria for an Individual or for an Organization or Bona Fide Association of Citizens for purposes of submitting an argument: <u></u>

SECTION 3 CHECKLIST	
Office Use Only	
Direct Argument Checklist (check all that apply): <input type="checkbox"/> Author(s) meets criteria to sign? <input type="checkbox"/> Author's title as signed meets criteria? <input type="checkbox"/> Residential address meets criteria for eligible individual voter to sign? <input checked="" type="checkbox"/> Argument Signer Form signed by author(s)? <input type="checkbox"/> Signing order indicated? <input type="checkbox"/> Only author's name is listed on name line and matches signed name? <input type="checkbox"/> Author's TYPED or LEGIBLY WRITTEN title is on title line, if applicable? <input type="checkbox"/> Author's gender is selected? <input type="checkbox"/> Original or scanned signatures are clear and readable for verification? <input type="checkbox"/> Direct Argument does not exceed 300 words? <input type="checkbox"/> Author's contact information is filled out? <input type="checkbox"/> Author's document(s) filed by deadline? Staff Initials _____	Rebuttal Argument Checklist (check all that apply): <input type="checkbox"/> Authors filed written authorization, if different authors submitted? <input type="checkbox"/> Argument Signer Form signed by author(s)? <input type="checkbox"/> Signing order indicated? <input type="checkbox"/> Only author's name is listed on name line and matches signed name? <input type="checkbox"/> Author's TYPED or LEGIBLY WRITTEN title is on title line, if applicable? <input type="checkbox"/> Author's gender is selected? <input type="checkbox"/> Original or scanned signatures are clear and readable for verification? <input type="checkbox"/> Rebuttal Argument does not exceed 250 words? <input type="checkbox"/> Author's contact information is filled out? <input type="checkbox"/> Author's document(s) filed by deadline? Staff Initials _____