

## **Ballot Argument Signature Statement**

The Sacramento County Voter Registration and Elections Office requires this statement be completed and submitted with the argument. Names and titles listed will be printed in the order provided, and will appear as indicated. In addition, no more than 5 names may be printed following the written argument statement in the County Voter Information Guide.

Argument/Rebuttal Filed by (Check any of the following that apply)

Board of Supervisors or any member(s) of the Board

Individual voter who is eligible to vote on the measure

Bona Fide Association of Citizens (see Elections Code 9166, 9287, 9503)

## **Ballot Argument Contact:**

Name:			
Day Phone:	Evening Phone:		
Cell Phone:	Fax:		
Work Phone:	E-mail:		
The undersigned author(s) of th	ne: Argument in Favor of Argument Against Rebuttal to the Argument in Favor of Rebuttal to the Argument Against		
	, to be voted on at the (Primary or General) election to be held on in the County of Sacramento, and hereby state that this		

argument is true and correct to the best of his/her/their knowledge and belief.

## Each person must clearly print and sign as indicated below. Printing will be in the order as submitted.

on

	Print Name Clearly	Print Title and Name of Organization	Signature	Date
1				
2				
3				
4				
5				