



ARGUMENT AND REBUTTAL FORM

ELECTION DATE: _____ MEASURE I.D. (if any): _____

JURISDICTION: _____

(Please mark (x) in the appropriate box)

<input type="checkbox"/> Argument in Favor	<input type="checkbox"/> Argument Against
<input type="checkbox"/> Rebuttal to Argument Against	<input type="checkbox"/> Rebuttal to Argument in Favor

Statements will be printed in uniform type, style and spacing. Use block paragraphs and single space format. Text submitted indented or centered will be typeset in block paragraph form. **Entire statements in all capital letters are not acceptable. Indentations, circles, stars, dots, italics and/or bullets cannot be accommodated.** However, you may use dashes/hyphens. Words to be printed in **boldface type**, underscoring and/or CAPITALIZED are to be clearly indicated. Any combinations of enhanced words are counted as one word. The number of words/acronyms that are in **boldface type**, underscoring and/or CAPITALIZED shall not exceed 30 words per document. All statements should be checked by the authors for spelling and punctuation as the elections official is not permitted to edit any material contained therein.

ALL AUTHORS MUST SIGN ON THE REVERSE SIDE

Please type statements below in upper and lower case letters. Statement will be typeset in the Official Sample Ballot Booklet using DUTCH801 Rm BT font in 10 point size. However, statement can be submitted using any standard font.

DECLARATION BY AUTHOR(S) OF ARGUMENTS OR REBUTTALS
(Elections Code Section 9600)

All arguments concerning measures filed pursuant to Division 9 of the Elections Code shall be accompanied by the following declaration to be signed by each author of the argument/rebuttal. Names and titles listed will be printed in the Voter Information portion of the Official Sample Ballot Booklet in the order provided below.

The undersigned author(s) of the:

<input type="checkbox"/> Argument in Favor	<input type="checkbox"/> Rebuttal to Argument Against
<input type="checkbox"/> Argument Against	<input type="checkbox"/> Rebuttal to Argument in Favor

of ballot measure _____ at the _____
(name and/or letter) (title of election)

election for the _____ to be held on

_____ hereby state that such argument is true and correct to the
(date)

best of his/her/their knowledge and belief.

1.	Printed Name _____	Signature _____
	Title to Appear on Argument _____	Date _____
2.	Printed Name _____	Signature _____
	Title to Appear on Argument _____	Date _____
3.	Printed Name _____	Signature _____
	Title to Appear on Argument _____	Date _____
4.	Printed Name _____	Signature _____
	Title to Appear on Argument _____	Date _____
5.	Printed Name _____	Signature _____
	Title to Appear on Argument _____	Date _____

IMPORTANT FILING INFORMATION: I, _____ am the designated filer of the above titled argument/rebuttal. Please notify me of any questions pertaining to this filing. Below is my contact information.

Mailing Address: _____ E-Mail Address: _____

Contact Numbers: _____ Daytime _____ Evening _____ Fax _____

OFFICE USE ONLY

Time Stamp

Word Counts

NUMBER OF WORDS:	
NUMBER OF WORDS WITH BOLD FACE, ETC.:	
PROJECT CODE NUMBER:	
ELECTION DEPUTY:	



**AUTHORIZATION FOR ANOTHER PERSON TO SIGN
REBUTTAL ARGUMENT**

(Elections Code Sections 9167, 9317 & 9504)

I, _____ authorize the person listed below to
(Print name of **AUTHOR** of the Argument)

sign the rebuttal to the argument in favor against Measure _____
(Check one) (Letter)

for the _____ election to be
(Jurisdiction)

held on _____
(Date)

Any Author of the Argument may be replaced with another author to sign the Rebuttal.

(Print name of Rebuttal Author)

(Signature of Rebuttal Author)

(Title to appear on Rebuttal)

Signature of Argument Author: _____ Date: _____

Attach this form to the "Declaration by Authors Form" submitted with the Rebuttal Argument.