

# STATEMENT THAT ARGUMENT IS TRUE AND CORRECT

Elections Code Section 9600

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

“The undersigned author(s) of the:

- Argument For (300-word limit)
- Argument Against (300-word limit)
- Rebuttal to Argument For (250-word limit)
- Rebuttal to Argument Against (250-word limit)

ballot measure (*insert letter*) \_\_\_\_\_ at the  Primary  General  Special

election for the \_\_\_\_\_  
(jurisdiction – name of district)

to be held on \_\_\_\_\_ hereby state that such argument/rebuttal is true and correct to the best  
(Election Date)

of his/her/their knowledge and belief.”

The signatures of the following persons will be printed as submitted below following the argument or rebuttal.

SIGNATURE	PRINT NAME as it will appear in the Sample Ballot Booklet	PRINT TITLE and Name of Organization (if applicable) as it will appear in the Sample Ballot Booklet	DATE
1.			
Residence Address:			
2.			
Residence Address:			
3.			
Residence Address:			
4.			
Residence Address:			
5.			
Residence Address:			

**Notes:**

If the argument or rebuttal is being submitted on behalf of an organization, at least one of its principal officers must sign.

If the argument or rebuttal is being submitted on behalf of a Bona Fide Association of Citizens, you must complete and submit the “Bona Fide Association of Citizens Date Sheet” with the above statement.

If you wish to authorize a different person or persons to sign the rebuttal argument, please complete and submit the “Authorization for Another Person(s) to Sign Rebuttal Argument” with the above statement.

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

Printed Name: \_\_\_\_\_

Daytime phone number: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Evening phone number: \_\_\_\_\_

Signature of FILER: \_\_\_\_\_ Date: \_\_\_\_\_

\*The filer must be either the governing board of the district, a bona fide association of citizens or an individual voter who is eligible to vote on the measure. Does not have to be a signer.