Rebuttal to Argument in Favor Measure R

Fresno County

City of Sanger

November 5, 2024 Presidential General Election

AUG 21 2024

FRESNO COLINTY CLERK
By.

DEPUTY

Text of Argument Below This Line

\_\_\_\_\_\_

We have all felt the pain of higher costs of living buying groceries and gas. City officials must live within their means just like the rest of us. They have had 15 years (since this tax started in 2009) to fix the budget. They still have 4 more years before the tax ends! Why are they trying to extend it now?

Sanger budgeted 71.11% (\$12,068,00) of its general fund for public safety! **So why are they asking you to pay more?** Even more concerning, this tax will continue to impose \$3,200,000 annually on the people of Sanger with <u>NO EXPIRATION DATE!</u>

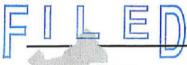
Of course, the safety of Sanger residents is important. So why was protective clothing and breathing equipment for firefighters *NOT* included in the current budget? In FY 2022-2023, a \$5 MILLION grant was secured for police dispatch, yet proponents claim that this measure will maintain 911 emergency response times. Mismanagement of funds clearly demonstrates that your safety is not actually their greatest concern!!

This sales tax adds up to substantial costs at the store for everyone – rich or poor. That means that families have less money available for food, rent, bills, and charitable giving to programs that actually work.

Non-profit organizations provide a significant positive impact by providing drug and gang prevention youth programs. These programs need funding rather than new uniforms or patrol vehicles. The proposed spending is not prevention – it's prosecution!

Join your neighbors and vote NO on Measure R!

Find out more: https://lpfresno.org/NoSangerTax



AUG 2 1 2024

Guidelines for Filing Arguments and Rebuttal Arguments

Fax

#### ERESNIO COLINITY OF ERK

### DECLARATION BY AUTHOR(S) OF ARGUMENTS OR REBUTTALS

|           |  | (F                               | .C. §9600)   |  |  |
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|           | DEPUTY   |                                  | SANCTON TO SPECIAL PARTY OF THE SPECIAL PROPERTY OF TH |  |  |
| following | ments concerning measure<br>g declaration to be signed<br>amphlet portion of the Cou | by each author of the ar         | gument/rebuttal. N   | ns Code shall be accompanied<br>lames and titles will be printed<br>vided below. |  |
|           |  | ☐Argument in Favor               | ≣Re  | buttal to Argument in Favor  |  |
| The und   | ersigned author(s) of the:   | □Argument Against □Rebuttal to   |  | buttal to Argument Against   |  |
| of ballot | measure Extension Public   | Safety Sales Tax                 | _ at the Presider  | ntial General Election   |  |
|           | (N   | ame and/or Letter)               |  | (Title of Election)  |  |
| for the   | City of Sanger   | to be held                       |  | hereby state that this   |  |
| argumer   | (Jurisdiction)<br>nt is true and correct to the                                      | best of his/her/their know       | (Date)<br>rledge and belief.   |  |  |
| 1.        | Matthew Hartwig  |                                  |  |  |  |
|           | (Printed Name) Chair, Libertarian Party of Fresno County                             |                                  | 8)14/2 (Signature)   |  |  |
|           | (Title to Appear on A  |                                  | (Date  | e)   |  |
|           | Ket McElrou  |                                  |  |  |  |
| 2.        | Kat McElroy (Printed Nam   | e)                               | (Sign  | nature)  |  |
|           | Vice Chair, Libertarian Par  |                                  | 8/19/29  | <u> </u>   |  |
|           | (Title to Appear on A  | rgument)                         | / / / (Date  |  |  |
| 3.        | (Printed Nam   | e)                               | (Sign  | nature)  |  |
|           | Weekling and the second  |                                  | (Date  | al .   |  |
|           | (Title to Appear on A  | rgument)                         | (Date  | =)   |  |
| 4.        | (Printed Name  | e)                               | (Sign  | nature)  |  |
|           | (Title to Appear on A  | rgument)                         | (Date  | 2)   |  |
| 5.        |  |                                  |  |  |  |
|           | (Printed Name  | 2)                               | (Sign  | nature)  |  |
|           | (Title to Appear on Ar   | rgument)                         | (Date  | 9)   |  |
| MPORT     | ANT FILING INFORMATION   | ON: I, Kat McElroy (Printed Name |  | am the   |  |
|           | ed filer of the above titled my contact information.                                 |                                  |  | ny questions pertaining to this  |  |
| Mailing A | ddress: PO Box 161, Raisi  | n City, CA 93652                 | _ E-Mail Address:  | fresnolp@ca.lp.org   |  |
|           |  |                                  |  |  |  |

Evening

Daytime



To be completed for arguments filed by the governing body or bona fide association of citizens.

| ARGU        | MENT/REBUTTAL FILED BY  | (Check any of the | following that a | pply): | П  | 11    |          |
|-------------|---|-------------------|------------------|--------|----|-------|----------|
| A.          | Governing Body  | ž.                |                  | F      |    |       | Er       |
|             | Board of Supervisors  | X                 |                  | П      | ΔΠ | G 212 |          |
|             | District Board  |                   |                  | ED     |    |       | CLERK    |
|             | Contact Person's Signature:   |                   |                  | By     |    |       |          |
|             | Contact Person's Name (Pri  | inted):           |                  |        |    |       | DEPUT    |
|             | Title:  |                   |                  |        |    |       |          |
|             | Phone:  | Fax:              | E-               | mail:  |    |       |          |
| B. <b>✓</b> | The following information is submitted by the author(s) to establish that the organization or group is a Bona Fide Association of Citizens  Bona Fide Association of Citizens (Group or organization has not been formed to support or oppose the measure)  Name of Association: Libertarian Party of Fresno County |                   |                  |        |    |       |          |
|             | Principal Officer's Signature Principal Officer's Name (Principal Chair Phone: 559-785-0810   | rinted): Matthew  | Hartwig          |        |    | olp@d |          |
|             | Bona Fide Association of Citizens (Group or organization has been formed to support or oppose the measure)  Name of Association:  |                   |                  |        |    |       | oport or |
|             | Principal Officer's Signature   |                   |                  |        |    |       |          |
|             | Principal Officer's Name (Pr  |                   |                  |        |    |       |          |
|             | Title:  |                   |                  |        |    |       |          |
|             | Phone:  | Fax:              | E-               | mail:  |    |       |          |





PO Box 161, Raisin City CA 93652 | (559) 785-0810 | fresnolp@ca.lp.org

DEPUTY

August 14, 2024

Dear Fresno County Registrar,

The Libertarian Party of Fresno County is a political party (FPPC ID # 1458839) with our officers being:

- Matthew Hartwig, Chair
- · Kat McElroy, Vice Chair
- Rachel Wilie Gonzalez, Treasurer
- Thomas Caldwell, Secretary
- Marshal Fechner, At Large

All of the above are authorized signers for the party.

Our address is:

33177 Auberry Rd Auberry, CA 93602

In Liberty,

Matthew Hartwig

Chair, Libertarian Party of Fresno County



Guidelines for Filing Arguments and Rebuttal Arguments

Fax

### ESNO COUNTY CLERK

#### DECLARATION BY AUTHOR(S) OF ARGUMENTS OR REBUTTALS

|    | FRESNO_COUNTY | CL |
|----|---------------|----|
| By |               |    |

DEPUTY (E.C. §9600)

| All arguments concerning measure following declaration to be signed Voter Pamphlet portion of the Cou | by each author of the       | argument/rebuttal. Nar | Code shall be accompanied by the<br>mes and titles will be printed in the<br>led below. |
|---|-----------------------------|------------------------|---|
| The undersigned outbor(s) of the  | ☐Argument in Favor          | ■Rebu                  | ttal to Argument in Favor   |
| The undersigned author(s) of the:   | □Argument Against           | □Rebu                  | ttal to Argument Against  |
| of ballot measure Extension Public  | Safety Sales Tax            |                        | al General Election (Title of Election)   |
| for the City of Sanger  | lame and/or Letter)         |                        |   |
| (Jurisdiction)  | to be nei                   | (Date)                 | hereby state that this  |
| argument is true and correct to the   | e best of his/her/their kno | owledge and belief.    |   |
| 1. Efren T. Ru. (Printed Nam Corn coow Cortizin   | bio<br>of Saugen            | 8-13                   | z4  |
| (Title to Appear on A   | Argument)                   | (Date)                 |   |
| 2. Joseph Roch Concerned City (Title to Appear on A   | izen of Sanger              | - 8   13   2 Y (Date)  |   |
| 3. Sergio Ac<br>PRS Local Chair M<br>(Title to Appear on A  | son Local 173               | 8/13/24<br>(Date)      | re)   |
| 4. (Printed Nam   | (e)                         | (Signatu               | re)   |
| (Title to Appear on A   | urgument)                   | (Date)                 |   |
| 5   | е)                          | (Signatu               | re)   |
| (Title to Appear on A   | rgument)                    | (Date)                 |   |
| IMPORTANT FILING INFORMATI  | ON: 1 Kat McFlrov           |                        | am the  |
| IMPORTANT FILING INFORMATI  | (Printed Nar                | me)                    | am the  |
| designated filer of the above titled<br>Below is my contact information.                              | argument/rebuttal. Pl       | ease notify me of any  | questions pertaining to this filing.  |
| Mailing Address: PO Box 161, Rais   | in City, CA 93652           | E-Mail Address: fre    | esnolp@ca.lp.org  |
| Contact Numbers: 559-785-0810   | 559-785                     | 5-0810                 |   |

Evening

Daytime



### Authorization for Another Person or Persons to Sign Rebuttal Argument Form

| Kat McElroy  | authorize the following person to  |  |  |  |
|--|--|--|--|--|
| (Print name of filer of the original argument)   |  |  |  |  |
| sign the rebuttal to the argument  |  |  |  |  |
| ■ In favor of Check one:   |  |  |  |  |
| ☐ Against  | AUG 21 2024  |  |  |  |
| Measure (Letter) Sales Tax for the(Ele   | ection Date)  ERESNO COUNTY CLERK  By.  DEPUTY   |  |  |  |
| Choose one of the Following:   |  |  |  |  |
| ☐ In place of  | , add:   |  |  |  |
| In place of  | (Signature of Argument Signer)   |  |  |  |
| (Printed Name of Rebuttal Signer)  | (Signature of Rebuttal Signer)   |  |  |  |
| (Title to Appear on Rebuttal)  | (Date)   |  |  |  |
| In addition to signers of the direct argument, add   | d:   |  |  |  |
|  |  |  |  |  |
| (Printed Name of Rebuttal Signer)  | (Signature of Rebuttal Signer)   |  |  |  |
| Concern Extreme of SANG  | 9ER 8=13-24<br>(Date)  |  |  |  |
| Please remember, no more than five signatures wil signers, replaced signers and new rebuttal signers | l be included with any argument. The total of direct argument must be no more than five. |  |  |  |
|  | E.C. §§9164, 9285, 9501.5  |  |  |  |
| Signature of Filer:  | Date: 8/13/24  |  |  |  |



# Authorization for Another Person or Persons to Sign Rebuttal Argument Form

| Kat McElroy                                   | th   | ing the fellowing page | on to              |            |
|---|--|------------------------|--------------------|------------|
| (Print name of filer of the                   | e original argument)   | ize the following pers | on to              |            |
| sign the rebuttal to the argument             | ongina agameny   |                        | э п п              |            |
| ■ In favor of Check one:                      |  |                        |                    |            |
| ☐ Against                                     |  |                        | AUG 21:            | 2024       |
| Sanger Public Safety Sales Tax  Measure       | for thee (Election Date)   | lection. By_           | ERESNO COLINI      | DEPUTY     |
| Choose one of the Following:                  |  |                        |                    |            |
| ☐ In place of                                 |  |                        | , add:             |            |
| In place of(Printed Name of Arg               | gument Signer) (Signature  | e of Argument Signer)  |                    |            |
| (Printed Name of Rebuttal Signe               | er) (Signatur  | e of Rebuttal Signer)  |                    |            |
| (Title to Appear on Re                        | buttal)  | (Date)                 |                    |            |
| In addition to signers of the dire            | ect argument, add:   | ×                      |                    |            |
| JOSEPH ROC<br>(Printed Name of Rebuttal Signe | HA   | _                      |                    |            |
| ONCERNED CHI                                  | ZEN OF SANGER  | 8   13   24            |                    |            |
|   | ve signatures will be included with rebuttal signers must be no more |                        | otal of direct are | gument     |
|   |  |                        | .C. §§9164, 92     | 85, 9501.5 |
| Signature of Filer: _                         | <u></u>  | _Date: 8//3/24         | /                  |            |



# Authorization for Another Person or Persons to Sign Rebuttal Argument Form

| Kat McElroy   | authorize the following person to   |
|---|---|
| (Print name of filer of the original argument)  | additionize the following person to   |
| sign the rebuttal to the argument   |   |
| In favor of Check one:  |   |
| ☐ Against   | AUG 2 1 2024  |
| Measure for the (Letter)  | Date) election. By DEPUTY   |
| Choose one of the Following:  |   |
| ☐ In place of   | , add:  |
| ☐ In place of (Printed Name of Argument Signer)   | (Signature of Argument Signer)  |
|   |   |
|   |   |
| (Printed Name of Rebuttal Signer)   | (Signature of Rebuttal Signer)  |
| (Title to Appear on Rebuttal)   | (Date)  |
| (Title to Appeal of Nebatial)   | (-3.0)  |
| In addition to signers of the direct argument, add:   |   |
| Sersio Aguila<br>(Printed Name of Rebuttal Signer)  | (Signature of Rebuttal Signer)  |
| RS Local Chair man Local #173 (Title to Appear on Rebuttal)   | 8/13/24<br>(Date)   |
| Please remember, no more than five signatures will be i signers, replaced signers and new rebuttal signers must | included with any argument. The total of direct argument to be no more than five. |
|   | E.C. §§9164, 9285, 9501.5   |
| Signature of Filer:   | Date: 8/13/2 4  |