Rebuttal to the Argument Against Measure S

City of Suisun City Election Date: November 5, 2024 Word Count: 250/250

The lone opponent of Measure S doesn't live in Suisun City and doesn't understand that we are facing a crisis that will directly impact <u>OUR</u> safety and <u>OUR</u> quality of life.

He won't live with the consequences if Measure S isn't approved and shouldn't tell us how to run <u>OUR</u> city.

Here are the FACTS:

<u>FACT:</u> Suisun City has a severe budget deficit that threatens <u>OUR</u> <u>essential city services</u> that are sustained by emergency reserves that will run out next year. Without Measure S, <u>Suisun City loses \$3.9 million</u> annually, our city will be insolvent, and may have to declare bankruptcy.

<u>FACT:</u> Without Measure S, Suisun City must make drastic cuts that could eliminate <u>OUR</u> locally controlled fire department, police department, parks, libraries, youth and senior programs. This means neighborhoods are less safe, more nuisances with homelessness, more potholes, and slower 9-1-1 emergency response times.

FACT: Fire risk, crime, homelessness, and 9-1-1 emergency response calls are all increasing when <u>OUR</u> police and fire departments are already severely understaffed. When you need help in an emergency, seconds count. Further cuts will mean fewer of <u>OUR</u> firefighters, paramedics and police officers ready to respond. It's not worth the risk.

FACT: The cost is modest. Measure S adds just 7.5¢ to a \$10 purchase and **essentials like groceries and prescriptions are exempt**. Anyone shopping in Suisun City contributes, not just residents.

<u>FACT:</u> Independent oversight, audits and <u>public disclosure of all spending ensures funds are spent properly. Every penny must stay local and cannot be taken away.</u>

Vote Yes on S to Save Suisun City!

TO BE COMPLETED BY INITIAL ARGUMENT SIGNERS ONLY IF REBUTTAL ARGUMENT IS TO BE SIGNED BY DIFFERENT AUTHORS

The undersigned author(s) of	the argument		
✓ In Favor of		gainst	
Measure at the Gen	neral Election Name of election	election to b	e
Held on 11/5/2024	Name of election authorize(s)	the following individual(s) to	o sign
The rebuttal argument in his/l	her/their place:		
One or more people who signed t the rebuttal argument)	the argument may be	e replaced with different peo	ple to sign
	to sign instead of		8/14/2001 DATE
2)PRINT NAME OF REBUTTAL SIGNER	_to sign instead of_	SIGNATURE OF ARGUMENT SIGNER	DATE
3)PRINT NAME OF REBUTTAL SIGNER	to sign instead of_	SIGNATURE OF ARGUMENT SIGNER	DATE
PRINT NAME OF REBUTTAL SIGNER	_to sign instead of_	SIGNATURE OF ARGUMENT SIGNER	DATE
5)PRINT NAME OF REBUTTAL SIGNER	_to sign instead of_	SIGNATURE OF ARGUMENT SIGNER	DATE
Attach this form to the two page	"Signature Stateme	ent" submitted with the rebut	tal argument

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3/4/2016

(Elections Code Section 9065, 9600)
All arguments/rebuttal arguments concerning measures shall be accompanied by this form to be signed by each author(s). Author(s) names and titles listed will be listed and printed in the Voter Information Guide in the order provided below and will appear as indicated below.

The undersigned author(s) of the.	
ARGUMENT IN FAVOR ☐ 300 WORDS	REBUTTAL TO ARGUMENT IN FAVOR 250 WORDS
ARGUMENT AGAINST 300 WORDS	REBUTTAL TO ARGUMENT AGAINST 250 WORDS
Ballot measure letter _S at the	Peneral Election Name of election
Election for the Way of Suisu	in Cita
to be held on 115 30 34 Juris	isdiction – name of district hereby state that such argument
is true and correct to the best of his/her/the	eir knowledge and belief.
Signature or individual voter eligible to vote	2004 Date
Print Name	Are you signing on behalf of association or governing board? YES of NO
Optional) Title	If yes complete page 2 Please circle one A
2) Signature of individual voter eligible to vote	Residence address (for verification purposes) 20 Date
Print Name	Are you signing on behalf of association or governing board? YES or NO
IO. C. S. TH.	If yes complete page 2 Please circle one♠
(Optional) Title	20
3)Signature of individual voter eligible to vote	Residence address (for verification purposes) Date
Print Name	Are you signing on behalf of association or governing board? YES or NO
(Optional) Title	If yes complete page 2 Please circle oneA
4)	20
Signature of individual voter eligible to vote	Residence address (for verification purposes) Date
Print Name	Are you signing on behalf of association or governing board? YES or NO
(Optional) Title	If yes complete page 2 Please circle one ▲
	20
5) Signature of individual voter eligible to vote	Residence address (for verification purposes) Date
Print Name	Are you signing on behalf of association or governing board? YES or NO
	If yes complete page 2 Please circle one▲
(Optional) Title	OR BONA FIDE ASSOCIATION OF CITIZENS YOU MUST COMPLETE PAGE 2
	TO BOING FIDE ASSOCIATION OF CITIZENS TOU MUST COMPLETE PAGE 2
CONTACT PERSON NAME & PHONE #	

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Arguments/Rebuttals

TO BE COMPLETED BY INITIAL ARGUMENT SIGNERS ONLY IF REBUTTAL ARGUMENT IS TO BE SIGNED BY DIFFERENT AUTHORS

	The undersigned author(s) of	the argument		
	✓ In Favor of	ПА	gainst	
	Measure S at the Gen	eral	election to	oe
	Letter	Name of election		
1	Held on 11/5/2024	autnorize(s)	the following individual(s)	to sign
	The rebuttal argument in his/h	ner/their place:		
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1)	PRINT NAME OF REBUTTAL SIGNER	_to sign instead of_	ર	1/20/7074 DATE
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	PRINT NAME OF REBUTTAL SIGNER		SIGNATURE OF ARGUMENT SIGNER	DATE
3)	PRINT NAME OF REBUTTAL SIGNER	_to sign instead of_	SIGNATURE OF ARGUMENT SIGNER	DATE
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4)	PRINT NAME OF REBUTTAL SIGNER	_to sign instead of_	SIGNATURE OF ARGUMENT SIGNER	DATE
5)		to alam instead of		
رد	PRINT NAME OF REBUTTAL SIGNER	_to sign instead of_	SIGNATURE OF ARGUMENT SIGNER	DATE
Atta	ach this form to the two page	"Signature Stateme	nt" submitted with the rebu	ttal argument

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3/4/2016

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ARGUMENT IN FAVOR □	REBUTTAL TO ARGUMENT IN FAVOR □
300 WORDS	250 WORDS
ARGUMENT AGAINST 300 WORDS	REBUTTAL TO ARGUMENT AGAINST
	250 WORDS
Ballot measure letter st the	GENERAL ELECTION
	Name of election
Election for the CITY of Suisu	IN CITY
to be held on 11/5/2024	hereby state that such argument
Election Date)
is true and correct to the best of his/her/th	eir knowledge and belief.
1)	304 MORGAN Stizeet 2024 Residence address (for verification purposes) Date
Signature or mulvidual voter eligible to vote	Residence address (for verification purposes) Suisw Eity CA Date
JOHN HARTER	Suisw City CA
Print Name	Are you signing on behalf of association or governing board? YES or
DWNER VOLOSTRONT COMICS	If yes complete page 2 Please circle one A
(Optional) Title PRESIDENT SUISUNCITY	HISTORIC WATERFRONT BUSINESS IMPROVEME
2)	20 DISTE
Signature of individual voter eligible to vote	Residence address (for verification purposes) Date
Print Name	Are you signing on behalf of association or governing board? YES or NO
	If yes complete page 2 Please circle one A
(Optional) Title	, in your completes page 2
3)	20
Signature of individual voter eligible to vote	Residence address (for verification purposes) Date
Print Name	Annual design of the second of
Print Name	Are you signing on behalf of association or governing board? YES or NO
(Optional) Title	If yes complete page 2 Please circle one A
4)	20
Signature of individual voter eligible to vote	Residence address (for verification purposes) Date
Print Name	Are you signing on behalf of association or governing board? YES or NO
	If yes complete page 2 Please circle one A
(Optional) Title	7-2 - 2 10000 011010 01107
5)	20
5) Signature of individual voter eligible to vote	Residence address (for verification purposes) Date

IF SIGNING ON BEHALF OF A GOVERING BOARD OR BONA FIDE ASSOCIATION OF CITIZENS YOU MUST COMPLETE PAGE 2

If yes complete page 2

Are you signing on behalf of association or governing board? YES or NO

CONTACT PERSON NAME & PHONE #

Arguments/Rebuttals

Print Name

(Optional) Title

The undersigned author(s) of the:

Page 11

7/19/2024

Please circle one▲

TO BE COMPLETED BY INITIAL ARGUMENT SIGNERS ONLY IF REBUTTAL ARGUMENT IS TO BE SIGNED BY DIFFERENT AUTHORS

The undersigned author(s) of	of the argument		
In Favor of	•	ainst	
Measure S at the Ge	eneral Election Name of election	election to b	oe .
Held on 11/5/2024 Date of election The rebuttal argument in his	authorize(s) t		
One or more people who signed the rebuttal argument)	·	replaced with different peo	ople to sign
1) Donna M LeBlanc PRINT NAME OF REBUTTAL SIGNER	to sign instead of	NER	8/12/24 DATE
PRINT NAME OF REBUTTAL SIGNER	to sign instead of	SIGNATURE OF ARGUMENT SIGNER	DATE
3)PRINT NAME OF REBUTTAL SIGNER	to sign instead of	SIGNATURE OF ARGUMENT SIGNER	DATE
PRINT NAME OF REBUTTAL SIGNER	to sign instead of	SIGNATURE OF ARGUMENT SIGNER	DATE
5)PRINT NAME OF REBUTTAL SIGNER	to sign instead of	SIGNATURE OF ARGUMENT SIGNER	DATE
Attach this form to the two pag	ge "Signature Statemen	t" submitted with the rebu	ttal argument

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7/19/2024

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The undersigned	l author(s) of the:
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Arguments/Rebuttals

ARGUMENT	IN	FAVOR	
	300	WORDS	
ARGUMENT	AC	SAINST	
	300	WORDS	

REBUTTAL TO ARGUMENT IN FAVOR □ **250 WORDS**

REBUTTAL TO ARGUMENT AGAINST 💢 **250 WORDS**

Ballot measure letter S at the G Election for the City of Sursun City Juris	eneral Election	
Floation for the City of Sugar City	Name of election	
Juris Juris	sdiction – name of district	
to be held on 11-5-2024	hereby stat	te that such argument
is true and correct to the best of his/her/the	ir knowledge and belief.	
1) Signature of individual voter eligible to vote	Residence address (for verification purp	20 <u>2</u> 4
Donna M Le Blanc	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Print Name	Are you signing on behalf of association	or governing board? YES or NO
Print Name MEMBER, PARKS, RECREATION, MARINA, AND ARTS COMMISSION (Optional) Title	If yes complete page 2	Please circle one▲
2)		20
Signature of Individual voter eligible to vote	Residence address (for verification purp	oses) Date
Print Name	Are you signing on behalf of association	or governing board? YES or NO
	If yes complete page 2	Please circle one▲
(Optional) Title		
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Orginature of marvidual voter engine to vote	residence address (for vermeation purp	oscs) Date
Print Name	Are you signing on behalf of association	or governing board? YES or NO
	If yes complete page 2	Please circle one▲
(Optional) Title		
5) Signature of Individual voter eligible to vote	Residence address (for verification purp	20
Signature of individual voter eligible to vote	Residence address (for verification purp	oses) Date
Print Name	Are you signing on behalf of association	or governing board? YES or NO
	If yes complete page 2	Please circle one▲
(Optional) Title	yee complete page _	
IF SIGNING ON BEHALF OF A GOVERING BOARD O	R BONA FIDE ASSOCIATION OF CITIZENS	YOU MUST COMPLETE PAGE 2
CONTACT PERSON NAME & PHONE #	.301	

Page 11

TO BE COMPLETED BY INITIAL ARGUMENT SIGNERS ONLY IF REBUTTAL ARGUMENT IS TO BE SIGNED BY DIFFERENT AUTHORS

The undersigned author(s) of the argument In Favor of □ Against at the General Election election to be authorize(s) the following individual(s) to sign Date of election The rebuttal argument in his/her/their place: One or more people who signed the argument may be replaced with different people to sign the rebuttal argument) to sign instead PRINT NAME OF REBUTTAL SIGNER to sign instead of PRINT NAME OF REBUTTAL SIGNER to sign instead of PRINT NAME OF REBUTTAL SIGNER SIGNATURE OF ARGUMENT SIGNER to sign instead of 4) PRINT NAME OF REBUTTAL SIGNER to sign instead of SIGNATURE OF ARGUMENT SIGNER PRINT NAME OF REBUTTAL SIGNER Attach this form to the two page "Signature Statement" submitted with the rebuttal argument

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7/19/2024

REBUTTAL TO ARGUMENT IN FAVOR □

(Elections Code Section 9065, 9600)

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	The	undersigned	author	S	of	the:
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Arguments/Rebuttals

ARGUMENT IN FAVOR □

300 WORDS ARGUMENT AGAINST 300 WORDS	250 WORDS REBUTTAL TO ARGUMENT AGAINST (250 WORDS)
Ballot measure letter at the	GENERAL ELECTION Name of election
Election for the <u>CITY OF SULSE</u>	W C174
to be held on 1 1/05/2024	isdiction – name of district hereby state that such argument
Election Date	
is true and correct to the best of his/her/the 1) Signature of individual voter engine to vote EYRLL VENA	Residence address (for verification purposes) 20 2 / Date
Print Name	Are you signing on behalf of association or governing board? YES or NO
PRESIDENT - SUISUN CITY PDA	If yes complete page 2 Please circle one ▲
2) Signature of individual voter eligible to vote	Residence address (for verification purposes) 20 Date
Print Name	Are you signing on behalf of association or governing board? YES or NO
(Optional) Title	If yes complete page 2 Please circle one A
	20
3) Signature of individual voter eligible to vote	Residence address (for verification purposes) Date
Print Name	Are you signing on behalf of association or governing board? YES or NO
	If yes complete page 2 Please circle one ▲
(Optional) Title	
4) Signature of individual voter eligible to vote	Residence address (for verification purposes) Date
Print Name	Are you signing on behalf of association or governing board? YES or NO
(Optional) Title	If yes complete page 2 Please circle one A
	20
5) Signature of individual voter eligible to vote	Residence address (for verification purposes) Date
Print Name	Are you signing on behalf of association or governing board? YES or NO
(Ontional) Title	If yes complete page 2 Please circle one A
(Optional) Title IF SIGNING ON BEHALF OF A GOVERING BOARD O	OR BONA FIDE ASSOCIATION OF CITIZENS YOU MUST COMPLETE PAGE 2
CONTACT PERSON NAME & PHONE #	
JOHLAGI FEROOR HAME G FROME #	

Page 11

(Elections Code Section 9065, 9600)

CHE	CK ON	E OF THE FOLLOWING	& RECORE	LETTER OF MEASURE
	□ Arg	gument in favor of measu	ure	☐ Rebuttal to argument in favor of measure
	□ Arg	gument against measure		Rebuttal to argument against measure
ARG	UMEN	TS and/or REBUTTALS F	ILED BY (Check any of the following that apply:
	Conta Conta	act Person's Signature)	erd E-mail
		ollowing information is sub Bona Fide Association of C		ne filers(s) to establish that the organization or grou
X	Name Princi Princi	e of Association: אואט pal Officer's Printed Name pal Officer's Signature	CHY PO	E-mail eyen 79 e gmail. com
		A Form 410 Statement of	f Organizat	ion – establishing the group or organization as a ommittee to support or oppose Measuree I.D.#e date the committee receives \$1000.00 in contributions)
[The organization meets of	on a regula	r basis. Meetings are held at
		at the following schedule		•
Î	*	Fide Association, rather t	han a grou EPLESUVI	the claim that the group or organization is a Bona p of individuals who support or oppose Measure S SWULN OFFICIAS ANI) TY DISPATCHAS

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The undersigned author(s) of	f the argument		
✓ In Favor of	A	gainst	
Measure S at the Ger Held on 11/5/2024 Date of election	neral Election	election to be	е
Held on 11/5/2024	authorize(s)	the following individual(s) to	o sign
The rebuttal argument in his	/her/their place:		
One or more people who signed the rebuttal argument)		e replaced with different peo	ple to sign
1) Jamara Colden PRINT NAME OF REBUTTAL SIGNER	to sign instead of		ZOZ 4 DATE
2)PRINT NAME OF REBUTTAL SIGNER	to sign instead of_	SIGNATURE OF ARGUMENT SIGNER	DATE
3)	to sign instead of	SIGNATURE OF ARGUMENT SIGNER	
PRINT NAME OF REBUTTAL SIGNER		SIGNATURE OF ARGUMENT SIGNER	DATE
4)	to sign instead of_		
PRINT NAME OF REBUTTAL SIGNER		SIGNATURE OF ARGUMENT SIGNER	DATE
5)	to sign instead of_	SIGNATURE OF ARGUMENT SIGNER	
PRINT NAME OF REBUTTAL SIGNER		SIGNATURE OF ARGUMENT SIGNER	DATE
Attach this form to the two page	e "Signature Stateme	ent" submitted with the rebut	tal argument
Arguments/Rebuttals	Page 13		3/4/2016

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300 WORDS ARGUMENT AGAINST 300 WORDS	250 WORDS REBUTTAL TO ARGUMENT AGAINST 250 WORDS	
Ballot measure letter at the c	Jeneral Election Name of election	
Election for the <u>City of Suisu</u>	in Citu	
to be held on 11 5 12624 Election Date	sdiction – name of district hereby state	e that such argument
is true and correct to the best of his/her/the	eir knowledge and belief.	
1)	residence address (for vermeation purpo	_ 20 24 Date
Print Name	Are you signing on behalf of association of	or governing board? YES or (NO
MEASURE S COMMITTEE (Optional) Title MEMBER MEASURS S OVE		Please circle one
2) Signature of individual voter eligible to vote	Residence address (for verification purpo	ses) 20 Date
Print Name	Are you signing on behalf of association or governing board? YES or NO	
(Optional) Title	If yes complete page 2	Please circle one▲
3) Signature of individual voter eligible to vote	Residence address (for verification purpo	ses) 20 Date
Print Name	Are you signing on behalf of association of	or governing board? YES or NO
(Optional) Title	If yes complete page 2	Please circle one▲
4) Signature of individual voter eligible to vote	Residence address (for verification purpo	ses) 20 Date
Print Name	Are you signing on behalf of association of	or governing board? YES or NO
(Optional) Title	If yes complete page 2	Please circle one▲
5) Signature of individual voter eligible to vote	Residence address (for verification purpo	ses) 20
Print Name	Are you signing on behalf of association or governing board? YES or NO	
(Optional) Title	If yes complete page 2	Please circle one▲
IF SIGNING ON BEHALF OF A GOVERING BOARD O	R BONA FIDE ASSOCIATION OF CITIZENS Y	YOU MUST COMPLETE PAGE 2
CONTACT PERSON NAME & PHONE #		

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Arguments/Rebuttals