Vote NO on Measure K.

Measure K will result is less representation for residents of San Bernardino County on the Board of Supervisors. We need more representation, not less. The Board of Supervisors oversees all aspects of our county's emergency response to COVID-19, riots, wildfires, and other natural disasters. Paying members of the Board of Supervisors the equivalent of a part-time salary will put the health and safety of our communities at risk due to poor leadership during times of crisis. Part-time pay will create part-time results. Measure K will also reduce the Board of Supervisors' accountability to the public with its preposterous one-term limit proposal. If this is implemented, voters will never have an opportunity to voice their approval or disapproval of an elected representative's time in office. This is contrary to the basic notions of American representative democracy. If an elected official only serves one term, what incentive do they have to live up to their campaign promises or to address the concerns of the people they represent? The current three-term limit ensures that members of the Board of Supervisors act in the interest of their constituents and not the other way around. In addition to their service as County Supervisors, members of the Board of Supervisors serve in numerous critical capacities that will be negatively impacted by Measure K. For instance, board members are also responsible for administering the San Bernardino County Fire Protection District and Arrowhead Regional Medical Center. They also serve on dozens of public boards and commissions, including the county regional transportation agency, which are tasked with determining how and where our precious taxpayer resources are spent. Again, part-time pay will create part-time results.

Measure K will reduce your voice and representation on the Board of Supervisors. Vote NO on Measure K!
STATEMENT BY PROONENTS/AUTHORS OF ARGUMENTS

Elections Code section 9600 requires that all arguments concerning measures shall be accompanied by the following statement, to be signed by each proponent and by each author, if different, of the argument.

The undersigned proponent(s) or author(s) of the:

Check the appropriate box below:

☐ Argument In Favor of (Proponents)
☐ Rebuttal to the Argument In Favor of (Opponents)
☒ Argument Against (Opponents)
☐ Rebuttal to the Argument Against (Proponents)

ballot measure K at the Presidential General election for the

San Bernardino County to be held on November 3, 2020 hereby state that this

argument is true and correct to the best of knowledge and belief.

His/her/their

Proponents/Authors:

1. Grant Ward
   Print Name
   Title
   Email Address
   Phone
   Signature
   Date
   8-13-2020

2. 
   Print Name
   Title
   Email Address
   Phone
   Signature
   Date

3. 
   Print Name
   Title
   Email Address
   Phone
   Signature
   Date

4. 
   Print Name
   Title
   Email Address
   Phone
   Signature
   Date

5. 
   Print Name
   Title
   Email Address
   Phone
   Signature
   Date
The undersigned proponent(s) or author(s) of the:

Check the appropriate box below:

☐ Argument In Favor of (Proponents)
☐ Rebuttal to the Argument In Favor of (Opponents)
☒ Argument Against (Opponents)
☐ Rebuttal to the Argument Against (Proponents)

ballot measure _K_ at the ___ Presidential General ___ election for the ___ Measure Letter ___ Title of Election ___

San Bernardino County ___ Jurisdiction ___ to be held on ___ November 3, 2020 ___ Date of Election ___ hereby state that this argument is true and correct to the best of _his_ knowledge and belief.

Proponents/Authors:

1. RICK C. LAL  
Print Name  
Signature  
Date  
Print Name  
President - SBCPAA  
Title (San Bernardino County Public Attorneys Association)  
Email Address  
Phone  

2.  
Print Name  
Signature  
Date  
Title  
Email Address  
Phone  

3.  
Print Name  
Signature  
Date  
Title  
Email Address  
Phone  

4.  
Print Name  
Signature  
Date  
Title  
Email Address  
Phone  

5.  
Print Name  
Signature  
Date  
Title  
Email Address  
Phone  

FILLED  
AUG 14 2020  
BY ___ DEPUTY ___ REGISTRAR OF VOTERS ___
STATEMENT BY PROONENTS/AUTHORS OF ARGUMENTS

Elections Code section 9600 requires that all arguments concerning measures shall be accompanied by the following statement, to be signed by each proponent and by each author, if different, of the argument.

The undersigned proponent(s) or author(s) of the:

☐ Argument In Favor of (Proponents)
☐ Rebuttal to the Argument In Favor of (Opponents)
☒ Argument Against (Opponents)
☐ Rebuttal to the Argument Against (Proponents)

ballot measure K at the Presidential General election for the
Measure Letter
Title of Election
San Bernardino County to be held on November 3, 2020 hereby state that this
Jurisdiction
Date of Election

argument is true and correct to the best of knowledge and belief.

his/her/their

Proponents/Authors:

1. Lloyd White
   Print Name
   President - Inland Empire Taxpayers Association
   Title
   Email Address
   8/13/20
   Date

2. Carol L. Rebb
   Print Name
   Retired Government Teacher
   Title
   Email Address
   Phone
   8/14/2020
   Date

3. 
   Print Name
   Signature
   Date
   Title
   Email Address
   Phone

4. 
   Print Name
   Signature
   Date
   Title
   Email Address
   Phone

5. 
   Print Name
   Signature
   Date
   Title
   Email Address
   Phone
STATEMENT BY PROONENTS/AUTHORS OF ARGUMENTS

Elections Code section 9600 requires that all arguments concerning measures shall be accompanied by the following statement, to be signed by each proponent and by each author, if different, of the argument.

The undersigned proponent(s) or author(s) of the:

☐ Argument In Favor of (Proponents)
☐ Rebuttal to the Argument In Favor of (Opponents)
☒ Argument Against (Opponents)
☐ Rebuttal to the Argument Against (Proponents)

ballot measure K at the Presidential General election for the
Measure Letter

San Bernardino County to be held on November 3, 2020 hereby state that this
Jurisdiction

Date of Election

argument is true and correct to the best of knowledge and belief.

his/her/their

Proponents/Authors:

1. Eloy Alvarez
   Print Name
   Title
   Regional Director-SEIU21
   Email Address
   Phone
   Date

2. Print Name
   Signature
   Date
   Title
   Email Address
   Phone

3. Print Name
   Signature
   Date
   Title
   Email Address
   Phone

4. Print Name
   Signature
   Date
   Title
   Email Address
   Phone

5. Print Name
   Signature
   Date
   Title
   Email Address
   Phone