Vote Yes on S to Save SuisunCity!

SuisunCity is facing real challenges:

- Homelessness is increasing
- 9-1-1 emergency response calls are rising
- Roads and infrastructure are aging
- A severe budget deficit threatens essential services
- Important local funding is expiring

To sustain essential services, SuisunCity relies on emergency reserves that will be depleted next year. Additionally, \$3.9 million in annual funding from a voter- approved sales tax is expiring.

Voting Yes on S renews and increases local sales tax funding to save essential services.

Without MeasureS, SuisunCity will make drastic cuts to services that directly impact safety and quality of life. SuisunCity may declare bankruptcy and eliminate our locally controlled fire department, police department, parks, libraries, youth and senior programs.

SuisunCity has experienced a 200% increase in fires and a 30% increase in 911 calls, 70% of which are for medical emergencies that require rapid response.

Current police and fire staffing is lower than standards, resulting in emergency response times up to 50 minutes, while the standard is five minutes. At times, only two or three on duty police officers patrol the whole city.

Voting Yes on S will:

- Address crime and public nuisances associated with homelessness
- Fix potholes and maintain streets
- Prevent the elimination of neighborhood police patrols
- Maintain local fire protection and improve 9-1-1 emergency response times
- Prevent cuts to essential services and maintain SuisunCity's financial stability and independence

Measure S Requires Fiscal Accountability and Local Control

- An independent oversight committee, annual audits and public disclosure of spending ensures funds are used properly
- Every penny must stay local and cannot be taken away by the State
- Essential purchases like groceries and prescription medicine are exempt from the cost

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's Information Pamphlet in the order provided below and will appear as indicated below.

The undersigned author(s) of the:

ARGUMENT IN FAVOR ■ 300 WORDS		GUMENT IN FAVOR 250 WORDS
ARGUMENT AGAINST 300 WORDS	REBUTTAL TO ARC	GUMENT AGAINST 250 WORDS
	Seneral Election	250 WORDS
uo	Name of election	
Election for the City of Suisun City		
1-	Jurisdiction name of district	
to be held on 11/5 /2 24		ate that such argument
is true and correct to the best of his/he		
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ote	Residence address (for verification pur	r oses) Date
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(Optional) Print title to appear before name		20
3)Signature of individual voter eligible to vote	Residence address (for verification pur	rposes) Date
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(Optional) Print title to appear before name	If yes complete page 2	Please circle one ▲
IF SIGNING ON BEHALF OF A GOVERING BOA	RD OR BONA FIDE ASSOCIATION OF CITIZEN	S YOU MUST COMPLETE PAGE 2
FILER NAME, ADDRESS & PHONE#	TO STATE TO	O TOO MOOT COMPLETE PAGE 2
Arguments/Rebuttals	Page 11	3/4/2016

AUTHORIZATION FOR ANOTHER PERSON(S) TO SIGN REBUTTAL ARGUMENT

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	A	against	
Measure S at the Gen Letter Held on 11/5/2024 Date of election	eral Election	election to be	e
Held on 11/5/2024	Name of election 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)	the argument may b	e replaced with different peo	ple to sign
1)PRINT NAME OF REBUTTAL SIGNER	_to sign instead of_		2024
PRINT NAME OF REBUTTAL SIGNER			DATE
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
4)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			
Arguments/Rebuttals	Page 13		3/4/2016

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ARGUMENT AGAINST	REBUTTAL TO A	RGUMENT AGAINST
300 WORDS	KEBOTTAL TO AL	250 WORDS
Ballot measure letter S at the Gener		
Election for the City of Suisun City	Name of election	
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Wanda Williams		
Print Name to appear in voter's pamphlet	Are you signing on behalf of associa	ation or governing board? YES or N
SOLAND COUNTY SUPERVISOR, DISTRICT 3	If was complete page 2	Please circle one A
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IF SIGNING ON BEHALF OF A GOVERING BOARD O	R BONA FIDE ASSOCIATION OF CITIZ	ENS YOU MUST COMPLETE PAGE 2
FILER NAME, ADDRESS & PHONE#	Dana 11	2/4/204/
Arguments/Rebuttals	Page 11	3/4/2016

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The undersigned author(s) of	the argument		
In Favor of		gainst	
Measure at the	neral Election	election to be	e
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) Wand L Williams PRINT NAME OF REBUTTAL SIGNER	_to sign instead		8/14/2001 DATE
PRINT NAME OF REBUTTAL SIGNER	to sign instead of_	SIGNATURE OF ARGUMENT SIGNER	DATE
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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	e "Signature Stateme	ent" submitted with the rebut	tal argument
Arguments/Rebuttals	Page 13		3/4/2016

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ARGUMENT IN FAVOR 300 WORDS	REBUTTAL TO ARGUMENT	
ARGUMENT AGAINST 300 WORDS	REBUTTAL TO ARGUMENT	
Ballot measure letter S at the Nove		
	Name of el ection	
Election for the City of Suisun City	sdiction – name of district	
to be held on _11/5/2014	hereby state that su	ich argument
Election Date		ion argamont
is true and correct to the best of his/her/the	eir knowledge and belief.	_
1		2021 Date
LISA BOHNINGTON		1 2 2 3 10
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PRESIDENT/CED FAIRFIELD-Suisun	If yes complete page 2 Please	e circle one \land
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2) Signature of individual voter eligible to vote	Residence address (for verification purposes)	20 Date
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IF SIGNING ON BEHALF OF A GOVERING BOARD O	OR BONA FIDE ASSOCIATION OF CITIZENS YOU MUST	COMPLETE PAGE 2
FILER NAME, ADDRESS & PHONE#		2/1/2015
Arguments/Rebuttals	Page 11	3/4/2016

(Elections Code Section 9600)

CHECK ONE OF THE FOLLOWING & RECORD LETTER OF MEASURE				
V	Argument in favor of measure	Rebuttal to argument in favor of measure		
	Argument against measure	Rebuttal to argument against measure		
ARGUM	ENTS and/or REBUTTALS FILED	BY (Check any of the following that apply:		
C	ontact Person's Signature			
PI	hone #Fax#	E-mail		
Th is	e following information is submitted a Bona Fide Association of Citizen	d by the filers(s) to establish that the organization or group		
100	ame of Association:	of Theis of Special District initiative		
	incipal Officer's Printed Na			
Pri	incipal Officer's <u>Signature</u> le President/CEO			
_		E-mail lisa@fairfieldsuisunchamber.com		
	A Form 410 Statement of Orga Primarily Formed Ballot Meas was filed on Com	anization – establishing the group or organization as a sure committee to support or oppose Measure		
X	The organization meets on a r OFFICE LEM + UESC at the following schedule	egular basis. Meetings are held at Charbon		
		upport the claim that the group or organization is a Bona group of individuals who support or oppose Measure		
ħT.	Contact person name & phone#_	LISA BONNINGTON 707425-4625		

New - Senate bill 665 requires an organization or association submitting an argument for or against a measure to submit additional information to enable the elections office to determine if the organization qualifies an a bona fide association of citizens.

AUTHORIZATION FOR ANOTHER PERSON(S) TO SIGN REBUTTAL ARGUMENT

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The undersigned author(s) of	the argument		
in Favor of	A	gainst	
Measure S at the Ger	Name of election	election to I	oe .
Held on 11/5/2024 Dat eof elect to	Name of electionauthorize(s)	the following individual(s)	to sign
The rebuttal argument in his/l			
One or more people who signed the rebuttal argument)	the argument may b	e replaced with different pe	ople to sign
PRINT NAME OF REBUTTAL SIGNER	_to sign instead o		1/30/2014 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
4)	_to sign instead of_		
PRINT NAME OF REBUTTAL SIGNER		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 rebu	ttal argument

Page 13

3/4/2016

Arguments/Rebuttals

(Elections Code Section 9065, 9600)

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The undersigned author(s) of the:

Arguments/Rebuttals

ARGUMENT IN FAVOR	
300 WORDS	
ARGUMENT AGAINST	
300 WODDS	

REBUTTAL TO ARGUMENT IN FAVOR
250 WORDS

REBUTTAL TO ARGUMENT AGAINST

250 WORDS

7/19/2024

Ballot measure letter S at the General Election Name of election Election for the City of Suisun City Jurisdiction - name of district to be held on 11/5/2024 hereby state that such argument Election Date is true and corre t to the best of his/her/their knowledge and belief. 1) Signa 621 Pintail Dr. Suisun City, CA 94533 Residence address (for verification purposes) Aaron **Print Name** Are you signing on behalf of association or governing board? (YES) or NO If yes complete page 2 PRESIDENT, SUISUD CITY PLDFESSIONAL Please circle one FIREFIGHTERS ASSOCIATION 2) Signature of individual voter eligible to vote Residence address (for verification purposes) **Print Name** Are you signing on behalf of association or governing board? YES or NO Please circle one If yes complete page 2 (Optional) Title Signature of Individual voter eligible to vote Residence address for verification purposes) Are you signing on behalf of association or governing board? YES or NO **Print Name** Please circle one If yes complete page 2 (Optional) Title 4)
Signature of individual voter eligible to vote Residence address (for verification purposes) Are you signing on behalf of association or governing board? YES or NO **Print Name** Please circle one If yes complete page 2 (Optional) Title 20 Signature of individual voter eligible to vote Residence add res (for verification purposes) **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 IF SIGNING ON BEHALF OF A GOVERING BOARD OR BONA FIDE ASSOCIATION OF CITIZENS YOU MUST COMPLETE PAGE 2 **CONTACT PERSON NAME & PHONE #**

Page 11

SIGNATURE STATEMENT PAGE TWO (Elections Code Section 9065, 9600)

CHECK ONE OF THE FOLLOWING & RECORD LETTER OF MEASURE

	■ Arg	gument in favor of measure	☐ Rebuttal to argu	ument in favor of m	neasure
	□ Arg	gument against measure	☐ Rebuttal to arg	ument against mea	sure
ARG	UMEN	TS and/or REBUTTALS FILED BY (Check any of the fo	llowing that apply:	
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ø	Bona Name Princi Princi Title F	Fide Association of Citizens: Fide Association of Citizens or File of Association; Suisun City Profession pal Officer's Printed Name pal Officer's Signature	ers of Special Districtional Firefighters Associated	ct Initiative	
E		A Form 410 Statement of Organizate Primarily Formed Ballot Measure of was filed on Committee (The Form 410 must be filed within 10 days of the The organization meets on a regular Suisun City, CA 94533 at the following schedule Every other Other information that would support Fide Association, rather than a group FEIN # 92-1018748 Copr / Org # 5966620	ommittee to support of the I.D.#	or oppose Measure \$\frac{\$1000.00 \text{ in contributions}}{621 \text{ Pintail}} oup or organization	Dr

AUTHORIZATION FOR ANOTHER PERSON(S) TO SIGN REBUTTAL ARGUMENT

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

In Favor of		Against	
Measure at the	eneral Election	election to I	be
Held on 11/5/2024	authorize(s) the following individual(s)	to sign
The rebuttal argument in h			
e or more people who signer e rebuttal argument)	ed the argument may b	e replaced with different pe	ople to sign
	to sign instead of	//	8/12/24
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	to sign instead of		
PRINT NAME OF REBUTTAL SIGNER		SIGNATURE OF ARGUMENT SIGNER	DATE
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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
tach this form to the two pa	ge "Signature Statem	ent" submitted with the rebu	ittal argum

Page 13

7/19/2024

Arguments/Rebuttals

(Elections Code Section 9065, 9600)

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The undersigned author(s) of the:

ARGUMENT IN FA	AVOR
300 W	ORDS
ARGUMENT AGA	INST [
200 144	OPDC

REBUTTAL TO ARGUMENT IN FAVOR
250 WORDS

REBUTTAL TO ARGUMENT AGAINST
250 WORDS

Ballot measure letter S at the General Election			
Election for the City of Suisun City	Name of election		
to be held on 11/5/2024	sdiction – name of district hereby stat	e that such argument	
is true and correct to the best of his/her/the	eir knowledge and belief.		
1). S Ju Print Name	Are you signing on behalf of association	or governing board?(YE) or NO	
TREASURER, SUISHN CITY POLICE (Optional) Title OFFICERS ASS	If yes complete page 2	Please circle one∧	
2)		20	
Signature of individual voter eligible to vote	Residence address (for verification purp		
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	
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Signature of individual voter eligible to vote	Residence address (for verification purp		
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IF SIGNING ON BEHALF OF A GOVERING BOARD O	OR BONA FIDE ASSOCIATION OF CITIZENS	YOU MUST COMPLETE PAGE 2	
CONTACT PERSON NAME & PHONE #			
	- 44		
Arguments/Rebuttals	Page 11	7/19/2024	

(Elections Code Section 9065, 9600)

CHECK ONE OF THE FOLLOWING & RECORD LETTER OF MEASURE ■ Argument in favor of measure □ Rebuttal to argument in favor of measure ☐ Argument against measure ☐ Rebuttal to argument against measure ARGUMENTS and/or REBUTTALS FILED BY (Check any of the following that apply: **Board of Supervisors or Governing Board** Contact Person's Printed Name_____ Contact Person's Signature_____ Title The following information is submitted by the filers(s) to establish that the organization or group is a Bona Fide Association of Citizens: 山 Bona Fide Association of Citizens or Filers of Special District Initiative Name of Association: Suisun City Police Officers Association Principal Officer's Printed NameJulia Lazaro Principal Officer's Signature_____ E-mailjulia11lazaro@gmail.com Title Treasurer Phone#(707) 803-6375 Fax# A Form 410 Statement of Organization – establishing the group or organization as a Primarily Formed Ballot Measure committee to support or oppose Measure _____ was filed on _____Committee I.D.#____(The Form 410 must be filed within 10 days of the date the committee receives \$1000.00 in contributions) The organization meets on a regular basis. Meetings are held at at the following schedule_____ X Other information that would support the claim that the group or organization is a Bona Fide Association, rather than a group of individuals who support or oppose Measure Association is comprised of sworn and non sworn personnel of the Suisun City Police Dept. Meetings are held quarterly.

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Held on 11/5/2024 Date of election The rebuttal argument in his/	authorize(s)		
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5)PRINT NAME OF REBUTTAL SIGNER	to sign instead of_	SIGNATURE OF ARGUMENT SIGNER	DATE
Attach this form to the two page "Signature Statement" submitted with the rebuttal argument			
A marrier a marrier (Dishauta de	D 42		7/10/2024
Arguments/Rebuttals	Page 13		7/19/2024

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Without MeasureS, SuisunCity will make drastic cuts to services that directly impact safety and quality of life. SuisunCity may declare bankruptcy and eliminate our locally controlled fire department, police department, parks, libraries, youth and senior programs.

SuisunCity has experienced a 200% increase in fires and a 30% increase in 911 calls, 70% of which are for medical emergencies that require rapid response.

Current police and fire staffing is lower than standards, resulting in emergency response times up to 50 minutes, while the standard is five minutes. At times, only two or three on duty police officers patrol the whole city.

Voting Yes on S will:

- Address crime and public nuisances associated with homelessness
- Fix potholes and maintain streets
- Prevent the elimination of neighborhood police patrols
- Maintain local fire protection and improve 9-1-1 emergency response times
- Prevent cuts to essential services and maintain SuisunCity's financial stability and independence

Measure S Requires Fiscal Accountability and Local Control

- An independent oversight committee, annual audits and public disclosure of spending ensures funds are used properly
- Every penny must stay local and cannot be taken away by the State
- Essential purchases like groceries and prescription medicine are exempt from the cost



Vote Yes on S to Save SuisunCity!

SuisunCity is facing real challenges:

- Homelessness is increasing
- 9-1-1 emergency response calls are rising
- Roads and infrastructure are aging
- A severe budget deficit threatens essential services
- Important local funding is expiring

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The future of SuisunCity is at stake. Vote Yeson S to Save SuisunCity!

AGREN LENLING 8/12/24

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