## Argument in Favor of Measure C-18

Voting YES on Measure C-18 means you will be supporting vital capital improvements by funding replacement of our aging ambulance fleet, emergency medical and communications equipment and the repair and upgrade of our Main Street facility. This parcel tax will sunset at the end of six years. The Cambria Community Healthcare District serves the North Coast of San Luis Obispo County with Paramedic Ambulance services, emergency medical care and public education. Many of our ambulances have nearly 200,00 miles on them and are increasingly costly to maintain. Emergency life-saving equipment is outdated and needs to be replaced. Our Main Street building needs extensive repair and upgrades.

The funds raised by your YES vote on Measure C-18, will be used exclusively for replacing ambulances, replacing outdated emergency medical equipment, radio communications equipment, replacing computer and technology support of our Paramedic Ambulance services, and finally instituting essential repairs and upgrades to our Main Street building. This parcel tax will sunset at the end of six years. We have made many changes to keep your District financially healthy. We have, however, also experienced a significant reduction in ambulance payments from patients we transport. This has drastically limited our ability to fund the capital improvements essential to our operation. Without these funds the District will be unable to offer the excellent quality and dependable service you have come to

Mary Anne Meyer

Shirley Bianchi \_\_\_\_\_



## SIGNATURE STATEMENT

All arguments concerning measures filed pursuant to Division 9 of the California Elections Code shall be accompanied by the following form statement, to be signed by each proponent and by each author, if different, of the argument. Only the first five signatures will be printed in the Sample Ballot/Voter Information Pamphlet.

Argument in Favor of Rebuttal to the Argument Against	Argumen Rebuttal	to the Argume	nt in Favor of
ballot measure (insert letter) <u>C-18</u>			
at the (insert type of election - Primary, Gene	ral, Special)	General	Election
for the Cambria Comm	L etion	her Han	no Dalo
(insert name of Jurisdiction - County,	Special District	, School Distri	ct)
to be held on (insert election date) Novembe			
true and correct to the best of (insert his, her	or their)	knowle	edge and belief.
Signed		Date	7/10/0-
Printed Name Shirley BiAn	chi	Dute	TO 100
Signed	CNI	Date	7-18-18
Printed Name JERRY Wood		-	
Signed		Date	7.18:18
Printed Name Mars Aree M	AUD	Date	_
Signed	C 3G	Date	Thetee
Printed Name Bob Rifner	14	Date	7/18/2018
Signed	1	Date	Trustee
Printed Name		Date	
11 11 .			
Contact person: Heidi Holmes-	Nagy	Phone #_	
ARGUMENT/REBUTTAL filed by (check any of t	he following th	at anniva	
Board of Supervisors or Governing Board	are ronowing ar	ас арріу).	
Bona Fide Sponsors or Proponents of the	Measure		
	of Association:		