

**Lucia Mar Unified School District**  
**2024 School Bond Measure – Election Day: November 5, 2024**  
**ARGUMENT IN FAVOR OF MEASURE H**

**EVERY student deserves to THRIVE** in a school with safe, modern, creative spaces that support teaching and learning. **VOTING YES on Measure H will help make that possible** in Arroyo Grande, Grover Beach, Nipomo, Oceano, PismoBeach, and Shell Beach **neighborhood schools**.

Our community has generously supported **Lucia Mar Unified School District (LMUSD)** schools in the past. But over time and with constant use, once again Lucia Mar schools need attention. Schools built 60+ years ago, are aging; underground pipes/infrastructure are failing, resulting in gas leaks, water leaks, and sewage backups. Our school facilities need continuing repairs/upgrades that far exceed LMUSD's available maintenance budget.

**LMUSD** has provided a quality education for generations of local children. Unfortunately, LMUSD **school facilities** do not match the exceptional teaching/learning happening inside them. **Measure H** provides a prudent, responsible plan to continue repairing/modernizing LMUSD schools for improved student safety and equal access to quality instruction/ learning.

**Measure H will:**

- **Remove** hazardous materials like asbestos/lead pipes where needed
- **Repair/replace** deteriorating roofs, plumbing, gas lines, sewer lines, and electrical systems
- **Provide** the classrooms, facilities and technology needed to support high quality instruction in math, science, engineering, and technology
- **Modernize** labs, career technical education facilities/equipment so students are prepared for college and in- demand careers
- **Upgrade** older schools so they meet current health/building safety codes, and provide proper access for students with disabilities

**Taxpayer safeguards are REQUIRED:**

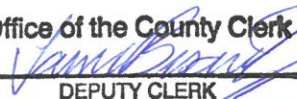
- ALL funds STAY LOCAL
- The State CANNOT take this funding away
- NO funds are allowed for administrators' salaries/pensions
- Independent Citizens' Oversight and mandatory audits ensure funds are spent properly

Passing Measure H qualifies LMUSD to receive millions in State matching funds when they become available, leveraging tax dollars even further.

Join teachers, parents, and residents in **VOTING YES on H** for safe, modern, Lucia Mar elementary, middle and high schools. Thank you.

**FILED**

JUL - 5 2024

Office of the County Clerk  
  
DEPUTY CLERK

# AUTHORIZATION FOR ANOTHER PERSON TO SIGN REBUTTAL ARGUMENT

The following author(s) of the Argument  In Favor or  Against Measure H authorize the following person(s) to prepare, submit or sign the Rebuttal to the Argument  In Favor or  Against Measure H for the (Insert Name of Jurisdiction – County of San Luis Obispo, Special District Name, School District Name) at a (Insert Type of Election - Primary, General, Special) Election to be held on (Insert Election Date).

Signatures of the author(s) of the Argument  In Favor or  Against Measure \_\_\_\_\_ are required:

<u>CHAD ROBERTSON</u> Name (Print)	 Signature	<u>7/2/2024</u> Date
_____ Name (Print)	_____ Signature	_____ Date
_____ Name (Print)	_____ Signature	_____ Date
_____ Name (Print)	_____ Signature	_____ Date
_____ Name (Print)	_____ Signature	_____ Date

FORM OF STATEMENT TO BE FILED BY AUTHOR(S) OF  
 PRIMARY ARGUMENTS AND REBUTTALS  
 (§9164, 9167 & 9600)

All arguments concerning measures filed pursuant to Division 9, Chapter 2 (beginning with § 9100) of the Elections Code shall be accompanied by the following form statement **to be signed** by each proponent/author, if different, of the argument:

The undersigned proponent(s) or author(s) of the  Argument  Rebuttal  In Favor  **or**  **Against**  
**Measure H** for the Lucia Mar Unified School District at the Presidential General Election  
 Election to be held on November 5, 2024, hereby state that the argument is true and correct to  
 the best of (his/her/their) knowledge and belief.

Print Name <u>CHAD ROBERTSON</u>	Signature 
Title <u>LOCAL BUSINESS OWNER &amp; LUCIA MAR GRADUATE</u>	Date <u>7/2/2024</u>
Print Name _____	Signature _____
Title _____	Date _____
Print Name _____	Signature _____
Title _____	Date _____
Print Name _____	Signature _____
Title _____	Date _____
Print Name _____	Signature _____
Title _____	Date _____

**ARGUMENT/REBUTTAL FILED BY** (check any of the following that apply) This information will be provided on the County Clerk/Elections Website:

**Board of Supervisors or Governing Board**  
Contact Person's Printed Name: \_\_\_\_\_  
Contact Person's Signature: \_\_\_\_\_  
Title: \_\_\_\_\_  
Phone: \_\_\_\_\_ FAX: \_\_\_\_\_  
E-Mail: \_\_\_\_\_

**Bona Fide Association of Citizens or Filers of Special District Initiative**  
Name of Association: \_\_\_\_\_  
Principal Officer's Printed Name: \_\_\_\_\_  
Principal Officer's Signature: \_\_\_\_\_  
Title: \_\_\_\_\_  
Phone: \_\_\_\_\_ FAX: \_\_\_\_\_  
E-Mail: \_\_\_\_\_

**Attach list of officers if document relates to a school district measure.**


**Individual voter who is eligible to vote on the measure:**  
Printed Name: CHAD ROBERTSON



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Print Name <u>Nancy DePue</u>	Signature 
Title <u>Retired- superintendent</u>	Date <u>July 3, 2024</u>
Print Name _____	Signature _____
Title _____	Date _____
Print Name _____	Signature _____
Title _____	Date _____
Print Name _____	Signature _____
Title _____	Date _____



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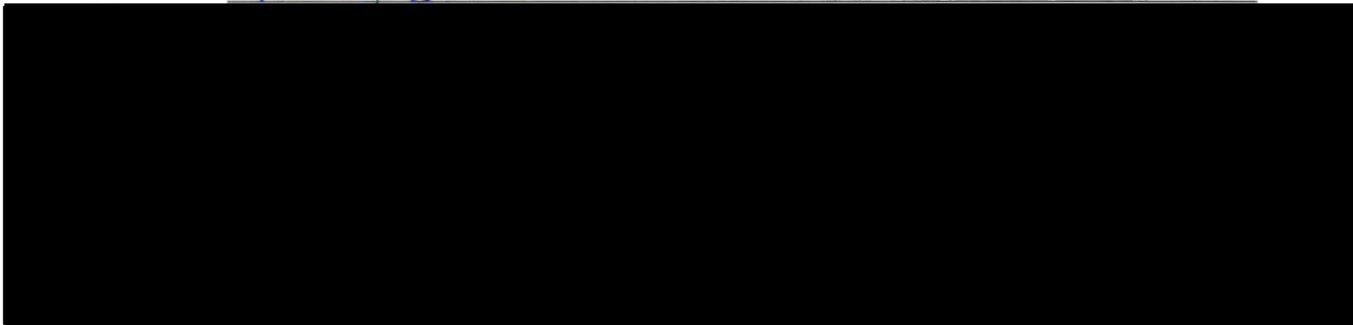
**Board of Supervisors or Governing Board**  
Contact Person's Printed Name: \_\_\_\_\_  
Contact Person's Signature: \_\_\_\_\_  
Title: \_\_\_\_\_  
Phone: \_\_\_\_\_ FAX: \_\_\_\_\_  
E-Mail: \_\_\_\_\_

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Name of Association: \_\_\_\_\_  
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Phone: \_\_\_\_\_ FAX: \_\_\_\_\_  
E-Mail: \_\_\_\_\_

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**Individual voter who is eligible to vote on the measure:**

Printed Name: *Nancy DePue*



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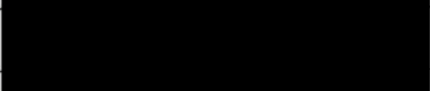
Signatures of the author(s) of the **Argument**  **In Favor** or  **Against Measure** \_\_\_\_\_ are required:

<u>Nancy DePue</u> Name (Print)		<u>July 3, 24</u> Date
_____ Name (Print)	_____ Signature	_____ Date
_____ Name (Print)	_____ Signature	_____ Date
_____ Name (Print)	_____ Signature	_____ Date
_____ Name (Print)	_____ Signature	_____ Date

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Print Name <u>CARROL PRUETT</u> Title <u>RETIRED BANK PRESIDENT/CEO, LIFELONG RESIDENT</u>	Signature  Date <u>6-26-24</u>
Print Name _____ Title _____	Signature _____ Date _____
Print Name _____ Title _____	Signature _____ Date _____
Print Name _____ Title _____	Signature _____ Date _____
Print Name _____ Title _____	Signature _____ Date _____

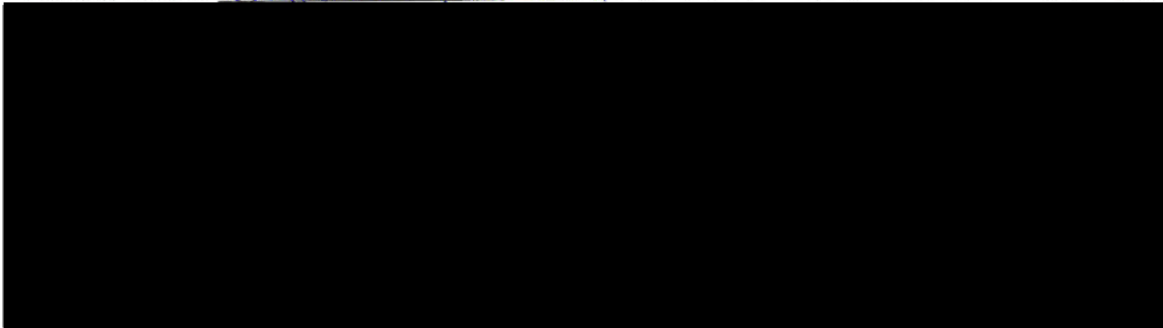


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Contact Person's Signature: \_\_\_\_\_  
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Phone: \_\_\_\_\_ FAX: \_\_\_\_\_  
E-Mail: \_\_\_\_\_

**Bona Fide Association of Citizens or Filers of Special District Initiative**  
Name of Association: \_\_\_\_\_  
Principal Officer's Printed Name: \_\_\_\_\_  
Principal Officer's Signature: \_\_\_\_\_  
Title: \_\_\_\_\_  
Phone: \_\_\_\_\_ FAX: \_\_\_\_\_  
E-Mail: \_\_\_\_\_

**Attach list of officers if document relates to a school district measure.**

**Individual voter who is eligible to vote on the measure:**  
Printed Name: CARROL DRUETT  


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<u>Carroll Pruitt</u> Name (Print)	 Signature	<u>6-26-24</u> Date
_____ Name (Print)	_____ Signature	_____ Date
_____ Name (Print)	_____ Signature	_____ Date
_____ Name (Print)	_____ Signature	_____ Date
_____ Name (Print)	_____ Signature	_____ Date

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Print Name <u>MIKE MINER</u> Title <u>RETIRED LOCAL BUSINESS OWNER AND LIFELONG RESIDENT</u>	Signature  Date <u>6-23-24</u>
Print Name _____ Title _____	Signature _____ Date _____
Print Name _____ Title _____	Signature _____ Date _____
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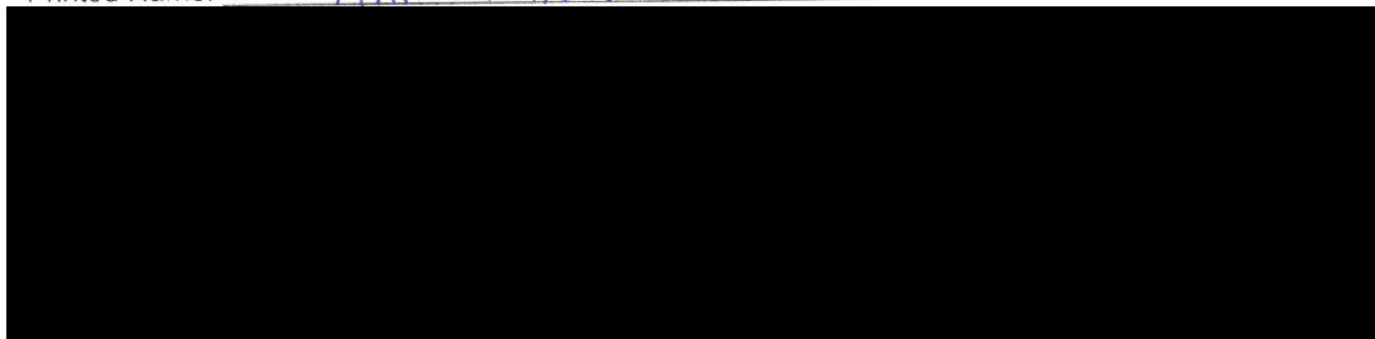
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**Individual voter who is eligible to vote on the measure:**  
Printed Name: MIKE MINER



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<u>MIKE MINER</u> Name (Print)	 Signature	<u>6-23-24</u> Date
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Print Name <u>Juan Olivaria</u> Title <u>Retired Lucia Mar Educator, County Office of Education Board Member, and longtime Resident</u>	Signature  Date <u>6/26/24</u>
Print Name _____ Title _____	Signature _____ Date _____
Print Name _____ Title _____	Signature _____ Date _____
Print Name _____ Title _____	Signature _____ Date _____
Print Name _____ Title _____	Signature _____ Date _____



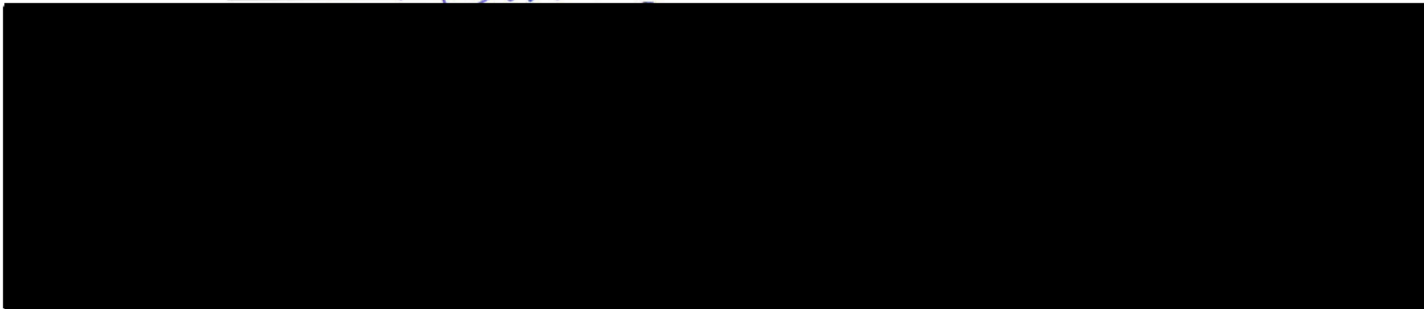
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E-Mail: \_\_\_\_\_

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**Individual voter who is eligible to vote on the measure:**  
Printed Name: Juan Olivarris \_\_\_\_\_

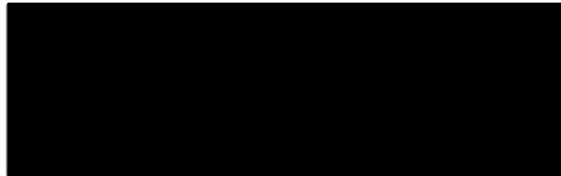


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Signatures of the author(s) of the **Argument**  **In Favor** or  **Against Measure** \_\_\_\_\_ are required:

Juan Olivarrin  
Name (Print)



6/26/24  
Date

\_\_\_\_\_  
Name (Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name (Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name (Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name (Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date