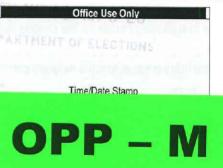
John Arntz, Director

### **Ballot Argument Control Sheet A**

Control Sheet A must be submitted for every ballot argument, with required signatures and author information. If your argument has more than one author, you must also submit Control Sheet B with required signatures and information for all additional authors.

For an argument submitted on behalf of an organization, the "Individual" section must also be completed by a principal officer of the organization who must be a registered San Francisco voter.

If an argument states that an individual or organization other than the author supports or opposes the ballot measure, or agrees with or endorses the argument, a completed and signed Consen Form is required.



24 hours after submission to the Department at publications	on error by sending an electronic copy of your ballot argument text within s@sfgov.org.
Section 1: Argument Information	
Proposition M	-
Proponent Argument Rebuttal to Proponent	Argument Paid Argument in Favor
Opponent Argument  Rebuttal to Opponent	Argument Against Paid Argument Against
Section 2: Author Information  Declaration Related to Proponent and Opponent Argume	ents
I attest under the penalty of perjury that I am an Author of the am not a Non-supporter of this measure. A Non-supporter is	e Proponent Argument for Proposition being submitted and that I defined as a person who, with respect to a measure:
<ul> <li>Has received or been promised any compensation of that committee; or</li> </ul>	at has made or plans to make expenditures in opposition to the measure; or thing of value from such a committee to perform consulting services for campaign literature or in advertising that advocates for the defeat of the
I attest under the penalty of perjury that I am an Author of the not a Supporter of this measure. A Supporter is defined as a	e Opponent Argument for Proposition M being submitted and that I am person who with respect to a measure:
<ul> <li>Has received or been promised any compensation of that committee; or</li> </ul>	at has made or plans to make expenditures in support of the measure; or thing of value from such a committee to perform consulting services for campaign literature or in advertising that advocates for the adoption of the
Complete the following to indicate whether the Author is	an individual or an organization:
Individual (or principal officer of Organization)	
Full Name (Print) LARRY S. MARSO	Title (If Arrifordie) FSC
	Title (If Applicable) Esq.
San Francisco Address (Where you are Registered	SAN FRANCISCO, CA
San Francisco Address (Where you are Registered Signature	SAN FRANCISCO, CA
San Francisco Address (Where you are Registered  Signature  Organization (Entity) (If selected, complete both  Name of Organization (Print)	SAN FRANCISCO, CA
San Francisco Address (Where you are Registered  Signature  Organization (Entity) (If selected, complete both	Ema the Individual Author section and the Organization Section)
Signature  Organization (Entity) (If selected, complete both Name of Organization (Print)  Who should be listed as an Author for your Organization?	SAN FRANCISCO, CA  Ema  the Individual Author section and the Organization Section)  on purposes only,
Signature  Organization (Entity) (If selected, complete both Name of Organization (Print)  Who should be listed as an Author for your Organization?  Only the Organization Both the Officer and the Check if the title or identifying information is for identification.	SAN FRANCISCO, CA  Ema  the Individual Author section and the Organization Section)  on purposes only,
Signature  Organization (Entity) (If selected, complete both Name of Organization (Print)  Who should be listed as an Author for your Organization?  Only the Organization Both the Officer and the *Check if the title or identifying information is for identification if you are signing as an individual and not of behalf of an organization  Signature  Section 3: Submitter Information	Ema the Individual Author section and the Organization Section)  on purposes only, ganization.  Email
Signature  Organization (Entity) (If selected, complete both Name of Organization (Print)  Who should be listed as an Author for your Organization?  Only the Organization Both the Officer and the *Check if the title or identifying information is for identification if you are signing as an individual and not of behalf of an organization  Signature  Section 3: Submitter Information	Ema  the Individual Author section and the Organization Section)  the Organization   on purposes only,  ganization.
Signature  Organization (Entity) (If selected, complete both Name of Organization (Print)  Who should be listed as an Author for your Organization?  Only the Organization Both the Officer and the *Check if the title or identifying information is for identification if you are signing as an individual and not of behalf of an organization  Signature  Section 3: Submitter Information  The submitter is the person who delivers the argument and significant is the person who delivers the argument and the person who delivers the argument and the person who delivers the argument and the person	Ema the Individual Author section and the Organization Section)  on purposes only, ganization.  Email
Signature  Organization (Entity) (If selected, complete both Name of Organization (Print)  Who should be listed as an Author for your Organization?  Only the Organization Both the Officer and the *Check if the title or identifying information is for identification if you are signing as an individual and not of behalf of an organization  Section 3: Submitter Information  The submitter is the person who delivers the argument and so a submission, the Department will contact the submitter.  Full Name (Print) LARRY S. MARSO	SAN FRANCISCO, CA  Ema  The Individual Author section and the Organization Section)  The Organization   The Organization   The Organization   The Department of the Department

Section 4	l: In	formati	on for	Paid A	Arguments
			<b>911 191</b>		

Paid arguments must include information about the true source of funds for the publication of the argument. It is also required to indicate whether the true source of funds is a recipient committee. This information will be printed below the argument and the author information in the Voter Information Pamphlet.

The true source of funds for the printing fee of this argument:
Is the true source of funds a recipient committee, as defined by CA Gov. Code §82013?
Yes No No If the true source(s) of funds is a recipient committee, list the three largest contributors below:
1.
2.
3.

## Section 5: Argument Text

The text of your argument will be printed exactly as submitted. Ensure that your argument meets the legal word limit. You may request that specific argument text be printed in bold, italic, or bold italic type. Type your argument with the desired formatting, or underline the argument text to be formatted and in the left column, mark "B" for bold, "I" for italics, or "BI" for bold italics. Other special formatting is not permitted. **Include author information in argument text.** 

Format B, /, BI

#### Keep Text Within the Vertical Lines -

# of words per line

**Proposition M** introduces *new tax rates that dramatically increase the burden for many businesses in San Francisco*. While some small business might see minimal changes, others—especially mid-sized and large employers—face **doubled or even quadrupled** tax rates.

This isn't a "tweak," it's a massive tax increase that could drastically alter the financial future of major companies. Proponents claim the measure is "revenue neutral". The Controller disagrees: it's a \$50 million/year tax increase. It shifts the burden heavily onto businesses still reeling from San Francisco's COVID collapse. These steep tax hikes will force companies to reduce investments, cut jobs and reconsider operating in San Francisco entirely.

There's a better way to reform our business tax system. As someone who has drafted a ballot measure, I know that a citizen-led initiative in 2025 can bypass hungry City Hall politicians to create a fair, broad-based tax structure that encourages business growth rather than penalizing it. Together, we can enact tax and spending reforms in 2025 that streamline government, simplify the tax code, and make San Francisco a more attractive place for businesses of all sizes.

Vote **NO** on Proposition M and join me in supporting real, citizen-driven tax reform in 2025 that benefits *all* of San Francisco.

Larry Marso

Mr. Marso is a technology executive, M&A advisor and attorney. A staunch advocate for fiscal responsibility, he authored a ballot measure to regulate San Francisco navigation/linkage centers, has fought corruption and fraud in our political parties and nonprofits, and as a member and former executive of the local Republican Party committee, has offered principled opposition to John Dennis and the "progressive Republican" Briones Society.

Stop the Big Fraud on San Francisco voters! visit: https://bigfraud.com

If handwritten information or a revision is unclear, Department staff will interpret the handwritten information to the best of their abilities; this interpretation is final.

**Total Word Count** 

Office Use Only	and the second second second		
Total # of words=	X \$2/word =	+ \$200 publication fee =	Staff Initials
# of signatures submit	ed in lieu of publication fee	Receipt#	
X \$0.50/signature		Check#	
Adjusted Fee Total		Amount Paid	

John Arntz, Director

Office Use Only

# Supporters / Opponents to be listed on Ballot Label (Must be submitted with Control Sheet A)

take	pallot labels concerning measuren from the authors of the Office arding the measure. (CAEC §9)	al Proponent and Offici			ARTHENT OF ELECTIONS
1.	. The list of Supporters / Opponents shall not exceed 125 characters in length. The Department will not publish beyond the 125th character.				
2.	2. An associate, nonprofit organization, business, or individual shall not be listed unless they have also completed a Control Sheet for the corresponding Ballot Argument.				Time / Date Stamp
<ol> <li>A Supporter / Opponent shall not be listed if the Supporter / Opponent is a political party or is representing a political party.</li> </ol>					
4.	<ol> <li>If this form is not submitted, the Department will print "None submitted" for the corresponding Official Ballot Argument.</li> </ol>				
	ilitate typesetting, and reduce to onents within 24 hours after su				nic copy of the list of supporters or
Se	ction 1: Argument Info	rmation			
Pr	oposition <u>M</u>	Official Proponei	nt Argument	Offic	cial Opponent Argument
Se	ection 2: Information fo	or Supporters and	l Opponents		
	1	P. 1. 1	of the faller down		

A supporter or opponent shall not be listed unless it is one of the following:

- An association, nonprofit organization, or business that was not originally created as a committee described in Section 82013 of the Government Code and that has been in existence for at least four years.
- A current or former elected official, who may be listed with the official's title (e.g., "State Senator Mary Smith," "Assembly Member Carlos Garcia," or "former Eureka City Council Member Amy Lee"). These titles may be shortened (e.g. "Senator" or "Sen." for "State Senator" or "Asm." for "Assembly Member").
- iii. An individual who is not a current or former elected official may be listed only with the individual's first and last name and an honorific (e.g., "Dr.," "M.D.," "Ph.D.," or "Esquire"), with no other title or designation, unless it is a title representing an association, nonprofit organization, or business that meets the requirements

## Section 3: List of Individuals, Associations, Nonprofit Organizations, and / or Businesses

Individuals, Associations, Nonprofit Organizations, and / or Businesses (not to exceed 125 characters in length, including punctuation, spaces between supporters/opponents may be omitted. Each supporter / opponent shall be separated by a semicolon):

- Paragraphic Control of the Control	
Larry	Varso, Esq.
	<u> </u>

## Section 4: Submitter Information (Same as Control Sheet A)

The submitter is the person who delivers the argument and supporting materials to the Department. If there is a question or issue with a submission, the Department will contact the submitter.

Full Name (Print): Lasry Marsa	Phone:
Mailing Address:	SF CA 94/08
Signature Signature	Email: