

497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER Gil Esquer 4 Turlock City Mayor - 2022			Date of This Filing <u>October 14, 2022</u>	Date Stamp <div style="font-size: 2em; color: #00AEEF; font-weight: bold;">RECEIVED</div> <div style="color: #FF0000; font-weight: bold;">OCT 17 2022</div> <div style="color: #00AEEF; font-weight: bold;">Office of the City Clerk</div>	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER <div style="background-color: black; width: 100px; height: 20px;"></div>	I.D. NUMBER (if applicable) 1453768	Report No. _____			
STREET ADDRESS <div style="background-color: black; width: 150px; height: 20px;"></div>		<input type="checkbox"/> Amendment to Report No. _____ (explain below)			
CITY Turlock	STATE CA	ZIP CODE 95380	No. of Pages _____		

1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE*	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
10/13/2022	Ron Curiel - <div style="background-color: black; width: 100px; height: 1.2em; display: inline-block;"></div> Turlock, CA 95382	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Foster Farms	\$1,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		<input type="checkbox"/> Check if Loan _____% Provide interest rate
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		<input type="checkbox"/> Check if Loan _____% Provide interest rate

Reason for Amendment: _____

* Contributor Codes
 IND - Individual
 COM - Recipient Committee (other than PTY or SCC)
 OTH - Other (e.g., business entity)
 PTY - Political Party
 SCC - Small Contributor Committee

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AREA CODE/PHONE NUMBER 209.648.9441	I.D. NUMBER (if applicable) 1453768		Report No. _____		
STREET ADDRESS 222 South Thor _ Ste 6			<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Turlock	STATE CA	ZIP CODE 95380	No. of Pages _____		

2. Contribution(s) Made

DATE MADE	FULL NAME, STREET ADDRESS AND ZIP CODE OR RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)
N/A				

Reason for Amendment: _____
