

497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER GIL ESQUER		Date of This Filing 8/27/2020	Date Stamp RECEIVED AUG 28 2020 Office of the City Clerk	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER [REDACTED]	I.D. NUMBER (if applicable) 1424607	Report No. _____		
STREET ADDRESS [REDACTED]		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY TURLOCK	STATE CA	ZIP CODE 98380	No. of Pages 1	

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
8/27/2020	TURLOCK TRANSFER COMPANY OPERATING ACCOUNT [REDACTED] TURLOCK, CA 95381	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
8/07/2020	*ROSA ESQUER* [REDACTED] TURLOCK, CA 95381	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	SELF EMPLOYED TAXES PLUS - OWNER	\$1000.00 <input checked="" type="checkbox"/> Check if Loan 1.5 _____% 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: *PERONAL LOAN FOR BALLOT STATEMENT*

* 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