

**Candidate Intention Statement**

Date Stamp <b>RECEIVED</b>  JAN 21 2020  Office of the City Clerk	<b>CALIFORNIA FORM 501</b>  For Official Use Only
---	---

Check One:  Initial  Amendment (Explain) \_\_\_\_\_  
 \_\_\_\_\_

**1. Candidate Information:**

NAME OF CANDIDATE (Last, First Middle Initial)		DAYTIME TELEPHONE NUMBER	FAX NUMBER (optional)	EMAIL (optional)
GIL ESQUER		[REDACTED]	( )	[REDACTED]
STREET ADDRESS		CITY	STATE	ZIP CODE
[REDACTED]		TURLOCK	CA	95380
OFFICE SOUGHT (POSITION TITLE)	AGENCY NAME	DISTRICT NUMBER, if applicable.	<input checked="" type="checkbox"/> NON-PARTISAN OFFICE	
CITY COUNCIL	CITY OF TURLOCK	2	PARTY PREFERENCE:	
OFFICE JURISDICTION		(Check one box, if applicable.)		
<input type="checkbox"/> State (Complete Part 2.)		<input checked="" type="checkbox"/> PRIMARY / GENERAL		
<input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Multi-County: _____ (Name of Multi-County Jurisdiction)		<input type="checkbox"/> SPECIAL / RUNOFF		
		(Year of Election)		

**2. State Candidate Expenditure Limit Statement:**

*(CalPERS and CalSTRS candidates, judges, judicial candidates, and candidates for local offices do not complete Part 2.)*

*(Check one box)*

I accept the voluntary expenditure ceiling for the election stated above.

I do not accept the voluntary expenditure ceiling for the election stated above.

Amendment:

I did not exceed the expenditure ceiling in the primary or special election held on: \_\_\_\_/\_\_\_\_/\_\_\_\_ and I accept the voluntary expenditure ceiling for the general or special run-off election.

*(Mark if applicable)*

On \_\_\_\_/\_\_\_\_/\_\_\_\_, I contributed personal funds in excess of the expenditure ceiling for the election stated above.

**3. Verification:**

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on JANUARY 21, 2020  
*(month, day, year)*

Signature   
*(Candidate)*