San Diego County Registrar of Voters

City of Escondido City Clerk's Office

Cost of the Statement Mayoral Candidates: \$1300

Council Candidates: \$900 (Checks payable to: City of Escondido)

Candidate's Signature

Candidate's Signature

Candidate Statement of Qualifications 2014 AUG -6 PM 2: 56			
Jurisdiction Name: (ALL CAPS)	ESCONDIDO		
Office Title: (Upper & Lower)	ESCENDIDO COUNCILMAN DISTRICT /		
Candidate Name: (ALL CAPS)	ED GALLO		
Age: (Optional)		Gender: M or F	M
Occupation:	COUNCILMAN BUSINESS OWNER		
Election Date	November 4, 2014		
The occupation to appear on the candidate's statement is not restricted by the California Elections Code. It does not have to match the occupation on the ballot, can be more descriptive and can have more than three words.			
Use "Block Paragraphs, Single Space" format. Type within the box using a fixed pitch font such as Courier. Word count starts here:			
As your Councilman I've fought to make our neighborhoods safer, to create jobs and economic opportunities for our residents, and to improve the quality of life in Escondido. I worked to improve our Police Department to attract the best officers to our city, and been a strong			
advocate for programs that reduced graffiti and fought gangs in our community. Increasing funds for			
street repair and maintenance of our parks and public places has also made our city safer, and we can do more. Over \$20M in improvements in District 1.			
I've worked hard to attract well-paying jobs and economic opportunities to Escondido by recruiting new businesses and improving public transportation services.			
I am a Veteran moving to Escondido in 1973 and have lived in District 1 over 30 years. My three			

children attended Escondido schools and I am the proud 'grampa' of four beautiful granddaughters.

522-4851.

Please sign one of the following statements:

I would be honored to earn your vote.

difference in cost based on the final registration for my jurisdiction.

I understand I am responsible for the cost of this statement and I may be billed or refunded the

I do not wish to file a statement:

2-5-(4 Date

I do wish to file a statement. My payment is attached.

I am always personally available to hear your concerns at www.votegallo.com, 4edgallo@gmail or (760)