

**Statement of Organization
Recipient Committee**

CITY CLERK
MORENO VALLEY
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**CALIFORNIA
FORM 410**

For Official Use Only

Statement Type Initial Amendment Termination – See Part 5

Not yet qualified or List I.D. number: List I.D. number:

_____ # 1391795 # _____

____/____/____ 10 / 17 / 2016 ____/____/____

Date qualified as committee Date qualified as committee Date of Termination
(if applicable)

1. Committee Information

NAME OF COMMITTEE COMMITTEE FOR ETHICS AND ACCOUNTABILITY IN
GOVERNMENT, SUPPORTING ULISES CABRERA FOR MORENO VALLEY CITY COUNCIL
2017, MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.

STREET ADDRESS (NO P.O. BOX)

2350 KERNER BLVD., SUITE 250

CITY	STATE	ZIP CODE	AREA CODE/PHONE
SAN RAFAEL	CA	94901	[REDACTED]

MAILING ADDRESS (IF DIFFERENT)

FAX / E-MAIL ADDRESS

[REDACTED]

COUNTY OF DOMICILE	JURISDICTION WHERE COMMITTEE IS ACTIVE
MARIN	CITY OF MORENO VALLEY

2. Treasurer and Other Principal Officers

NAME OF TREASURER

JASON D. KAUNE

STREET ADDRESS (NO P.O. BOX)

2350 KERNER BLVD., SUITE 250

CITY	STATE	ZIP CODE	AREA CODE/PHONE
SAN RAFAEL	CA	94901	[REDACTED]

NAME OF ASSISTANT TREASURER, IF ANY

JAMES W. CARSON

STREET ADDRESS (NO P.O. BOX)

2350 KERNER BLVD., SUITE 250

CITY	STATE	ZIP CODE	AREA CODE/PHONE
SAN RAFAEL	CA	94901	[REDACTED]

NAME OF PRINCIPAL OFFICER(S)

LEONARDO DANIEL GONZALEZ

MAILING ADDRESS (NO P.O. BOX)

[REDACTED]

CITY	STATE	ZIP CODE	AREA CODE/PHONE
MORENO VALLEY	CA	92557	[REDACTED]

Attach additional information on appropriately labeled continuation sheets.

3. Verification

I have used all reasonable diligence in preparing this statement and to the best of my knowledge the information contained herein is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 4/18/2017 By [REDACTED] SIGNATURE OF TREASURER OR ASSISTANT TREASURER

DATE DATE

Executed on _____ By _____ SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT

DATE DATE

Executed on _____ By _____ SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT

DATE DATE

Executed on _____ By _____ SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT

DATE DATE

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COMMITTEE NAME
COMMITTEE FOR ETHICS AND ACCOUNTABILITY IN GOVERNMENT, SUPPORTING ULISES CABRERA FOR MORENO VALLEY CITY COUNCIL 2017, MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.

I.D. NUMBER
1391795

2a. Additional Officers / Assistant Treasurers

NAME

ANTONIO REZA SR.

STREET ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE
MORENO VALLEY CA 92553

NAME

MARSHALL SCOTT

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE
MORENO VALLEY CA 92557

NAME

ROBERT HARRIS

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE
MORENO VALLEY CA 92557

NAME

IDDO BENZEEVI

MAILING ADDRESS

14225 CORPORATE WAY
CITY STATE ZIP CODE AREA CODE/PHONE
MORENO VALLEY CA 92555

NAME

FLORENTINO ARREGUIN

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE
MORENO VALLEY CA 92553

NAME

GABRIEL COLANGELO

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE
MORENO VALLEY CA 92553

NAME

KEOKI KEKAULA

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE
MORENO VALLEY CA 92553

NAME

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

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COMMITTEE NAME
COMMITTEE FOR ETHICS AND ACCOUNTABILITY IN GOVERNMENT, SUPPORTING ULISES CABRERA FOR MORENO VALLEY CITY COUNCIL 2017, MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.

I.D. NUMBER
1391795

- All committees must list the financial institution where the campaign bank account is located.

NAME OF FINANCIAL INSTITUTION BANK OF MARIN	AREA CODE/PHONE (415) 927-8902	BANK ACCOUNT NUMBER [REDACTED]
ADDRESS 504 TAMALPAIS DRIVE	CITY CORTE MADERA	STATE CA
		ZIP CODE 94925

4. Type of Committee Complete the applicable sections.

Controlled Committee

- List the name of each controlling officeholder, candidate, or state measure proponent. If candidate or officeholder controlled, also list the elective office sought or held, and district number, if any, and the year of the election.
- List the political party with which each officeholder or candidate is affiliated or check "nonpartisan."
- If this committee acts jointly with another controlled committee, list the name and identification number of the other controlled committee.

NAME OF CANDIDATE/OFFICEHOLDER/STATE MEASURE PROPONENT	ELECTIVE OFFICE SOUGHT OR HELD (INCLUDE DISTRICT NUMBER IF APPLICABLE)	YEAR OF ELECTION	PARTY
			<input type="checkbox"/> Nonpartisan
			<input type="checkbox"/> Nonpartisan

Primarily Formed Committee Primarily formed to support or oppose specific candidates or measures in a single election. List below:

CANDIDATE(S) NAME OR MEASURE(S) FULL TITLE (INCLUDE BALLOT NO. OR LETTER)	CANDIDATE(S) OFFICE SOUGHT OR HELD OR MEASURE(S) JURISDICTION (INCLUDE DISTRICT NO., CITY OR COUNTY, AS APPLICABLE)	CHECK ONE	
ULISES CABRERA	City Council Member: CITY OF MORENO VALLEY District 4	SUPPORT X	OPPOSE
		SUPPORT	OPPOSE

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COMMITTEE NAME
 COMMITTEE FOR ETHICS AND ACCOUNTABILITY IN GOVERNMENT, SUPPORTING ULISES CABRERA FOR MORENO VALLEY CITY COUNCIL 2017, MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.

4. Type of Committee (Continued)

General Purpose Committee Not formed to support or oppose specific candidates or measures in a single election. Check only one box:
 CITY Committee COUNTY Committee STATE Committee

PROVIDE BRIEF DESCRIPTION OF ACTIVITY

Sponsored Committee List additional sponsors on an attachment.

NAME OF SPONSOR		INDUSTRY GROUP OR AFFILIATION OF SPONSOR		
HIGHLAND FAIRVIEW OPERATING CO.		LOGISTICS FACILITY BUILDER/DEVELOPER		
STREET ADDRESS	NO. AND STREET	CITY	STATE	ZIP CODE
14225 CORPORATE WAY		MORENO VALLEY	CA	92553

Small Contributor Committee _____
 Date qualified

5. Termination Requirements By signing the verification, the treasurer, assistant treasurer and/or candidate, officeholder, or proponent certify that all of the following conditions have been met:

- This committee has ceased to receive contributions and make expenditures;
 - This committee does not anticipate receiving contributions or making expenditures in the future;
 - This committee has eliminated or has no intention or ability to discharge all debts, loans received, and other obligations;
 - This committee has no surplus funds; and
 - This committee has filed all campaign statements required by the Political Reform Act disclosing all reportable transactions.
- There are restrictions on the disposition of surplus campaign funds held by elected officers who are leaving office and by defeated candidates. Refer to Government Code Section 89519.
- Leftover funds of ballot measure committees may be used for political, legislative or governmental purposes under Government Code Sections 89511 - 89518, and are subject to Elections Code Section 18680 and FPPC Regulation 18521.5.