

**Statement of Organization
Recipient Committee**

Statement Type Initial Amendment Termination – See Part 5
 Not yet qualified or Date qualified as committee 2 / 10 / 2018 _____ / _____ / _____
 _____ / _____ / _____ Date qualified as committee Date of termination

CITY CLERK
 MORENO VALLEY RECEIVED
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CALIFORNIA FORM 410
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1. Committee Information I.D. Number (if applicable) 1402060 **2. Treasurer and Other Principal Officers**

NAME OF COMMITTEE CALIFORNIANS FOR HONESTY AND INTEGRITY IN ELECTIONS, OPPOSING THE RECALL OF BACA FOR MORENO VALLEY CITY COUNCIL DISTRICT 1 IN 2018 AND SUPPORTING THE RECALL OF MARQUEZ FOR MORENO VALLEY CITY COUNCIL DISTRICT 3 IN 2018, COMMITTEE MAJOR FUNDING FROM HIGHLAND FAIRVIEW OPERATING CO.
 STREET ADDRESS (NO P.O. BOX) _____
 CITY STATE ZIP CODE AREA CODE/PHONE
 SAN RAFAEL CA 94901 _____
 MAILING ADDRESS (IF DIFFERENT) _____
 E-MAIL ADDRESS (REQUIRED) / FAX (OPTIONAL) _____
 COUNTY OF DOMICILE JURISDICTION WHERE COMMITTEE IS ACTIVE
 MARIN CITY OF MORENO VALLEY

NAME OF TREASURER JAMES W. CARSON
 STREET ADDRESS (NO P.O. BOX) _____
 CITY STATE ZIP CODE AREA CODE/PHONE
 SAN RAFAEL CA 94901 _____
 NAME OF ASSISTANT TREASURER, IF ANY JAMES BAROLO
 STREET ADDRESS (NO P.O. BOX) _____
 CITY STATE ZIP CODE AREA CODE/PHONE
 SAN RAFAEL CA 94901 _____
 NAME OF PRINCIPAL OFFICER(S) RAFAEL BRUGUERAS
 STREET ADDRESS (NO P.O. BOX) _____
 CITY STATE ZIP CODE AREA CODE/PHONE
 MORENO VALLEY CA 92553 _____

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 2/22/18 By _____ SIGNATURE OF TREASURER OR ASSISTANT TREASURER
 Executed on _____ By _____ SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT
 Executed on _____ By _____ SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT
 Executed on _____ By _____ SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT

Statement of Organization
Recipient Committee

INSTRUCTIONS ON REVERSE

COMMITTEE NAME CALIFORNIANS FOR HONESTY AND INTEGRITY IN ELECTIONS, OPPOSING THE RECALL OF BACA FOR MORENO VALLEY CITY COUNCIL DISTRICT 1 IN 2018 AND SUPPORTING THE RECALL OF MARQUEZ FOR MORENO VALLEY CITY COUNCIL DISTRICT 3 IN 2018, COMMITTEE MAJOR FUNDING FROM HIGHLAND FAIRVIEW OPERATING CO.

I.D. NUMBER
1402060

2a. Additional Officers / Assistant Treasurers

NAME
ANTONIO REZA SR.

MAILING ADDRESS
[REDACTED]

CITY	STATE	ZIP CODE	AREA CODE/PHONE
MORENO VALLEY	CA	92553	[REDACTED]

NAME
MARSHALL SCOTT

MAILING ADDRESS
[REDACTED]

CITY	STATE	ZIP CODE	AREA CODE/PHONE
RIVERSIDE	CA	92518	[REDACTED]

NAME
LEONARDO DANIEL GONZALEZ

MAILING ADDRESS
[REDACTED]

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

NAME
IDDO BENZEEVI

MAILING ADDRESS
[REDACTED]

CITY	STATE	ZIP CODE	AREA CODE/PHONE
MORENO VALLEY	CA	92555	[REDACTED]

NAME
ROBERT HARRIS

MAILING ADDRESS
[REDACTED]

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

NAME
GABRIEL COLANGELO

MAILING ADDRESS
[REDACTED]

CITY	STATE	ZIP CODE	AREA CODE/PHONE
MORENO VALLEY	CA	92553	[REDACTED]

NAME
KEOKI KEKAULA

MAILING ADDRESS
[REDACTED]

CITY	STATE	ZIP CODE	AREA CODE/PHONE
MORENO VALLEY	CA	92553	[REDACTED]

NAME

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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Page 3 of 4

COMMITTEE NAME CALIFORNIANS FOR HONESTY AND INTEGRITY IN ELECTIONS, OPPOSING THE RECALL OF BACA FOR MORENO VALLEY CITY COUNCIL DISTRICT 1 IN 2018 AND SUPPORTING THE RECALL OF MARQUEZ FOR MORENO VALLEY CITY COUNCIL DISTRICT 3 IN 2018, COMMITTEE MAJOR FUNDING FROM HIGHLAND FAIRVIEW OPERATING CO.

I.D. NUMBER
1402060

- 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)927-2265	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." Stating "No party preference" is acceptable.
- 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	CHECK ONE		PARTY (list political party below)
			Nonpartisan	Partisan	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	

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) IF A RECALL, STATE "RECALL" IN FRONT OF THE OFFICEHOLDER'S NAME.	CANDIDATE(S) OFFICE SOUGHT OR HELD OR MEASURE(S) JURISDICTION (INCLUDE DISTRICT NO., CITY OR COUNTY, AS APPLICABLE)	CHECK ONE	
		SUPPORT	OPPOSE
RECALL OF VICTORIA BACA	CITY COUNCIL MEMBER: CITY OF MORENO VALLEY DISTRICT 1	<input type="checkbox"/>	<input checked="" type="checkbox"/>
RECALL OF DAVID MARQUEZ	CITY COUNCIL MEMBER: CITY OF MORENO VALLEY DISTRICT 3	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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I.D. NUMBER 1402060

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 Political Party/Central 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	AREA CODE/PHONE	
14225 CORPORATE WAY		MORENO VALLEY	CA	92553	(951)867-5300	

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.