

497 Contribution Report

Amounts may be rounded to whole dollars.

CITY CLERK
 MORENO VALLEY
 RECEIVED
 DATE Stamp
 17 APR 20 17 PM 1:15
 pm

CALIFORNIA FORM 497
 For Official Use Only

NAME OF FILER
 Ulises Cabrera

AREA CODE/PHONE NUMBER
 [REDACTED]

I.D. NUMBER (if applicable)
 1394805

STREET ADDRESS
 16115 Rancho Del Lago

CITY STATE ZIP CODE
 Moreno Valley CA 92551

Date of This Filing 04/20/2017

Report No. _____

Amendment to Report No. _____
 (explain below)

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
04/19/2017	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	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Non-Monetary	25,000 <input type="checkbox"/> Check if Loan _____% 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
		<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

****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

Reason for Amendment: _____