

**Statement of Organization
Recipient Committee**

CITY CLERK
MORENO VALLEY
RECEIVED
18 OCT 19 AM 11:36

Date Stamp	CALIFORNIA FORM 410 For Official Use Only
RECEIVED AND FILED in the office of the Secretary of State of the State of California OCT 18 2016 Hand Delivered, Sacramento	

Statement Type Initial Amendment
Not yet qualified or

Termination - See Part 5
List I.D. number.

10 / 17 / 2016
Date qualified as committee

Date qualified as committee
(If applicable)

Date of Termination

1. Committee Information

NAME OF COMMITTEE
COMMITTEE FOR ETHICS AND ACCOUNTABILITY IN GOVERNMENT, MAJOR FUNDING BY
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)

FAX / E-MAIL ADDRESS

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

Attach additional information on appropriately labeled continuation sheets.

2. Treasurer and Other Principal Officers

NAME OF TREASURER

JASON D. KAUNE
STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
SAN RAFAEL	CA	94901	_____

NAME OF ASSISTANT TREASURER, IF ANY

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
SAN RAFAEL	CA	94901	_____

NAME OF PRINCIPAL OFFICER(S)

MAILING ADDRESS 92553

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

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 10/17/16 By [Signature]
DATE SIGNATURE OF TREASURER OR ASSISTANT TREASURER

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

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

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

Oct-18-16 11:05am From-NMPC MARIN 415388874 T-077 P 001/004 F-738

**Statement of Organization
Recipient Committee**

CALIFORNIA FORM	410
Page 2 of 4	
ID. NUMBER	

INSTRUCTIONS ON REVERSE

COMMITTEE NAME

COMMITTEE FOR ETHICS AND ACCOUNTABILITY IN GOVERNMENT, MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.

2a. Additional Officers / Assistant Treasurers

NAME

ANTONIO REZA SR.
STREET ADDRESS (NO P O BOX)

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

NAME

MARSHALL SCOTT
MAILING ADDRESS

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

NAME

ROBERT HARRIS
MAILING ADDRESS

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

NAME

IDDQ BENZEVJ
MAILING ADDRESS

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

NAME

FLORENTINO ARREGUIN
MAILING ADDRESS

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

NAME

GABRIEL COLANGELO
MAILING ADDRESS

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

NAME

KEORI KEKAULA
MAILING ADDRESS

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

NAME

MAILING ADDRESS

	STATE	ZIP CODE	AREA CODE/PHONE
CITY			

Oct-18-18 11:05am From-NMPC MARIN 415888874 T-077 P 002/004 F-738

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COMMITTEE NAME

COMMITTEE FOR ETHICS AND ACCOUNTABILITY IN GOVERNMENT, MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.

I.D. NUMBER

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

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

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**Statement of Organization
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CALIFORNIA FORM **410**

INSTRUCTIONS ON REVERSE

Page 4 of 4

COMMITTEE NAME
COMMITTEE FOR ETHICS AND ACCOUNTABILITY IN GOVERNMENT, MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.

ID NUMBER

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

TO SUPPORT AND/OR OPPOSE CANDIDATES AND/OR MEASURES

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.

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