

496 Independent Expenditure Report

Type or print in ink.
Amounts may be rounded to whole dollars.

CITY CLERK
MORENO VALLEY
RECEIVED 496 INDEPENDENT EXPENDITURE REPORT

NAME OF FILER COMMITTEE AGAINST POLITICAL CORRUPTION & SPECIAL INTERESTS, OPPOSING GWENDOLYN CROSS FOR CITY COUNCIL DISTRICT 4 IN 2014, MAJOR FUNDING BY		Date of This Filing 10/23/2014	Date Stamp OCT 23 PM 4:11	CALIFORNIA FORM 496 For Official Use Only
AREA CODE/PHONE NUMBER (415) 389-6800	I.D. NUMBER (if applicable) 1372571	Report No. LIBRN 619	<input type="checkbox"/> Amendment to Report No. _____ (explain below)	
STREET ADDRESS 2350 KERNER BLVD, SUITE 250	CITY SAN RAFAEL	STATE CA	ZIP CODE 94901	

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED GWENDOLYN CROSS				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD City Council Member: CITY OF MORENO VALLEY	DISTRICT NO.	SUPPORT	OPPOSE X	BALLOT NO /LETTER	JURISDICTION	SUPPORT	OPPOSE

2. Independent Expenditures Made Attach additional information on appropriately labeled continuation sheets.

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/22/2014	MAILER Cumulative to date total \$3430.88	1,164.00
10/22/2014	MAILER Cumulative to date total \$3430.88	577.70
10/22/2014	MAILER Cumulative to date total \$3430.88	1,689.18
TO: <u>City of Moreno Valley</u> FAX: <u>(951) 413-3009</u>		

Reason for Amendment:

B279.07
KAC
10/23

Oct-23-14 03:10pm From-NMPAN MARIN 1 4153886674 T-805 P 001/002 F-458

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NAME OF FILER
 COMMITTEE AGAINST POLITICAL CORRUPTION & SPECIAL INTERESTS, OPPOSING GWENDOLYN CROSS FOR CITY COUNCIL DISTRICT 4 IN 2014.
 MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.

3. Contributions of \$100 or More Received*

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE **	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED	INTEREST RATES
10/15/2014	HIGHLAND FAIRVIEW OPERATING CO. 14225 CORPORATE WAY Moreno Valley, CA 92553	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		10,000.00	If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%

*Major donor and independent expenditure committees that do not receive contributions are not required to complete Part 3.

****Contributor Codes**
 IND - Individual
 COM - Recipient Committee (other than PTY or SCC)
 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

FPPC Form 496 (March/2011)
 FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Oct-23-14 03:10pm Form-NMPPM MARIN 1 4153886874 T-505 P 002/002 F-458