

**Recipient Committee  
Campaign Statement  
Cover Page**

(Government Code Sections 84200-84216.5)

CITY CLERK  
MORENO VALLEY  
RECEIVED  
Date Stamp  
20 OCT 22 PM 5:00

COVER PAGE

CALIFORNIA FORM **460**

Page 1 of 9

For Official Use Only

**Statement covers period**  
from 07/01/2020  
through 10/17/2020

**Date of election if applicable:**  
(Month, Day, Year)  
11/03/2020

SEE INSTRUCTIONS ON REVERSE

**1. Type of Recipient Committee:** All Committees – Complete Parts 1, 2, 3, and 4.

- Officeholder, Candidate Controlled Committee
- State Candidate Election Committee
- Recall  
*(Also Complete Part 5)*
- General Purpose Committee
- Sponsored
- Small Contributor Committee
- Political Party/Central Committee
- Primarily Formed Ballot Measure Committee
- Controlled
- Sponsored  
*(Also Complete Part 6)*
- Primarily Formed Candidate/Officeholder Committee  
*(Also Complete Part 7)*

**2. Type of Statement:**

- Preelection Statement
- Semi-annual Statement
- Termination Statement  
*(Also file a Form 410 Termination)*
- Amendment (Explain below)
- Quarterly Statement
- Special Odd-Year Report
- Supplemental Preelection Statement - Attach Form 495

**3. Committee Information**

I.D. NUMBER  
1413430

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  
CALIFORNIA COALITION FOR JOBS, PROSPERITY, AND ENVIRONMENTAL JUSTICE... (SEE ATTACHED FOR FULL NAME)

STREET ADDRESS (NO P.O. BOX)

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

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

MSA  
CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

**Treasurer(s)**

NAME OF TREASURER  
JAMES W. CARSON

MAILING ADDRESS

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

NAME OF ASSISTANT TREASURER, IF ANY

JASON D. KAUNE

MAILING ADDRESS

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

OPTIONAL: FAX / E-MAIL ADDRESS

**4. Verification**

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

Executed on 10/21/2020  
Date

By \_\_\_\_\_ Assistant Treasurer

Executed on \_\_\_\_\_  
Date

By \_\_\_\_\_ Measure Proponent or Responsible Officer of Sponsor

Executed on \_\_\_\_\_  
Date

By \_\_\_\_\_ Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on \_\_\_\_\_  
Date

By \_\_\_\_\_ Signature of Controlling Officeholder, Candidate, State Measure Proponent

FPPC Form 460 (Jan/2016)

FPPC Advice: [advice@fppc.ca.gov](mailto:advice@fppc.ca.gov) (866/275-3772)

[www.fppc.ca.gov](http://www.fppc.ca.gov)

**Recipient Committee  
Campaign Statement  
Cover Page — Part 2**

<b>CALIFORNIA FORM</b>	<b>460</b>
Page <u>2</u> of <u>9</u>	

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE \_\_\_\_\_

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE) \_\_\_\_\_

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)    CITY                      STATE                      ZIP \_\_\_\_\_

**Related Committees Not Included in this Statement:** *List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.*

COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
CITY	STATE    ZIP CODE    AREA CODE/PHONE

COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
CITY	STATE    ZIP CODE    AREA CODE/PHONE

**6. Primarily Formed Ballot Measure Committee**

NAME OF BALLOT MEASURE \_\_\_\_\_

BALLOT NO. OR LETTER	JURISDICTION	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
----------------------	--------------	---

**Identify the controlling officeholder, candidate, or state measure proponent, if any.**

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT \_\_\_\_\_

OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY
-----------------------	---------------------

**7. Primarily Formed Candidate/Officeholder Committee** *List names of officeholder(s) or candidate(s) for which this committee is primarily formed.*

NAME OF OFFICEHOLDER OR CANDIDATE YXSTIAN GUTIERREZ	OFFICE SOUGHT OR HELD Mayor City of Moreno Valley	<input checked="" type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE VICTORIA BACA	OFFICE SOUGHT OR HELD City Council Member City of Moreno	<input checked="" type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE RAFAEL BRUGUERAS	OFFICE SOUGHT OR HELD City Council Member CITY OF MORENO	<input checked="" type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

*Attach continuation sheets if necessary*

**Campaign Disclosure Statement  
Summary Page**

Amounts may be rounded  
to whole dollars.

SUMMARY PAGE

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	07/01/2020	
through		10/17/2020
Page		3 of 9
I.D. NUMBER		1413430

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

CALIFORNIA COALITION FOR JOBS, PROSPERITY, AND ENVIRONMENTAL JUSTICE... (SEE ATTACHED FOR FULL NAME)

**Contributions Received**

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions ..... Schedule A, Line 3	\$ 0.00	\$ 0.00
2. Loans Received ..... Schedule B, Line 3	0.00	0.00
3. SUBTOTAL CASH CONTRIBUTIONS ..... Add Lines 1 + 2	\$ 0.00	\$ 0.00
4. Nonmonetary Contributions ..... Schedule C, Line 3	0.00	0.00
5. TOTAL CONTRIBUTIONS RECEIVED ..... Add Lines 3 + 4	\$ 0.00	\$ 0.00

**Calendar Year Summary for Candidates  
Running in Both the State Primary and  
General Elections**

	7/1 through 6/30	7/1 to Date
20. Contributions Received	\$ _____	\$ _____
21. Expenditures Made	\$ _____	\$ _____

**Expenditures Made**

	Column A	Column B
6. Payments Made ..... Schedule E, Line 4	\$ 48,314.27	\$ 53,876.15
7. Loans Made ..... Schedule H, Line 3	0.00	0.00
8. SUBTOTAL CASH PAYMENTS ..... Add Lines 6 + 7	\$ 48,314.27	\$ 53,876.15
9. Accrued Expenses (Unpaid Bills) ..... Schedule F, Line 3	19,198.50	20,868.50
10. Nonmonetary Adjustment ..... Schedule C, Line 3	0.00	0.00
11. TOTAL EXPENDITURES MADE ..... Add Lines 8 + 9 + 10	\$ 67,512.77	\$ 74,744.65

**Expenditure Limit Summary for State  
Candidates**

**22. Cumulative Expenditures Made\***  
(If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy)	Total to Date
____/____/____	\$ _____
____/____/____	\$ _____

**Current Cash Statement**

12. Beginning Cash Balance ..... Previous Summary Page, Line 16	\$ 113,930.97
13. Cash Receipts ..... Column A, Line 3 above	0.00
14. Miscellaneous Increases to Cash ..... Schedule I, Line 4	0.00
15. Cash Payments ..... Column A, Line 8 above	48,314.27
16. ENDING CASH BALANCE ..... Add Lines 12 + 13 + 14, then subtract Line 15	\$ 65,616.70

If this is a termination statement, Line 16 must be zero.

17. LOAN GUARANTEES RECEIVED ..... Schedule B, Part 2	\$ 0.00
---	---------

**Cash Equivalents and Outstanding Debts**

18. Cash Equivalents ..... See instructions on reverse	\$ 0.00
19. Outstanding Debts ..... Add Line 2 + Line 9 in Column B above	\$ 20,868.50

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

\*Amounts in this section may be different from amounts reported in Column B.

**Schedule D  
Summary of Expenditures  
Supporting/Opposing Other  
Candidates, Measures and Committees**

Amounts may be rounded  
to whole dollars.

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	07/01/2020	
through	10/17/2020	Page <u>4</u> of <u>9</u>
NAME OF FILER		I.D. NUMBER
CALIFORNIA COALITION FOR JOBS, PROSPERITY, AND ENVIRONMENTAL JUSTICE... (SEE ATTACHED FOR FULL NAME)		1413430

SEE INSTRUCTIONS ON REVERSE

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/25/2020	VICTORIA BACA City Council Member CITY OF MORENO VALLEY District 01	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		15,000.00	15,000.00	G2020 \$15,000.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
09/29/2020	RAFAEL BRUGUERAS City Council Member CITY OF MORENO VALLEY District 03	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		15,000.00	15,000.00	G2020 \$15,000.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/05/2020	YKSTIAN GUTIERREZ Mayor CITY OF MORENO VALLEY	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		15,000.00	15,000.00	G2020 \$15,000.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
<b>SUBTOTAL \$</b>				45,000.00		

**Schedule D Summary**

- Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.) ..... \$ 45,000.00
- Unitemized contributions and independent expenditures made this period of under \$100 ..... \$ 0.00
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) ..... **TOTAL \$** 45,000.00

**Schedule E  
Payments Made**

Amounts may be rounded  
to whole dollars.

Statement covers period		CALIFORNIA FORM <b>460</b>	
from	07/01/2020	Page	5 of 9
through	10/17/2020	I.D. NUMBER	1413430

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

CALIFORNIA COALITION FOR JOBS, PROSPERITY, AND ENVIRONMENTAL JUSTICE... (SEE ATTACHED FOR FULL NAME)

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP 2350 KERNER BOULEVARD SUITE 250 San Rafael, CA 94901	PRO			1,199.00
NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP 2350 KERNER BOULEVARD SUITE 250 San Rafael, CA 94901	PRO			471.00
VICTORIA BACA, 2020, MORENO VALLEY CITY COUNCIL, DISTRICT 1 (ID# 1424732) [REDACTED] Moreno Valley, CA 92553	CTB			15,000.00

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL \$** 16,670.00

**Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.) .....	\$	48,314.27
2. Unitemized payments made this period of under \$100 .....	\$	0.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) .....	\$	0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) .....	<b>TOTAL \$</b>	<b>48,314.27</b>

**Schedule E  
(Continuation Sheet)  
Payments Made**

SCHEDULE E (CONT.)

Amounts may be rounded  
to whole dollars.

Statement covers period from <u>07/01/2020</u> through <u>10/17/2020</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>6</u> of <u>9</u>
	I.D. NUMBER 1413430

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

CALIFORNIA COALITION FOR JOBS, PROSPERITY, AND ENVIRONMENTAL JUSTICE... (SEE ATTACHED FOR FULL NAME)

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
RAFAEL BRUGUERAS 2020 MORENO VALLEY CITY COUNCIL, DISTRICT 3 (ID# 1427565) Moreno Valley, CA 92555	CTB		15,000.00
DR. GUTIERREZ FOR MAYOR 2020 (ID# 1399434) MORENO VALLEY, CA 92557	CTB		15,000.00
NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP 2350 KERNER BOULEVARD SUITE 250 San Rafael, CA 94901	PRO		851.17
NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP 2350 KERNER BOULEVARD SUITE 250 San Rafael, CA 94901	PRO		793.10

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL \$** 31,644.27

**Schedule F  
Accrued Expenses (Unpaid Bills)**

Amounts may be rounded  
to whole dollars.

Statement covers period from <u>07/01/2020</u> through <u>10/17/2020</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>7</u> of <u>9</u>
I.D. NUMBER 1413430	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

CALIFORNIA COALITION FOR JOBS, PROSPERITY, AND ENVIRONMENTAL JUSTICE... (SEE ATTACHED FOR FULL NAME)

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	
NIelsen MERKSAMER PARRINELLO GROSS & LEONI LLP 2350 KERNER BOULEVARD SUITE 250 San Rafael, CA 94901	PRO	471.00	0.00	471.00	0.00	
NIelsen MERKSAMER PARRINELLO GROSS & LEONI LLP 2350 KERNER BOULEVARD SUITE 250 San Rafael, CA 94901	PRO	1,199.00	0.00	1,199.00	0.00	
NIelsen MERKSAMER PARRINELLO GROSS & LEONI LLP 2350 KERNER BOULEVARD SUITE 250 San Rafael, CA 94901	PRO	0.00	3,868.50	0.00	3,868.50	
<b>* Payments that are contributions or independent expenditures must also be summarized on Schedule D.</b>		<b>SUBTOTALS \$</b>	<b>1,670.00\$</b>	<b>3,868.50\$</b>	<b>1,670.00\$</b>	<b>3,868.50</b>

**Schedule F Summary**

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.) ..... **INCURRED TOTALS \$** 20,868.50
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) ..... **PAID TOTALS \$** 1,670.00
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) ..... **NET \$** 19,198.50  
May be a negative number

**Schedule F  
(Continuation Sheet)  
Accrued Expenses (Unpaid Bills)**

Amounts may be rounded  
to whole dollars.

SCHEDULE F (CONT.)

Statement covers period from <u>07/01/2020</u> through <u>10/17/2020</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>8</u> of <u>9</u>
NAME OF FILER CALIFORNIA COALITION FOR JOBS, PROSPERITY, AND ENVIRONMENTAL JUSTICE... (SEE ATTACHED FOR FULL NAME)	I.D. NUMBER 1413430

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- |   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services  | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense   | PRO professional services (legal, accounting) | VOT voter registration  |
| LIT campaign literature and mailings                              | PRT print ads                                 | WEB information technology costs (internet, e-mail)           |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
CANDID RESEARCH SOLUTIONS 3601 HALBRITE AVE. Long Beach, CA 90808	POL	0.00	17,000.00	0.00	17,000.00
<b>SUBTOTALS \$</b>		0.00 \$	17,000.00 \$	0.00 \$	17,000.00



**Additional Comments  
For Form 460**

**ADDITIONAL COMMENTS  
CALIFORNIA FORM 460**

Page 9 of 9

NAME OF FILER

I.D. NUMBER

1413430

CALIFORNIA COALITION FOR JOBS, PROSPERITY, AND ENVIRONMENTAL JUSTICE... (SEE ATTACHED FOR FULL NAME)

FULL COMMITTEE NAME: CALIFORNIA COALITION FOR JOBS, PROSPERITY, AND ENVIRONMENTAL JUSTICE; SUPPORTING GUTIERREZ FOR MORENO VALLEY MAYOR, BACA FOR CITY COUNCIL DISTRICT 1, AND BRUGUERAS FOR CITY COUNCIL DISTRICT 3 IN 2020; COMMITTEE MAJOR FUNDING FROM HIGHLAND FAIRVIEW OPERATING CO.