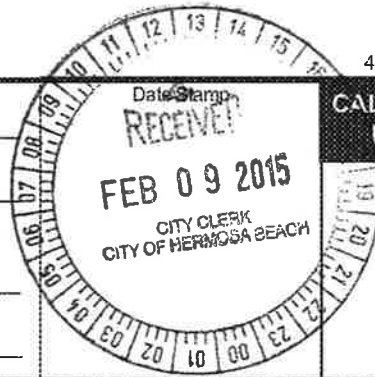


# 497 Contribution Report

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



497 CONTRIBUTION REPORT

**NAME OF FILER**  
HERMOSA BEACH RESIDENTS FOR A BETTER TOMORROW, YES ON MEASURE O,  
SPONSORED AND MAJOR FUNDING BY E&B NATURAL RESOURCES MANAGEMENT

**AREA CODE/PHONE NUMBER** (213) 624-6200 **I.D. NUMBER (if applicable)** 1373869

**STREET ADDRESS**  
205 PIER AVENUE, SUITE 102

**CITY** HERMOSA BEACH **STATE** CA **ZIP CODE** 90254

**Date of This Filing** 02/09/2015

**Report No.** 02092015

**Amendment to Report No.** \_\_\_\_\_  
(explain below)

**No. of Pages** 1

**CALIFORNIA FORM 497**

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## 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
02/06/2015	E&B NATURAL RESOURCES MANAGEMENT CORPORATION 205 PIER AVENUE, SUITE 102 HERMOSA BEACH, CA 90254	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		110,000.00  <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: \_\_\_\_\_

FROM: 02/09/2015 11:23 #366 P.001/001