

Late Contribution Report

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

LATE CONTRIBUTION REPORT

NAME OF FILER Committee for a Safe and Prosperous Oxnard supporting MacDonald/Huber		Date of This Filing 10/16/14	Date Stamp 2014 OCT 16 P 4: 27	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER 805-469-2041	I.D. NUMBER (if applicable) 1371111	Report No. R6		
STREET ADDRESS 3271 W. Fifth St.		<input type="checkbox"/> Amendment to Report No. (explain below)		
CITY Oxnard	STATE CA	ZIP CODE 93030	No. of Pages 2	

Late 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
10/16/2014	Royal Wine Corporation Winery 3201 Camino Del Sol Oxnard CA 93030 805-983-1560	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2,000.00 <input type="checkbox"/> Check if Loan
		<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
		<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

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

Reason for Amendment: _____