### 1. Contribution(s) Received

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CONTRIBUTOR CODE *</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>AMOUNT RECEIVED</th>
</tr>
</thead>
<tbody>
<tr>
<td>10/25/2014</td>
<td>ROYAL WINE CORPORATION 3201 CAMINO DEL SOL, OXNARD, CA 93030</td>
<td>□ IND □ COM □ OTH □ PTY □ SCC</td>
<td>☐ Check if Loan □ Check if Loan □ Check if Loan</td>
<td>$1,000.00</td>
</tr>
</tbody>
</table>

**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

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Reason for Amendment: ____________________________