## 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>09-08-18</td>
<td>Monterey Bay Action Committee PO Box Carmel, CA 93922 FPPC #1373353</td>
<td>□ IND □ COM □ OTH □ PTY □ SCC</td>
<td>□ Check if Loan □ Provide interest rate</td>
<td>$1,000</td>
</tr>
</tbody>
</table>

Reason for Amendment: ____________________________

**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

FPPC Form 497 (Jul/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov
### 2. Contribution(s) Made

<table>
<thead>
<tr>
<th>DATE MADE</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION</th>
<th>AMOUNT OF CONTRIBUTION</th>
<th>DATE OF ELECTION (IF APPLICABLE)</th>
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Reason for Amendment: 

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