### 1. Contribution(s) Received

<table>
<thead>
<tr>
<th>Date Received</th>
<th>Full Name, Street Address and Zip Code of Contributor</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>10/01/2018</td>
<td>Don Nichols</td>
<td>☑ IND</td>
<td>Fund Manager, The Nikols Co</td>
<td>1,100.00</td>
</tr>
<tr>
<td></td>
<td>Newport Beach, CA 92663</td>
<td></td>
<td></td>
<td></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

Reason for Amendment: ________________________________

**FPPC Form 497 (Jan/2016)**
FPPC Advice: advice@fppc.ca.gov (866/275-3772)