### 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>10/12/2018</td>
<td>Bernadette Sv, San Francisco, CA 94127 United States</td>
<td>✗ IND</td>
<td>Executive Director, Filipino American Development Foundation</td>
<td>$500.00</td>
</tr>
<tr>
<td>10/25/2018</td>
<td>Bernadette Sv, San Francisco, CA 94127 United States</td>
<td>✗ IND</td>
<td>Executive Director, Filipino American Development Foundation</td>
<td>$1000.00</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

Reason for Amendment: ________________________________

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FPPC Form 497 (Jul/2016)
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