SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
	FOR LINE NUMBER **23**

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NAME OF COMMITTEE (in full)

THE ROBERT MONDAVI CORPORATION CIVIC ACTION COMMITTEE

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement for this Period
A. Full Name, Mailing Address and ZIP Code **Friends of Lois Capps** #C00331389 **PO Box 23940** **Santa Barbara, CA 93121**	**Contribution** Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	8/1/00	1,000.00
B. Full Name, Mailing Address and ZIP Code **Dooley for Congress** **PO Box 1367** **Visalia, CA 93279**	**Contribution** Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	8/10/00	1,000.00
C. Full Name, Mailing Address and ZIP Code **Bill Thomas Campaign Committee** **PO Box 395** **Bakersfield, CA 93302**	**Contribution** Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	9/14/00	1,000.00
D. Full Name, Mailing Address and ZIP Code **American Vintners Association (AVA)** **1200 G Street NW #360** **Washington, DC 20005**	**Contribution** Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	9/20/00	3,000.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement: Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement for this Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement: Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement for this Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement: Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement for this Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement: Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement for this Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement: Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement for this Period

SUBTOTAL of Disbursements This Page (optional) ➤	6,000.00
TOTAL This Period (last page this line number only) ➤	6,000.00