SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

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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 RADANOVICH FOR CONGRESS 2037 W. BULLARD AVE. FRESNO, CA 93711 C00266270	CONTRIBUTION Disbursement for: ☒ Primary ☐ General ☐ Other (specify) 2000	5/12/99	1,000
B. Full Name, Mailing Address and ZIP Code RANGEL 2000 2354 RAYBURN HOUSE OFFICE BLDG. WASHINGTON, DC 20515-3215 C00302422	CONTRIBUTION Disbursement for: ☒ Primary ☐ General ☐ Other (specify) 2,000	6/8/99	1,000
C. Full Name, Mailing Address and ZIP Code CONGRESSMAN RICHARD E. NEAL 2236 RAYBURN HOUSE OFFICE BLDG. WASHINGTON, DC 20515-2101 C00127558	CONTRIBUTION Disbursement for: ☒ Primary ☐ General ☐ Other (specify) 2,000	6/21/99	500
D. Full Name, Mailing Address and ZIP Code MIKE THOMPSON FOR CONGRESS 1040 MAIN STREET, STE. 101 NAPA, CA 94559 C00326363	CONTRIBUTION Disbursement for: ☒ Primary ☒ General ☐ Other (specify) 2000 elections	6/30/99	1,000 1,000
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) ➤	4,500
TOTAL This Period (last page this line number only) ➤	4,500