## **497 Contribution Report**

## Type or print in ink. Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

						107 0011	TRIBUTION REPORT
NAME OF FILER			Date of This Filing	08/13/20	Date Stamp	CALIFO	
JUSTIN SHORES FOR GOLETA CITY COUNCIL 2020  AREA CODE/PHONE NUMBER   I.D. NUMBER (if applicable)		11115 FIIING		CITY OF GOLETA	FOR		
		Report No	1	CALIFORNIA	For C	Official Use Only	
805-704-774 STREET ADDRESS			-		AUC 4.7 0000		
			⊠ Amendment		AUG 17 2020		
7386 CALLE REAL #14  CITY STATE ZIP CODE			to Report No. (explain below)			1777#	
CITY			No. of Pages .	1	RECEIVED	roll	
GOLETA	CA	93117	1				
1. Contribution(s) Received							
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)		AMOUNT RECEIVED
08/10/20	KIM JOHNSON 945 WARD DR SPC 137 SANTA BARBARA CA 93111			IND     COM     OTH     PTY     SCC	BUSINESS MANAGER- TOYOTA OF SANTA BAR	RBARA	2600.  Check if Loan  **  Provide interest rate
				☐ IND☐ COM☐ OTH☐ PTY☐ SCC			☐ Check if Loan
				☐ IND☐ COM☐ OTH☐ PTY☐ SCC			☐ Check if Loan
**Contributor Codes  IND - Individual  COM - Recipient Committee (other  OTH - Other (e.g., business entity)  PTY - Political Party  SCC - Small Contributor Codes  IND - Individual  COM - Recipient Committee (other  OTH - Other (e.g., business entity)  PTY - Political Party  SCC - Small Contributor Committee							) (