

497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER JOR AYALA FOR MAYOR SIMI VALLEY 2020			Date of This Filing 10/27/2020	RECEIVED CITY OF SIMI VALLEY Date Stamp 2020 OCT 28 PM 3:28	CALIFORNIA FORM 497 For Official Use Only
REA CODE/PHONE NUMBER 010-510-5155	I.D. NUMBER (if applicable) 1428632		Report No. 8	OFFICE OF CITY CLERK BY <i>[Signature]</i>	
CITY STATE ZIP CODE SIMI VALLEY CA 93062			<input checked="" type="checkbox"/> Amendment to Report No. 8 (explain below) No. of Pages 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
10/27/2020	TORO ENTERPRISES, INC	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
10/27/2020	HENRY STERN	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	SENATOR, CALIFORNIA STATE LEGISLATOR	1,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		 <input type="checkbox"/> Check if Loan _____% Provide interest rate

* 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: AMOUNT RECEIVED DIDN'T PRINT ON ORIGINAL 497

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