

**Recipient Committee  
Campaign Statement  
Cover Page**

(Government Code Sections 84200-84216.5)

Type or print in ink

COVER PAGE

**RECEIVED**  
Date Stamp  
**CITY OF WEST HOLLYWOOD**

**15 JAN 23 PM 3:30**

**OFFICE OF THE CITY CLERK**

**CALIFORNIA 460**  
**2001/02**  
**FORM**

Page 1 of 28  
For Official Use Only

Statement covers period  
from 1/1/14  
through 12/31/2014

Date of election if applicable:  
(Month, Day, Year)

**1. Type of Recipient Committee:** All Committees- Complete Parts 1, 2, 3, and 4.

- Officeholder, Candidate Controlled Committee
  - State Candidate Election Committee
  - Recall  
(Also Complete Part 5)
- General Purpose Committee
  - Sponsored
  - Small Contributor Committee
  - Political Party/Central Committee
- Primarily Formed Ballot Measure Committee
  - Controlled
  - Sponsored  
(Also Complete Part 6)
- Primarily Formed Candidate/ Officeholder Committee  
(Also Complete Part 7)

**2. Type of Statement:**

- Preelection Statement
- Semi-annual Statement
- Termination Statement  
(Also file a Form 410 Termination)
- Amendment (Explain below)
- Quarterly Statement
- Special Odd-Year Report
- Supplemental Preelection Statement-Attach Form 495

**3. Committee Information**

I.D. NUMBER  
1373698

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  
Heilman for City Council 2015

STREET ADDRESS (NO P.O. BOX)  
1155 N. La Cienga Blvd., No. 1202

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>West Hollywood</u>	<u>CA</u>	<u>90069</u>	<u>(562) 427-2100</u>

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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OPTIONAL: FAX/E-MAIL ADDRESS

**Treasurer(s)**

NAME OF TREASURER  
John Heilman

MAILING ADDRESS  
1155 N. La Cienga Blvd., No. 1202

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>West Hollywood</u>	<u>CA</u>	<u>90069</u>	<u>(562) 427-2100</u>

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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OPTIONAL: FAX/E-MAIL ADDRESS

**4. Verification**

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 1-22-15  
Date

Executed on 1-22-15  
Date

Executed on \_\_\_\_\_  
Date

Executed on \_\_\_\_\_  
Date

By John Heilman  
Signature of Treasurer or Assistant Treasurer

By John Heilman  
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

FPPC Form 460 (January/05)  
FPPC Toll-Free Helpline:  
866/ASK-FPPC  
(866/275-3772)  
State of California

**Recipient Committee  
Campaign Statement  
Cover Page-Part 2**

Type or print in ink

COVER PAGE-PART 2

<b>CALIFORNIA</b>		<b>460</b>
<b>FORM</b>		
Page	<u>2</u>	of <u>28</u>

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE  
**John Heilman**

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)  
**West Hollywood City Council**

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP  
**1155 N. LaCienega Blvd. #1202 West Hollywood CA 90069**

**Related Committees Not included in this Statement:** List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.

COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
CITY	STATE ZIP CODE AREA CODE/PHONE

**6. Primarily Formed Ballot Measure Committee**

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER	JURISDICTION	<input type="checkbox"/> SUPPORT
		<input type="checkbox"/> OPPOSE

**Identify the controlling officeholder, candidate, or state measure proponent, if any.**

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD DISTRICT NO. IF ANY

**7. Primarily Formed Candidate/Officeholder Committee** List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT
		<input type="checkbox"/> OPPOSE

Attach continuation sheets if necessary

**Recipient Committee  
Campaign Statement  
Cover Page-Part 2**

Type or print in ink

COVER PAGE-PART 2

<b>CALIFORNIA</b>		<b>460</b>
<b>FORM</b>		
Page	3	of 28

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE \_\_\_\_\_

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE) \_\_\_\_\_

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP \_\_\_\_\_

**Related Committees Not Included in this Statement:** List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.

COMMITTEE NAME Committee to Elect John Heilman for City Council 2005	I.D. NUMBER 841705
OFFICER John Heilman	CONTROLLED COMMITTEE? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX) 1155 N. LaCienega Blvd. #1202	
CITY West Hollywood	STATE CA
ZIP CODE 90069	AREA CODE/PHONE (323) 573-7409

**6. Primarily Formed Ballot Measure Committee**

NAME OF BALLOT MEASURE \_\_\_\_\_

BALLOT NO. OR LETTER	JURISDICTION	<input type="checkbox"/> SUPPORT
		<input type="checkbox"/> OPPOSE

**Identify the controlling officeholder, candidate, or state measure proponent, if any.**

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT \_\_\_\_\_

OFFICE SOUGHT OR HELD \_\_\_\_\_ DISTRICT NO. IF ANY \_\_\_\_\_

**7. Primarily Formed Candidate/Officeholder Committee** List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT
		<input type="checkbox"/> OPPOSE

Attach continuation sheets if necessary

**Campaign Disclosure Statement  
Summary Page**

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

SUMMARY PAGE

Statement covers period	<b>CALIFORNIA 460 FORM</b>
from <u>01/01/2014</u> through <u>12/31/2014</u>	
	Page <u>4</u> of <u>28</u>

NAME OF FILER Heilman for City Council 2015	I.D. NUMBER 1373698
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**Contributions Received**

	Column A Total This Period (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions..... Schedule A, Line 3	\$25,300.00	\$25,300.00
2. Loans Received..... Schedule B, Line 3	\$3,100.00	\$3,100.00
3. SUBTOTAL CASH CONTRIBUTIONS..... Add Lines 1+ 2	\$28,400.00	\$28,400.00
4. Nonmonetary Contributions..... Schedule C, Line 3	\$0.00	\$0.00
5. TOTAL CONTRIBUTIONS RECEIVED..... Add Lines 3 + 4	\$28,400.00	\$28,400.00

**Calendar Year Summary for Candidates  
Running in Both the State Primary and  
General Elections**

	1/1 through 6/30	7/1 to Date
20. Contributions Received	_____	_____
21. Expenditures Made	_____	_____

**Expenditures Made**

	Column A	Column B
6. Payments Made..... Schedule E, Line 4	\$5,024.00	\$5,024.00
7. Loans Made..... Schedule H, Line 3	\$0.00	\$0.00
8. SUBTOTAL CASH PAYMENTS..... Add Lines 6 + 7	\$5,024.00	\$5,024.00
9. Accrued Expenses (Unpaid Bills)..... Schedule F, Line 3	\$0.00	\$0.00
10. Nonmonetary Adjustment..... Schedule C, Line 3	\$0.00	\$0.00
11. TOTAL EXPENDITURES MADE..... Add Lines 8 +9 + 10	\$5,024.00	\$5,024.00

**Expenditure Limit Summary for State  
Candidates**

22. Cumulative Expenditures Made * (If Subject to Voluntary Expenditure Limit)	
Date of Election (mm/dd/yyyy)	Total to Date

**Current Cash Statement**

12. Beginning Cash Balance..... Previous Summary Page, Line 16	\$0.00
13. Cash Receipts..... Column A, Line 3 above	\$28,400.00
14. Miscellaneous Increases to Cash..... Schedule I, Line 4	\$0.00
15. Cash Payments..... Column A, Line 8 above	\$5,024.00
16. <b>ENDING CASH BALANCE</b> Add Lines 12+13+14, then subtract Line 15	\$23,376.00
If this is a termination statement, Line 16 must be zero.	
17. LOAN GUARANTEES RECEIVED..... Schedule B, Part 2	\$0.00

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

\*Amounts in this section may be different from amounts reported in schedule B.

**Cash Equivalents and Outstanding Debts**

18. Cash Equivalents..... See instructions on reverse	\$0.00
19. Outstanding Debts..... Add Line 2+Line 9 in Column B above	\$3,100.00

**Schedule A  
Monetary Contributions Received**

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

SCHEDULE A

Statement covers period	<b>CALIFORNIA FORM 460</b>
from 01/01/2014 through 12/31/2014	
Page 5 of 28	

NAME OF FILER: Heilman for City Council 2015  
I.D. NUMBER: 1373698

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 THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/16/2014	Alon Abady 9595 Wilshire Blvd., PH 1010 Beverly Hills, CA 90212	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Abady Holdings Corp.	\$500.00	\$500.00	
12/29/2014	Ryan Abbott 2241 Lyrie Ave. Los Angeles, CA 90027	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Abbott Worldwide	\$100.00	\$100.00	
12/10/2014	Daniel Adams 838 Hilldale Ave. West Hollywood, CA 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Construction Manager Heery	\$200.00	\$200.00	

**SUBTOTAL \$800.00**

**Schedule A Summary**

1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.).....	\$25,300.00
2. Amount received this period -unitemized monetary contributions of less than \$100.....	\$0.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.).....	<b>TOTAL \$25,300.00</b>

\*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

**Schedule A  
Monetary Contributions Received**

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

SCHEDULE A

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/2014	
through	12/31/2014	Page <u>6</u> of <u>28</u>

NAME OF FILER  
Heilman for City Council 2015

I.D. NUMBER  
1373698

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 THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/29/2014	John Adler 655 N. Robertson Blvd. West Hollywood, CA 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Chief Operating Officer Phyllis Morris	\$500.00	\$500.00	
12/17/2014	APPM, Inc. 8949 W. Sunset Blvd., Ste. 205 West Hollywood, CA 90069	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$250.00	\$250.00	
12/29/2014	Stefan Ashkenazy 8822 Cynthia St. West Hollywood, CA 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hotelier Petite Ermitage	\$500.00	\$500.00	

<b>SUBTOTAL</b>	<b>\$1,250.00</b>
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**Schedule A Summary**

1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.).....	<u>\$25,300.00</u>
2. Amount received this period -unitemized monetary contributions of less than \$100.....	<u>\$0.00</u>
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.).....	<b>TOTAL</b> <u>\$25,300.00</u>

\*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

**Schedule A  
Monetary Contributions Received**

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

SCHEDULE A

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/2014	
through	12/31/2014	Page <u>7</u> of <u>28</u>

NAME OF FILER: Heilman for City Council 2015  
I.D. NUMBER: 1373698

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 THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/10/2014	ASRJ LLC 6505 Gayhart St. Commerce, CA 90040	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$250.00	\$250.00	
12/16/2014	Nathan Benshitrit 13325 Victory Blvd. Van Nuys, CA 91401	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President American Silver, Inc.	\$500.00	\$500.00	
12/29/2014	Lindsay Berger Sacks 1455 N. Doheny Dr. Los Angeles, CA 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Lindsay Berger Sacks	\$250.00	\$250.00	

**SUBTOTAL** \$1,000.00

**Schedule A Summary**

1. Amount received this period -itemized monetary contributions.  
(Include all Schedule A subtotals.)..... \$25,300.00

2. Amount received this period -unitemized monetary contributions of less than \$100..... \$0.00

3. Total monetary contributions received this period.  
(Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.)..... **TOTAL** \$25,300.00

\*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

**Schedule A  
Monetary Contributions Received**

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

SCHEDULE A

Statement covers period	<b>CALIFORNIA FORM 460</b>
from 01/01/2014	
through 12/31/2014	
Page 8 of 28	

NAME OF FILER: Heilman for City Council 2015  
I.D. NUMBER: 1373698

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 THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/29/2014	Nicolas Blach 8822 Cynthia St. West Hollywood, CA 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	General Manager Valaden Hotel	\$500.00	\$500.00	
12/16/2014	Arik Chaim 430 1/2 N. La Cienega Blvd. Los Angeles, CA 90048	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President AEA Management, LLC	\$500.00	\$500.00	
12/29/2014	Ruben Cielak 5010 Venice Blvd. Los Angeles, CA 90019	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Tako Tyko	\$500.00	\$500.00	

**SUBTOTAL** \$1,500.00

**Schedule A Summary**

1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.).....	\$25,300.00
2. Amount received this period -unitemized monetary contributions of less than \$100.....	\$0.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.).....	<b>TOTAL</b> \$25,300.00

\*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

**Schedule A  
Monetary Contributions Received**

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

SCHEDULE A

Statement covers period from <u>01/01/2014</u> through <u>12/31/2014</u>	<b>CALIFORNIA FORM 460</b> Page <u>9</u> of <u>28</u>
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NAME OF FILER  
Heilman for City Council 2015

I.D. NUMBER  
1373698

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 THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/29/2014	Demetri Darnos 999 N. Doheny Dr. #1109 West Hollywood, CA 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Architect Kings 826	\$500.00	\$500.00	
12/10/2014	E.T. Legg & Associates 3837 Hollywood Blvd., Ste. B Hollywood, FL 33021	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$500.00	\$500.00	
12/16/2014	Environcon Contracting Inc. 5940 Lakeshore Dr. Cypress, CA 90630	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$500.00	\$500.00	

**SUBTOTAL** \$1,500.00

**Schedule A Summary**

1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.).....	\$25,300.00
2. Amount received this period -unitemized monetary contributions of less than \$100.....	\$0.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.).....	<b>TOTAL</b> \$25,300.00

\*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

**Schedule A  
Monetary Contributions Received**

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

SCHEDULE A

Statement covers period from <u>01/01/2014</u> through <u>12/31/2014</u>	<b>CALIFORNIA FORM 460</b> Page <u>10</u> of <u>28</u>
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NAME OF FILER Heilman for City Council 2015	I.D. NUMBER 1373698
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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 THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/10/2014	John Erickson 7540 Fountain Ave., #2 West Hollywood, CA 90046	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Deputy City of West Hollywood	\$250.00	\$250.00	
12/02/2014	Erika Ferestein 20 Oakmont Dr. Los Angeles, CA 90049	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Executive Coach Champion Leadership	\$450.00	\$450.00	
12/10/2014	FMA Beverly LLC 6505 Gayhart St. Commerce, CA 90040	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$250.00	\$250.00	

<b>SUBTOTAL</b>	<b>\$950.00</b>
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**Schedule A Summary**

1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.).....	\$25,300.00
2. Amount received this period -unitemized monetary contributions of less than \$100.....	\$0.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.).....	<b>TOTAL</b> \$25,300.00

\*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

**Schedule A  
Monetary Contributions Received**

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

SCHEDULE A

Statement covers period from <u>01/01/2014</u> through <u>12/31/2014</u>	<b>CALIFORNIA FORM 460</b> Page <u>11</u> of <u>28</u>
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NAME OF FILER Heilman for City Council 2015	I.D. NUMBER 1373698
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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 THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
11/24/2014	Randy Gardner 501 S. Beverly Dr., 3rd Fl. Beverly Hills, CA 90212	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Professional Figure Skater Randy Gardner	\$250.00	\$250.00	
11/24/2014	Jay Gendron 1210 Eleventh St. Manhattan Beach, CA 90266	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Professor Southwestern Law School	\$500.00	\$500.00	
12/02/2014	Ellen Godsmith-Vein 29015 Clevis Rd. Rancho Palos Verdes, CA 90275	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO The Gotham Group	\$250.00	\$250.00	

<b>SUBTOTAL</b>	<b>\$1,000.00</b>
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**Schedule A Summary**

1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.).....	<u>\$25,300.00</u>
2. Amount received this period -unitemized monetary contributions of less than \$100.....	<u>\$0.00</u>
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.).....	<b>TOTAL</b> <u>\$25,300.00</u>

\*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

**Schedule A  
Monetary Contributions Received**

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

SCHEDULE A

Statement covers period from <u>01/01/2014</u> through <u>12/31/2014</u>	<b>CALIFORNIA FORM 460</b> Page <u>12</u> of <u>28</u>
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NAME OF FILER <b>Heilman for City Council 2015</b>	I.D. NUMBER <b>1373698</b>
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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 THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/10/2014	Helen Goss 400 Corporate Pointe, Ste. 300 Culver City, CA 90230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Helen J. Goss, Esq.	\$250.00	\$250.00	
12/16/2014	Haba Technologies, Inc. 14815 Bessemer St. Van Nuys, CA 91411	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$500.00	\$500.00	
12/29/2014	Jeffrey Haber 515 S. Flower St. 25th Fl. Los Angeles, CA 90071	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Paul Hastings	\$500.00	\$500.00	

<b>SUBTOTAL</b>	<b>\$1,250.00</b>
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**Schedule A Summary**

1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.).....	<u>\$25,300.00</u>
2. Amount received this period -unitemized monetary contributions of less than \$100.....	<u>\$0.00</u>
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.).....	<b>TOTAL</b> <u>\$25,300.00</u>

\*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

**Schedule A  
Monetary Contributions Received**

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

Statement covers period	<b>CALIFORNIA FORM 460</b>
from 01/01/2014	
through 12/31/2014	
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NAME OF FILER Heilman for City Council 2015	I.D. NUMBER 1373698
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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 THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/10/2014	Ema Haro 10134 Rosewood Ave. South Gate, CA 90280	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Office Manager Truman & Elliott LLP	\$500.00	\$500.00	
11/21/2014	Sandy Hutchens 5557 W. 6th St., Apt. 1313 Los Angeles, CA 90036	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner The Hutchens Group	\$350.00	\$350.00	
12/29/2014	John Irwin 8899 Beverly Blvd. West Hollywood, CA 90048	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Manager Townscape Management, Inc.	\$500.00	\$500.00	

**SUBTOTAL**      \$1,350.00

**Schedule A Summary**

1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.).....	\$25,300.00
2. Amount received this period -unitemized monetary contributions of less than \$100.....	\$0.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.).....	<b>TOTAL</b> \$25,300.00

\*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

**Schedule A  
Monetary Contributions Received**

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

SCHEDULE A

Statement covers period	<b>CALIFORNIA FORM 460</b>
from 01/01/2014 through 12/31/2014	
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NAME OF FILER: Heilman for City Council 2015  
I.D. NUMBER: 1373698

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 THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/29/2014	Jeff Klein 8358 W. Sunset Blvd. West Hollywood, CA 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hotelier JK Hotel Group	\$500.00	\$500.00	
12/17/2014	Abbe Land 1021 Westmount Dr., Ste. 301 West Hollywood, CA 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Executive Director The Trevor Project	\$500.00	\$500.00	
12/29/2014	Mark Lehman 9200 Sunset Blvd. #804 West Hollywood, CA 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Law Offices of Mark E. Lehman	\$250.00	\$250.00	

**SUBTOTAL** \$1,250.00

**Schedule A Summary**

1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.).....	\$25,300.00
2. Amount received this period -unitemized monetary contributions of less than \$100.....	\$0.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.).....	<b>TOTAL</b> \$25,300.00

\*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

**Schedule A  
Monetary Contributions Received**

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

SCHEDULE A

Statement covers period from <u>01/01/2014</u> through <u>12/31/2014</u>	<b>CALIFORNIA FORM 460</b> Page <u>15</u> of <u>28</u>
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NAME OF FILER: Heilman for City Council 2015 I.D. NUMBER: 1373698

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 THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/10/2014	Richard Lichtenstein 2560 Zorada Dr. Los Angeles, CA 90046	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Marathon Communications	\$100.00	\$100.00	
12/16/2014	Daniel Mani 9200 W. Sunset Blvd., Ste. 555 West Hollywood, CA 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Developer Mani Brothers	\$500.00	\$500.00	
12/16/2014	Joseph Mani 8033 W. Sunset Blvd., #1001 Los Angeles, CA 90046	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Developer Mani Brothers	\$500.00	\$500.00	

**SUBTOTAL** \$1,100.00

**Schedule A Summary**

1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.).....	\$25,300.00
2. Amount received this period -unitemized monetary contributions of less than \$100.....	\$0.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.).....	<b>TOTAL</b> \$25,300.00

\*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

**Schedule A  
Monetary Contributions Received**

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

SCHEDULE A

Statement covers period from <u>01/01/2014</u> through <u>12/31/2014</u>	<b>CALIFORNIA FORM 460</b> Page <u>16</u> of <u>28</u>
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NAME OF FILER: Heilman for City Council 2015  
I.D. NUMBER: 1373698

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 THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/16/2014	Rachel Mani 1215 Laurel Ln. Beverly Hills, CA 90210	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker N/A	\$500.00	\$500.00	
12/16/2014	Shiri Mani 8033 W. Sunset Blvd., #1001 Los Angeles, CA 90046	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker N/A	\$500.00	\$500.00	
12/16/2014	Simon Mani 9200 W. Sunset Blvd., Ste. 555 West Hollywood, CA 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Developer Mani Brothers	\$500.00	\$500.00	

**SUBTOTAL** \$1,500.00

**Schedule A Summary**

1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.).....	\$25,300.00
2. Amount received this period -unitemized monetary contributions of less than \$100.....	\$0.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.).....	<b>TOTAL</b> \$25,300.00

\*Contributor Codes  
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COM- Recipient Committee  
(other than PTY or SCC)  
OTH- Other (e.g., business entity)  
PTY- Political Party  
SCC- Small Contributor Committee

**Schedule A  
Monetary Contributions Received**

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

SCHEDULE A

Statement covers period	<b>CALIFORNIA FORM 460</b>
from 01/01/2014 through 12/31/2014	
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NAME OF FILER Heilman for City Council 2015	I.D. NUMBER 1373698
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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 THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/16/2014	Tsipi Mani 1156 Shadow Hill Way Beverly Hills, CA 90210	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Artist Tsipi Mani	\$500.00	\$500.00	
12/29/2014	Eric McLaughlin 3076 Arroyo Seco Palm Springs, CA 92264	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Intervention 911	\$500.00	\$500.00	
11/24/2014	Michael Russo Construction 1420 240th St., Unit B Harbor City, CA 90710	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$100.00	

**SUBTOTAL** \$1,100.00

**Schedule A Summary**

1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.).....	\$25,300.00
2. Amount received this period -unitemized monetary contributions of less than \$100.....	\$0.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.).....	<b>TOTAL</b> \$25,300.00

\*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

**Schedule A  
Monetary Contributions Received**

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

SCHEDULE A

Statement covers period from <u>01/01/2014</u> through <u>12/31/2014</u>	<b>CALIFORNIA FORM 460</b> Page <u>18</u> of <u>28</u>
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NAME OF FILER Heilman for City Council 2015	I.D. NUMBER 1373698
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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 THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
11/24/2014	Michael Russo Corporation 1420 240th St., Unit B Harbor City, CA 90710	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00	\$100.00	
12/29/2014	Craig Miller 3550 Wilshire Blvd., Suite 890 Los Angeles, CA 90010	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President & CEO MZA Events	\$500.00	\$500.00	
12/16/2014	John Passaro 9027 Lindley Ave. Northridge, CA 91325	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Electrician John Passaro	\$500.00	\$500.00	

**SUBTOTAL** \$1,100.00

**Schedule A Summary**

1. Amount received this period -itemized monetary contributions.

(Include all Schedule A subtotals.)..... \$25,300.00

2. Amount received this period -unitemized monetary contributions of less than \$100.....

\$0.00

3. Total monetary contributions received this period.

(Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.)..... **TOTAL** \$25,300.00

\*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

**Schedule A  
Monetary Contributions Received**

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

SCHEDULE A

Statement covers period	<b>CALIFORNIA FORM 460</b>
from 01/01/2014	
through 12/31/2014	
Page 19 of 28	

NAME OF FILER  
Heilman for City Council 2015

I.D. NUMBER  
1373698

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 THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/10/2014	Julie Peppers 10304 Glenbarr Ave. Los Angeles, CA 90064	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Realtor Sotheby's	\$100.00	\$100.00	
12/16/2014	Reiss Brown Ekmekji, Inc. 18980 Ventura Blvd., Ste. 350 Tarzana, CA 91356	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$500.00	\$500.00	
12/10/2014	Ronald S. Kates & Co. 503 N. Robertson Blvd. West Hollywood, CA 90048	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$250.00	\$250.00	

**SUBTOTAL \$850.00**

**Schedule A Summary**

1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.).....	\$25,300.00
2. Amount received this period -unitemized monetary contributions of less than \$100.....	\$0.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.).....	<b>TOTAL \$25,300.00</b>

\*Contributor Codes  
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COM- Recipient Committee  
(other than PTY or SCC)  
OTH- Other (e.g., business entity)  
PTY- Political Party  
SCC- Small Contributor Committee

**Schedule A  
Monetary Contributions Received**

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

SCHEDULE A

Statement covers period from <u>01/01/2014</u> through <u>12/31/2014</u>	<b>CALIFORNIA FORM 460</b> Page <u>20</u> of <u>28</u>
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NAME OF FILER: Heilman for City Council 2015 I.D. NUMBER: 1373698

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 THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/29/2014	Danny Rongan 8743 Santa Monica Blvd. West Hollywood, CA 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Bikes & Hikes LA	\$250.00	\$250.00	
12/29/2014	Mark Rosenberg 950 North Kings Rd. #519 West Hollywood, CA 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Law Offices of Mark Rosenberg	\$250.00	\$250.00	
12/16/2014	S.G. Construction Co. 543 Country Club Dr., B539 Simi Valley, CA 93065	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$500.00	\$500.00	

**SUBTOTAL** \$1,000.00

**Schedule A Summary**

1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.).....	\$25,300.00
2. Amount received this period -unitemized monetary contributions of less than \$100.....	\$0.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.).....	<b>TOTAL</b> \$25,300.00

\*Contributor Codes  
IND- Individual  
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(other than PTY or SCC)  
OTH- Other (e.g., business entity)  
PTY- Political Party  
SCC- Small Contributor Committee

**Schedule A  
Monetary Contributions Received**

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

SCHEDULE A

Statement covers period from <u>01/01/2014</u> through <u>12/31/2014</u>	<b>CALIFORNIA FORM 460</b> Page <u>21</u> of <u>28</u>
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NAME OF FILER: Heilman for City Council 2015  
I.D. NUMBER: 1373698

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 THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/29/2014	Ken Seeley 3076 Arroyo Seco Palm Springs, CA 92264	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Interventionist Intervention 911	\$500.00	\$500.00	
11/21/2014	Seymour Consulting Group 5803 Lubao Ave. Woodland Hills, CA 91367	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$500.00	\$500.00	
12/10/2014	Behnam Soroudi 661 N. Harper Ave., #200 Los Angeles, CA 90048	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Manager Ruby Group, Inc.	\$500.00	\$500.00	

**SUBTOTAL \$1,500.00**

**Schedule A Summary**

1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.).....	\$25,300.00
2. Amount received this period -unitemized monetary contributions of less than \$100.....	\$0.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.).....	<b>TOTAL \$25,300.00</b>

\*Contributor Codes  
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(other than PTY or SCC)  
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SCC- Small Contributor Committee

**Schedule A  
Monetary Contributions Received**

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

SCHEDULE A

Statement covers period	<b>CALIFORNIA FORM 460</b>
from 01/01/2014 through 12/31/2014	
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NAME OF FILER: Heilman for City Council 2015  
I.D. NUMBER: 1373698

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 THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/10/2014	Jacklin Soroudi 661 N. Harper Ave., #200 Los Angeles, CA 90048	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Manager Ruby Group, Inc.	\$500.00	\$500.00	
12/10/2014	Michael Soroudi 10636 Wilshire Blvd., #406 Los Angeles, CA 90024	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Manager Holloway Partners	\$500.00	\$500.00	
12/10/2014	Michelle Soroudi 10636 Wilshire Blvd., #406 Los Angeles, CA 90024	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Manager Holloway Partners	\$500.00	\$500.00	

**SUBTOTAL \$1,500.00**

**Schedule A Summary**

1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.).....	\$25,300.00
2. Amount received this period -unitemized monetary contributions of less than \$100.....	\$0.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.).....	<b>TOTAL \$25,300.00</b>

\*Contributor Codes  
IND- Individual  
COM- Recipient Committee  
(other than PTY or SCC)  
OTH- Other (e.g., business entity)  
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**Schedule A  
Monetary Contributions Received**

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

SCHEDULE A

Statement covers period	<b>CALIFORNIA FORM 460</b>
from 01/01/2014 through 12/31/2014	
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NAME OF FILER Heilman for City Council 2015	I.D. NUMBER 1373698
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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 THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/10/2014	Rachel Soroudi 10636 Wilshire Blvd., #406 Los Angeles, CA 90024	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Student N/A	\$500.00	\$500.00	
12/29/2014	Leon Terezian 12215 Ventura Blvd. #105 Studio City, CA 91604	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Custom Blind & Carpet, Inc.	\$500.00	\$500.00	
12/10/2014	The Political Machine Inc. 4107 Magnolia Blvd. Burbank, CA 91505	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$500.00	\$500.00	

**SUBTOTAL** \$1,500.00

**Schedule A Summary**

1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.).....	\$25,300.00
2. Amount received this period -unitemized monetary contributions of less than \$100.....	\$0.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.).....	<b>TOTAL</b> \$25,300.00

\*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

**Schedule A  
Monetary Contributions Received**

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

SCHEDULE A

Statement covers period from <u>01/01/2014</u> through <u>12/31/2014</u>	<b>CALIFORNIA FORM 460</b> Page <u>24</u> of <u>28</u>
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NAME OF FILER  
Heilman for City Council 2015

I.D. NUMBER  
1373698

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 THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/10/2014	Thomas Employment Law Advocates 9200 Sunset Blvd., PH 2 West Hollywood, CA 90069	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$200.00	\$200.00	
12/29/2014	Kirsten Vangsness 100 Crescent Dr. #100 Beverly Hills, CA 90210	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Actress CBS/ABC	\$500.00	\$500.00	
12/29/2014	Glenn Wasserman 3660 Shannon Rd. Los Angeles, CA 90027	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Kane Ballmew Berkman	\$250.00	\$250.00	

**SUBTOTAL** \$950.00

**Schedule A Summary**

1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.).....	\$25,300.00
2. Amount received this period -unitemized monetary contributions of less than \$100.....	\$0.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.).....	<b>TOTAL</b> \$25,300.00

\*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

**Schedule A  
Monetary Contributions Received**

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

SCHEDULE A

Statement covers period from <u>01/01/2014</u> through <u>12/31/2014</u>	<b>CALIFORNIA FORM 460</b> Page <u>25</u> of <u>28</u>
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NAME OF FILER Heilman for City Council 2015	I.D. NUMBER 1373698
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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 THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/10/2014	Tom Welch 8577 Rugby Dr., #102 West Hollywood, CA 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Creative Director Brierley	\$100.00	\$100.00	
12/29/2014	Allyne Winderman 3660 Shannon Rd. Los Angeles, CA 90027	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Professor Cal Poly Pamona	\$250.00	\$250.00	
12/17/2014	Anthony Zehenni 8730 Sunset Towers, Ste. 400 West Hollywood, CA 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Trustee Sunset Towers Partnership	\$500.00	\$500.00	

**SUBTOTAL** \$850.00

**Schedule A Summary**

1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.).....	\$25,300.00
2. Amount received this period -unitemized monetary contributions of less than \$100.....	\$0.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.).....	<b>TOTAL</b> \$25,300.00

\*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

**Schedule A  
Monetary Contributions Received**

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

SCHEDULE A

Statement covers period from <u>01/01/2014</u> through <u>12/31/2014</u>	<b>CALIFORNIA FORM 460</b> Page <u>26</u> of <u>28</u>
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NAME OF FILER Heilman for City Council 2015	I.D. NUMBER 1373698
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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 THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/10/2014	Don Zuidema 8581 Santa Monica Blvd., #719 West Hollywood, CA 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner LASC	\$500.00	\$500.00	

**SUBTOTAL** \$500.00

**Schedule A Summary**

1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.).....	\$25,300.00
2. Amount received this period -unitemized monetary contributions of less than \$100.....	\$0.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.).....	<b>TOTAL</b> \$25,300.00

\*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

**Schedule B - Part 1  
Loans Received**

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

SCHEDULE B-PART 1

Statement covers period from <u>01/01/2014</u> through <u>12/31/2014</u>	<b>CALIFORNIA FORM 460</b> Page <u>27</u> of <u>28</u>
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NAME OF FILER: **Heilman for City Council 2015** I.D. NUMBER: **1373698**

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
John Heilman 1155 N. LaCienega Blvd. #1202 West Hollywood, CA 90069  <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Professor Southwestern Law School	\$0.00	\$100.00	<input type="checkbox"/> PAID \$0.00 <input type="checkbox"/> FORGIVEN \$0.00	\$100.00  DATE DUE	0  RATE \$0.00	\$100.00  09/02/2014 DATE INCURRED	CALENDAR YEAR \$3,100.00 PER ELECTION
John Heilman 1155 N. LaCienega Blvd. #1202 West Hollywood, CA 90069  <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Professor Southwestern Law School	\$0.00	\$3,000.00	<input type="checkbox"/> PAID \$0.00 <input type="checkbox"/> FORGIVEN \$0.00	\$3,000.00  DATE DUE	0  RATE \$0.00	\$3,000.00  11/17/2014 DATE INCURRED	CALENDAR YEAR \$3,100.00 PER ELECTION

<b>SUBTOTALS</b>	\$3,100.00	\$0.00	\$3,100.00	\$0.00	
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**Schedule B Summary**

1. Loans received this period..... \$3,100.00  
(Total Column(b) plus unitemized loans of less than \$100.)

2. Loans paid or forgiven this period..... \$0.00  
(Total Column (c) plus loans under \$100 paid or forgiven.)  
(Include loans paid by a third party that are also itemized on Schedule A.)

3. Net change this period. (Subtract Line 2 from Line 1.)..... **NET** \$3,100.00  
Enter the net here and on the Summary Page, Column A, Line 2. (May be a negative number)

(Enter (s) on Schedule E, Line 3)

\*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

\*Amounts forgiven or paid by another party also must be reported on Schedule A.  
 \*\*If required.

**Schedule E  
Payments Made**

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

SCHEDULE E

Statement covers period		<b>CALIFORNIA FORM 460</b>
from 01/01/2014	through 12/31/2014	
		Page 28 of 28

NAME OF FILER  
Heilman for City Council 2015

I.D. NUMBER  
1373698

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- |   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.        | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants                | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)* | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations                     | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees        | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events                  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure             | POS postage, delivery and messenger services  | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense                       | PRO professional services (legal, accounting) | VOT voter registration  |
| LIT campaign literature and mailings    | PRT print ads                                 | WEB information technology costs (Internet, e-mail)           |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Daily Consulting LLC 4742 El Nido Rancho Santa Fe, CA 92067	CNS		\$2,500.00
Norman Chramoff 5904 Carlton Way Los Angeles, CA 90028	SAL		\$2,500.00

(IF COMMITTEE, ALSO ENTER I.D. NUMBER)

**SUBTOTAL \$5,000.00**

**Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$5,000.00
2. Unitemized payments made this period of under \$100.....	\$24.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	<b>TOTAL \$5,024.00</b>

FPPC Form 460 (January/05)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)