

496 Independent Expenditure Report

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

RECEIVED
CITY OF WEST HOLLYWOOD

496 INDEPENDENT EXPENDITURE REPORT

NAME OF FILER Friends of West Hollywood, A Committee to Elect John D'Amico, John Heilman, Lindsey Horvath & Joseph Guardarrama to the West Hollywood			Date of This Filing 02/12/2015	15 FEB 12 4:48 PM '15 OFFICE OF THE CITY CLERK	CALIFORNIA FORM 496 For Official Use Only
AREA CODE/PHONE NUMBER (562) 983-0815	I.D. NUMBER (if applicable) 1374259		Report No. 02-12-15LR		
STREET ADDRESS 8149 Santa Monica Blvd., #396			<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY West Hollywood	STATE CA	ZIP CODE 90046	No. of Pages 2		

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED Lindeey Horvath				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD City Council Member: City of West Hollywood	DISTRICT NO.	SUPPORT X	OPPOSE	BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE

2. Independent Expenditures Made Attach additional information on appropriately labeled continuation sheets.

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
02/10/2015	Voter files Cumulative to date total \$16998.27	373.66
02/11/2015	Voter Files Cumulative to date total \$16998.27	238.61
02/11/2015	Mailer Cumulative to date total \$16998.27	6,091.60
02/11/2015	Mailer Cumulative to date total \$16998.27	1,670.32

Reason for Amendment: _____

FPPC Form 496 (March 2011)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

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1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED Lindsey Horvath				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD City Council Member: City of West Hollywood	DISTRICT NO.	SUPPORT X	OPPOSE	BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE

2. Independent Expenditures Made *Attach additional information on appropriately labeled continuation sheets.*

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
02/11/2015	Voter Files Cumulative to date total \$16998.27	57.61

Reason for Amendment: _____