

**Recipient Committee
Campaign Statement
Cover Page**

(Government Code Sections 84200-84216.5)

Type or print in ink.

COVER PAGE

RECEIVED
CITY OF WEST HOLLYWOOD
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OFFICE OF THE CITY CLERK

CALIFORNIA FORM 460

Page 1 of 32
For Official Use Only

Statement covers period
from 05/17/2015
through 06/30/2015

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

SEE INSTRUCTIONS ON REVERSE

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
1376375

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

STREET ADDRESS (NO P.O. BOX)
8899 Beverly Blvd.

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>West Hollywood</u>	<u>CA</u>	<u>90048</u>	<u>(562) 983-0815</u>

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX
525 E. Seaside Way, #101-C

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Long Beach</u>	<u>CA</u>	<u>90802</u>	

OPTIONAL: FAX / E-MAIL ADDRESS
(562) 983-0817 / gary@crummittandassociates.com

Treasurer(s)

NAME OF TREASURER
Gary Crummitt

MAILING ADDRESS
525 E. Seaside Way, #101-C

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Long Beach</u>	<u>CA</u>	<u>90802</u>	<u>(562) 983-0815</u>

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification

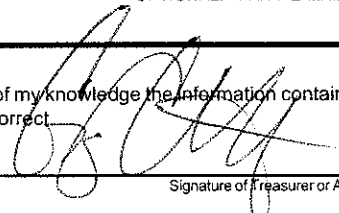
I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and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

Executed on 07/30/2015
Date

Executed on _____
Date

Executed on _____
Date

Executed on _____
Date

By 
Signature of Treasurer or Assistant Treasurer

By _____
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

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

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA FORM	460
Page <u>2</u> of <u>32</u>	

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	I.D. NUMBER
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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

COMMITTEE NAME	I.D. NUMBER
----------------	-------------

NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
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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
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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
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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 John Heilman	OFFICE SOUGHT OR HELD City Council Member	<input checked="" type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
---	--	--

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

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

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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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		CALIFORNIA FORM 460
from	05/17/2015	
through		Page 3 of 32
		I.D. NUMBER
		1376375

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

WeHo United for John Heilman for City Council 2015

Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3	\$ 19,000.00	\$ 121,500.00
2. Loans Received	Schedule B, Line 3	0.00	0.00
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	\$ 19,000.00	\$ 121,500.00
4. Nonmonetary Contributions	Schedule C, Line 3	0.00	5,012.00
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4	\$ 19,000.00	\$ 126,512.00

**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	\$ 53,088.97	\$ 122,131.22
7. Loans Made	Schedule H, Line 3	0.00	0.00
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7	\$ 53,088.97	\$ 122,131.22
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3	0.00	0.00
10. Nonmonetary Adjustment	Schedule C, Line 3	0.00	5,012.00
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10	\$ 53,088.97	\$ 127,143.22

**Expenditure Limit Summary for State
Candidates**

22. Cumulative Expenditures Made*
(If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy)	Total to Date
____/____/____	\$ _____
____/____/____	\$ _____

Current Cash Statement

12. Beginning Cash Balance	Previous Summary Page, Line 16	\$ 33,457.75
13. Cash Receipts	Column A, Line 3 above	19,000.00
14. Miscellaneous Increases to Cash	Schedule I, Line 4	631.22
15. Cash Payments	Column A, Line 8 above	53,088.97
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15	\$ 0.00

If this is a termination statement, Line 16 must be zero.

17. LOAN GUARANTEES RECEIVED	Schedule B, Part 2	\$ 0.00
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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	\$ 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 Column B.

**Schedule A
Monetary Contributions Received**

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

SCHEDULE A

Statement covers period		CALIFORNIA FORM 460
from	05/17/2015	
through	06/30/2015	Page 4 of 32
NAME OF FILER		I.D. NUMBER
WeHo United for John Heilman for City Council 2015		1376375

SEE INSTRUCTIONS ON REVERSE

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)
05/28/2015	BMB Commercial Corp. 8600 Melrose Ave. 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		4,000.00	19,000.00	
06/05/2015	BOA Sunset 9200 Sunset Blvd., #650 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		500.00	1,000.00	
05/19/2015	Denim.LA Inc, DBA DSTLD 8899 Beverly Blvd. Ste. 600 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		5,000.00	5,000.00	
06/03/2015	Emday Inc. 1526 S. Broadway Los Angeles, CA 90015	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2,000.00	2,000.00	
06/05/2015	Katana 9200 Sunset Blvd., #650 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		500.00	1,000.00	

SUBTOTAL \$ 12,000.00

Schedule A Summary

- Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.) \$ 19,000.00
- Amount received this period – unitemized monetary contributions of less than \$100 \$ 0.00
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** 19,000.00

*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

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

**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	05/17/2015	
through	06/30/2015	Page <u>5</u> of <u>32</u>

NAME OF FILER WeHo United for John Heilman for City Council 2015	I.D. NUMBER 1376375
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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)
05/19/2015	Law Offices Of Nathan Goller 655 N. Robertson Blvd. 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		2,500.00	2,500.00	
05/28/2015	Mani Brothers LLC 9200 W. Sunset Blvd., #555 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		4,000.00	19,000.00	
05/28/2015	Howard H. Sunkin 251 S. Roxbury Dr. 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	Consultant EK Consulting	500.00	500.00	
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
SUBTOTAL \$				7,000.00		

*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 D
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

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

Statement covers period		CALIFORNIA FORM 460
from	05/17/2015	
through	06/30/2015	Page 6 of 32

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER WeHo United for John Heilman for City Council 2015	I.D. NUMBER 1376375
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DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
05/19/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Canvasser	391.00	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
05/19/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Canvasser	617.00	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
05/19/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Canvasser	330.00	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL \$				1,338.00		

Schedule D Summary

- Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.) \$ 48,869.62
- Unitemized contributions and independent expenditures made this period of under \$100 \$ 0.00
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) **TOTAL \$** 48,869.62

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

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

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	05/17/2015	
through	06/30/2015	Page <u>7</u> of <u>32</u>
NAME OF FILER		I.D. NUMBER
WeHo United for John Heilman for City Council 2015		1376375

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
05/19/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Canvasser	153.00	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
05/19/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Canvasser	330.00	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
05/19/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Canvasser	240.00	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
05/19/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Canvasser	300.00	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL \$				1,023.00		

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

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

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	05/17/2015	
through	06/30/2015	Page <u>8</u> of <u>32</u>
NAME OF FILER		I.D. NUMBER
WeHo United for John Heilman for City Council 2015		1376375

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
05/19/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Consulting	2,040.00	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
05/20/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Design & Production of mailer	1,500.00	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
05/20/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Mailer	6,243.53	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
05/22/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Consulting	6,667.00	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL \$				16,450.53		

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
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to whole dollars.

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	05/17/2015	
through	06/30/2015	Page 9 of 32

NAME OF FILER WeHo United for John Heilman for City Council 2015	I.D. NUMBER 1376375
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DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
05/22/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Design & Production	1,300.00	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
05/27/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Canvasser	536.00	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
05/27/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Canvasser	527.00	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
05/27/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Canvasser	323.00	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL \$				2,686.00		

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
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SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	05/17/2015	
through	06/30/2015	Page 10 of 32
NAME OF FILER		I.D. NUMBER
WeHo United for John Heilman for City Council 2015		1376375

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
05/27/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Canvasser	376.00	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
05/27/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Canvasser	308.00	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
05/27/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Canvasser	272.00	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
05/27/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Canvasser	240.00	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL \$				1,196.00		

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

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

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	05/17/2015	
through	06/30/2015	Page <u>11</u> of <u>32</u>
NAME OF FILER		I.D. NUMBER
WeHo United for John Heilman for City Council 2015		1376375

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
05/27/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Canvasser	102.00	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
05/27/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Canvasser	187.00	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
05/27/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Canvasser	255.00	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
05/27/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Consulting	1,233.00	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL \$				1,777.00		

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

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

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	05/17/2015	
through	06/30/2015	Page 12 of 32
NAME OF FILER		I.D. NUMBER
WeHo United for John Heilman for City Council 2015		1376375

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
05/27/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Mailer	3,484.03	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
05/27/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Doorhangers	1,581.06	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
05/28/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Consulting	5,700.00	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
06/02/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Canvasser	1,190.00	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL \$				11,955.09		

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

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

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	05/17/2015	
through	06/30/2015	Page 13 of 32

NAME OF FILER WeHo United for John Heilman for City Council 2015	I.D. NUMBER 1376375
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DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
06/02/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Canvasser	1,105.00	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
06/02/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Canvasser	833.00	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
06/02/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Canvasser	765.00	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
06/02/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Canvasser	615.00	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL \$	3,318.00
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**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

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

SCHEDULE D (CONT.)

Statement covers period from <u>05/17/2015</u> through <u>06/30/2015</u>	CALIFORNIA FORM 460
	Page <u>14</u> of <u>32</u>

NAME OF FILER WeHo United for John Heilman for City Council 2015	I.D. NUMBER 1376375
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DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1- DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
06/02/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Canvasser	735.00	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
06/02/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Canvasser	735.00	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
06/02/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Canvasser	833.00	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
06/02/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Canvasser	765.00	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL \$				3,068.00		

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

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

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	05/17/2015	
through	06/30/2015	Page 15 of 32

NAME OF FILER	I.D. NUMBER
WeHo United for John Heilman for City Council 2015	1376375

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
06/02/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Canvasser	480.00	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
06/02/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Canvasser	390.00	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
06/02/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Canvasser	510.00	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
06/02/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Canvasser	480.00	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL \$				1,860.00		

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

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

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	05/17/2015	
through	06/30/2015	Page 16 of 32

NAME OF FILER

WeHo United for John Heilman for City Council 2015

I.D. NUMBER

1376375

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
06/02/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Canvasser	270.00	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
06/03/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Phone Banks	178.00	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
06/05/2015	John Heilman City Council Member City of West Hollywood	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Consulting	3,750.00	116,016.70	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
SUBTOTAL \$				4,198.00		

**Schedule E
Payments Made**

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

Statement covers period		CALIFORNIA FORM 460
from	05/17/2015	
through	06/30/2015	Page 17 of 32
NAME OF FILER		I.D. NUMBER
WeHo United for John Heilman for City Council 2015		1376375

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

WeHo United for John Heilman for City Council 2015

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 supporting/opposing others (explain)*	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
Harlan T. Allen 940 N. Ardmore Ave., #202 Los Angeles, CA 90028	IND		Canvasser supporting John Heilman for City Council	272.00
Harlan T. Allen 940 N. Ardmore Ave., #202 Los Angeles, CA 90028	IND		Canvasser supporting John Heilman for City Council	833.00
Barbara Grover, Inc. 1823 Lucile Ave. Los Angeles, CA 90026	IND		Mailer supporting John Heilman for City Council	6,243.53

* Payments that are contributions or independent expenditures must also be summarized on Schedule D. **SUBTOTAL \$ 7,348.53**

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$	53,088.97
2. Unitemized payments made this period of under \$100	\$	0.00
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.)	TOTAL \$	53,088.97

**Schedule E
(Continuation Sheet)
Payments Made**

SCHEDULE E (CONT.)

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

Statement covers period		CALIFORNIA FORM 460
from	05/17/2015	
through	06/30/2015	Page <u>18</u> of <u>32</u>
NAME OF FILER		I.D. NUMBER
WeHo United for John Heilman for City Council 2015		1376375

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

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 supporting/opposing others (explain)*	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
Barbara Grover, Inc. 1823 Lucile Ave. Los Angeles, CA 90026	IND		Consulting supporting John Heilman for City Council	6,667.00
Barbara Grover, Inc. 1823 Lucile Ave. Los Angeles, CA 90026	IND		Mailer supporting John Heilman for City Council	3,484.03
Barbara Grover, Inc. 1823 Lucile Ave. Los Angeles, CA 90026	IND		Doorhangers supporting John Heilman for City Council	1,581.06
Barbara Grover, Inc. 1823 Lucile Ave. Los Angeles, CA 90026	OFC			170.72
Barbara Grover, Inc. 1823 Lucile Ave. Los Angeles, CA 90026	CNS			448.80

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 12,351.61

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

**Schedule E
(Continuation Sheet)
Payments Made**

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

Statement covers period		CALIFORNIA FORM 460
from	05/17/2015	
through	06/30/2015	Page 19 of 32
NAME OF FILER		I.D. NUMBER
WeHo United for John Heilman for City Council 2015		1376375

SEE INSTRUCTIONS ON REVERSE

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 supporting/opposing others (explain)*	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
Wesley Bridle 551 N. Sweetzer Ave., #4 West Hollywood, CA 90048	IND		Canvasser supporting John Heilman for City Council	240.00
Wesley Bridle 551 N. Sweetzer Ave., #4 West Hollywood, CA 90048	IND		Canvasser supporting John Heilman for City Council	240.00
Wesley Bridle 551 N. Sweetzer Ave., #4 West Hollywood, CA 90048	IND		Canvasser supporting John Heilman for City Council	480.00
Charles Cha 1540 N. Formosa Ave., #6 Los Angeles, CA 90046	IND		Canvasser supporting John Heilman for City Council	270.00
Norman Chramoff 5904 Carlton Way Los Angeles, CA 90028	IND		Consulting supporting John Heilman for City Council	2,040.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 3,270.00

**Schedule E
(Continuation Sheet)
Payments Made**

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

SCHEDULE E (CONT.)

Statement covers period from <u>05/17/2015</u> through <u>06/30/2015</u>	CALIFORNIA FORM 460
	Page <u>20</u> of <u>32</u>
	I.D. NUMBER 1376375

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

WeHo United for John Heilman for City Council 2015

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 supporting/opposing others (explain)*	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
LT 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
Norman Chramoff 5904 Carlton Way Los Angeles, CA 90028	IND	Consulting supporting John Heilman for City Council	1,233.00
Norman Chramoff 5904 Carlton Way Los Angeles, CA 90028	IND	Consulting supporting John Heilman for City Council	5,700.00
Norman Chramoff 5904 Carlton Way Los Angeles, CA 90028	OFC		303.66
Crummitt & Associates 525 E. Seaside Way, #101-C Long Beach, CA 90802	PRO		1,500.00
Austin Cyr 5399 Playa Vista Dr., #E-325 Playa Vista, CA 90094	IND	Canvasser supporting John Heilman for City Council	391.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 9,127.66

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

**Schedule E
(Continuation Sheet)
Payments Made**

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

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	05/17/2015	
through	06/30/2015	Page 21 of 32
NAME OF FILER		I.D. NUMBER
WeHo United for John Heilman for City Council 2015		1376375

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

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 supporting/opposing others (explain)*	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
Austin Cyr 5399 Playa Vista Dr., #E-325 Playa Vista, CA 90094	IND		Canvasser supporting John Heilman for City Council	536.00
Austin Cyr 5399 Playa Vista Dr., #E-325 Playa Vista, CA 90094	IND		Canvasser supporting John Heilman for City Council	1,190.00
Austin Cyr 5399 Playa Vista Dr., #E-325 Playa Vista, CA 90094	OFC			520.36
Gioia DiBiase 1801 Wedenmeyer St., #419 San Francisco, CA 94129	IND		Design & production of mailer supporting John Heilman for City Council	1,500.00
Gioia DiBiase 1801 Wedenmeyer St., #419 San Francisco, CA 94129	IND		Design & Production supporting John Heilman for City Council	1,300.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 5,046.36

**Schedule E
(Continuation Sheet)
Payments Made**

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

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	05/17/2015	
through	06/30/2015	Page 22 of 32
NAME OF FILER		I.D. NUMBER
WeHo United for John Heilman for City Council 2015		1376375

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

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 supporting/opposing others (explain)*	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
EJM Strategies 362 N. San Vicente Blvd., #C West Hollywood, CA 90048	OFC			252.66
EJM Strategies 362 N. San Vicente Blvd., #C West Hollywood, CA 90048	IND		Consulting supporting John Heilman for City Council	3,750.00
EJM Strategies 362 N. San Vicente Blvd., #C West Hollywood, CA 90048	OFC			574.35
EJM Strategies 362 N. San Vicente Blvd., #C West Hollywood, CA 90048	CNS			448.80
Richard Fazekas 2715 Alta St. Los Angeles, CA 90031	IND		Canvasser supporting John Heilman for City Council	153.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 5,178.81

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

**Schedule E
(Continuation Sheet)
Payments Made**

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

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	05/17/2015	
through	06/30/2015	Page <u>23</u> of <u>32</u>
NAME OF FILER		I.D. NUMBER
WeHo United for John Heilman for City Council 2015		1376375

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

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 supporting/opposing others (explain)*	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
Richard Fazekas 2715 Alta St. Los Angeles, CA 90031	IND		Canvasser supporting John Heilman for City Council	376.00
Richard Fazekas 2715 Alta St. Los Angeles, CA 90031	IND		Canvasser supporting John Heilman for City Council	765.00
Ellyn Leahy 1967 N Beachwood Dr. Los Angeles, CA 90068	IND		Canvasser supporting John Heilman for City Council	300.00
Ellyn Leahy 1967 N. Beachwood Dr. Los Angeles, CA 90068	IND		Canvasser supporting John Heilman for City Council	255.00
Ellyn Leahy 1967 N. Beachwood Dr. Los Angeles, CA 90068	IND		Canvasser supporting John Heilman for City Council	615.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 2,311.00

**Schedule E
(Continuation Sheet)
Payments Made**

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

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	05/17/2015	
through	06/30/2015	Page 24 of 32
NAME OF FILER		I.D. NUMBER
WeHo United for John Heilman for City Council 2015		1376375

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

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 supporting/opposing others (explain)*	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
Ruth Myers 8719 Wakefield Ave. Panorama City, CA 91402	IND		Canvasser supporting John Heilman for City Council	187.00
Ruth Myers 8719 Wakefield Ave. Panorama City, CA 91402	IND		Canvasser supporting John Heilman for City Council	833.00
Kathryn Payne 6154 Shoshone Ave. Encino, CA 91316	IND		Canvasser supporting John Heilman for City Council	330.00
Kathryn Payne 6154 Shoshone Ave. Encino, CA 91316	IND		Canvasser supporting John Heilman for City Council	323.00
Kathryn Payne 6154 Shoshone Ave. Encino, CA 91316	IND		Canvasser supporting John Heilman for City Council	735.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 2,408.00

**Schedule E
(Continuation Sheet)
Payments Made**

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

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	05/17/2015	
through	06/30/2015	Page 25 of 32
NAME OF FILER		I.D. NUMBER
WeHo United for John Heilman for City Council 2015		1376375

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

WeHo United for John Heilman for City Council 2015

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 supporting/opposing others (explain)*	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
Ashish Sharma 630 Magnolia Ave., #122 Long Beach, CA 90802	IND		Canvasser supporting John Heilman for City Council	510.00
Andrew Sklar 4310 Ventura Canyon, #3 Sherman Oaks, CA 91423	IND		Canvasser supporting John Heilman for City Council	102.00
Andrew Sklar 4310 Ventura Canyon, #3 Sherman Oaks, CA 91423	IND		Canvasser supporting John Heilman for City Council	765.00
Rosemary Sova 800 W. 1st St. Los Angeles, CA 90012	IND		Canvasser supporting John Heilman for City Council	617.00
Rosemary Sova 800 W. 1st St. Los Angeles, CA 90012	IND		Canvasser supporting John Heilman for City Council	527.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 2,521.00

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

**Schedule E
(Continuation Sheet)
Payments Made**

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

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	05/17/2015	
through	06/30/2015	Page 26 of 32
NAME OF FILER		I.D. NUMBER
WeHo United for John Heilman for City Council 2015		1376375

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

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 supporting/opposing others (explain)*	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
Rosemary Sovo 800 W. 1st St. Los Angeles, CA 90012	IND		Canvasser supporting John Heilman for City Council	1,105.00
The Sammarco Group 2304 Mathews Ave., #4 Redondo Beach, CA 90278	IND		Phone banks supporting John Heilman for City Council	178.00
Charles Tyler III 5600 Rickenbacher Rd. Bell, CA 90201	IND		Canvasser supporting John Heilman for City Council	390.00
Ryan A. Welch 416 N. Doheny, #4 West Hollywood, CA 90048	IND		Canvasser supporting John Heilman for City Council	330.00
Ryan A. Welch 416 N. Doheny, #4 West Hollywood, CA 90048	IND		Canvasser supporting John Heilman for City Council	308.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 2,311.00

**Schedule E
(Continuation Sheet)
Payments Made**

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

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	05/17/2015	
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NAME OF FILER		I.D. NUMBER
WeHo United for John Heilman for City Council 2015		1376375

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

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 supporting/opposing others (explain)* | 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
Ryan A. Welch 416 N. Doheny, #4 West Hollywood, CA 90048	IND		Canvasser supporting John Heilman for City Council	735.00
Johnese D. Zeigler 6530 2nd Ave. Los Angeles, CA 90043	IND		Canvasser supporting John Heilman for City Council	480.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 1,215.00

Schedule G
Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

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

SCHEDULE G

Statement covers period from <u>05/17/2015</u>	CALIFORNIA FORM 460
through <u>06/30/2015</u>	
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER WeHo United for John Heilman for City Council 2015	I.D. NUMBER 1376375
NAME OF AGENT OR INDEPENDENT CONTRACTOR Barbara Grover, Inc.	

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 supporting/opposing others (explain)*	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)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Service Mailers, Inc. 3101 Exposition Pl. Los Angeles, CA 90018	POS		U.S. Postmaster: \$1,013.48	1,013.48
Service Mailers, Inc. 3101 Exposition Pl. Los Angeles, CA 90018	POS		U.S. Postmaster: \$1,487.64	1,487.64
Service Mailers, Inc. 3101 Exposition Pl. Los Angeles, CA 90018	POS		U.S. Postmaster: \$822.40	822.40
Service Mailers, Inc. 3101 Exposition Pl. Los Angeles, CA 90018	POS		U.S. Postmaster: \$1,185.26	1,185.26

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 4,508.78

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

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

**Schedule G (Continuation Sheet)
Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)**

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

SCHEDULE G (CONT.)

Statement covers period from <u>05/17/2015</u> through <u>06/30/2015</u>	CALIFORNIA FORM 460
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I.D. NUMBER 1376375	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

WeHo United for John Heilman for City Council 2015

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Barbara Grover, Inc.

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 supporting/opposing others (explain)*	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)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Service Mailers, Inc. 3101 Exposition Pl. Los Angeles, CA 90018	POS		U.S. Postmaster: \$1,422.64	1,422.64
Service Mailers, Inc. 3101 Exposition Pl. Los Angeles, CA 90018	POS		U.S. Postmaster: \$741.13	741.13
Service Mailers, Inc. 3101 Exposition Pl. Los Angeles, CA 90018	POS		U.S. Postmaster: \$200.00	200.00
Service Mailers, Inc. 3101 Exposition Pl. Los Angeles, CA 90018	POS		U.S. Postmaster: \$1,120.26	1,120.26

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 3,484.03

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

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

**Schedule G (Continuation Sheet)
Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)**

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

SCHEDULE G (CONT.)

Statement covers period from <u>05/17/2015</u> through <u>06/30/2015</u>	CALIFORNIA FORM 460
	Page <u>30</u> of <u>32</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

WeHo United for John Heilman for City Council 2015

I.D. NUMBER

1376375

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Barbara Grover, Inc.

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 supporting/opposing others (explain)*	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)

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
The Harman Press 6840 Vineland Ave. North Hollywood, CA 91605	LIT		1,734.75
The Harman Press 6840 Vineland Ave. North Hollywood, CA 91605	CMP		802.80
The Harman Press 6840 Vineland Ave. North Hollywood, CA 91605	CMP		778.26

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 3,315.81

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

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

Schedule G
Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

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

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER WeHo United for John Heilman for City Council 2015	I.D. NUMBER 1376375
NAME OF AGENT OR INDEPENDENT CONTRACTOR EJM Strategies	

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 supporting/opposing others (explain)* | 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) |

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Medocino Farms 175 S. Fairfax, Suite B Los Angeles, CA 90036	OFC		207.10
Staples 5425 Wilshire Blvd. Los Angeles, CA 90036	OFC		210.70

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 417.80

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

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

**Schedule I
Miscellaneous Increases to Cash**

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

SCHEDULE I

Statement covers period		CALIFORNIA FORM 460
from	05/17/2015	
through	06/30/2015	Page <u>32</u> of <u>32</u>
NAME OF FILER		I.D. NUMBER
WeHo United for John Heilman for City Council 2015		1376375

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

WeHo United for John Heilman for City Council 2015

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
06/29/2015	Hanasab Insurance Services, Inc. 625 S. Fairfax Ave. Los Angeles, CA 90036	Refund	631.16

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$

631.16

Schedule I Summary

1. Itemized increases to cash this period.	\$	631.16
2. Unitemized increases to cash of under \$100 this period.	\$	0.06
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).)	\$	0.00
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.)	TOTAL \$	631.22