Statement of				Date Stamp		CALIFORNIA 410		
Recipient Cor Statement Type	nmittee ☐ Initial Not yet qualified ☐ or// Date qualified as committee	Amendment List I.D. number: # 1387219 Date qualified as committee [If applicable]	List I.D. numb	ertion – See Part 5 ler: ———————————————————————————————————	16 AUG 15	#M 10: 2		For Official Use Only
1. Committee I	nformation			2. Treasurer and	d Other Principa	Officers		
John Heilman for West Hollywood City Council 2017 STREET ADDRESS (NO P.O. BOX)				Jane Leiderman STREET ADDRESS (NO P.O. 80X)				
16633 Ventura Blvd., #1008				16633 Ventura Blvd., #1008 STATE ZIP CODE AREA CODE/PHONE				
Encino MAILING ADDRESS (IF D	CA 91436 (323)655-4065			Encino NAME OF ASSISTANT TRE	ASURER, IF ANY		91436	(323)655-4065
FAX/E-MAIL ADDRESS	ell net			STREET ADDRESS INO P.O	. BOX}			
COUNTY OF DOMICILE JURISDICTION WHERE COMMITTEE IS ACTIVE				CITY		STATE	ZIP CODE	AREA CODE/PHONE
				NAME OF PRINCIPAL OFF	ICER(S)			
Attach additional	information on appropriate	ly labeled continuation sh	eets.	STREET ADDRESS (NO P.C	. BOX)			
				CITY		STATE	ZIP CODE	AREA CODE/PHONE
	reasonable diligence in prepury under the laws of the Sta 8/9/6 By DATE By DATE By By	ste of California that the fo	SIGNATURE SIGNATURE FURE OF CONTROLLING OF	OF TREASURER OR ASSISTANT	TREASURER R STATE MEASURE PROPONENT R STATE MEASURE PROPONENT		ue and compl	ete. I certify under

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