

**Recipient Committee
Campaign Statement
Cover Page**

Date Stamp 17 FEB 2017 10:41	CALIFORNIA FORM 460
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	For Official Use Only

Statement covers period from 07/01/2016 through 12/31/2016	Date of Election if applicable (Month, Day, Year)
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1. Type of Recipient Committee

Officeholder, Candidate Controlled Committee
 State Candidate Election Committee
 Recall
 General Purpose Committee
 Sponsored
 Small Contributor Committee
 Political Party/Central Committee

Primarily Formed Ballot Measure Committee
 Controlled
 Sponsored
 Primarily Formed Candidate/Officeholder Committee

2. Type of Statement

Pre-election Statement
 Semi-Annual Statement
 Termination Statement
 Amendment

Quarterly Statement
 Special Odd-Year Statement
 Supplemental Pre-election Statement - Attach Form 495

3. Committee Information

I.D. Number 1373698

COMMITTEE NAME
Heilman for City Council 2015

STREET ADDRESS (NO PO BOX)
1155 La Cienega # 1202

CITY STATE ZIP CODE AREA CODE/PHONE
West Hollywood CA 90069 310/657-0400

MAILING ADDRESS (IF DIFFERENT)

CITY STATE ZIP CODE

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER
John Heilman

STREET ADDRESS
1155 La Cienega # 1202

CITY STATE ZIP CODE AREA CODE/PHONE
West Hollywood CA 310 657-0400

NAME OF ASSISTANT TREASURER, IF ANY

STREET 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 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 2/1/17 By John Heilman
SIGNATURE OF TREASURER OR ASSISTANT TREASURER

Executed on 2/1/17 By John Heilman
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT OR RESPONSIBLE OFFICER OF SPONSOR

Executed on _____ By _____
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

Executed on _____ By _____
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

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

**CALIFORNIA
FORM 460**

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Statement covers period
from 07/01/2016
through 12/31/2016

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

John Heilman

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

City Council Member City of West Hollywood

RESIDENTIAL/BUSINESS ADDRESS (NO P.O. BOX) CITY STATE ZIP
1155 La Cienega Blvd N 1202 Encino CA 91436

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
John Heilman for West Hollywood City Council 2017 1387219

NAME OF TREASURER CONTROLLED COMMITTEE?
Jane Leiderman YES NO

COMMITTEE STREET ADDRESS (NO P.O. BOX)
16633 Ventura Blvd # 1008

CITY STATE ZIP CODE AREA CODE/PHONE
Encino CA 91436 323/655-4065

COMMITTEE NAME I.D. NUMBER

NAME OF TREASURER CONTROLLED COMMITTEE?
 YES NO

COMMITTEE 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

SUPPORT
 OPPOSE

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

NAME OF OFFICEHOLDER OR 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

SUPPORT
 OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD

SUPPORT
 OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD

SUPPORT
 OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD

SUPPORT
 OPPOSE

**Campaign Disclosure Statement
Summary Page**

Statement covers period		CALIFORNIA FORM 460
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through	12/31/2016	Page 3 of 6

NAME OF CANDIDATE: Heilman for City Council 2015

ID NUMBER
1373698

	Column A TOTAL CASH RECEIPTS (SCHEDULES A, B, C)	Column B CALENDAR YEAR TOTAL RECEIPTS
Contributions Received		
1. Monetary Contributions Schedule A, Line 1	\$ 0.00	\$ 263.52
2. Loans Received Schedule A, Line 2	0.00	4,100.00
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ 0.00	\$ 4,363.52
4. Nonmonetary Contributions Schedule C, Line 3	0.00	0.00
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$ 0.00	\$ 4,363.52

**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	\$	\$

	Column A	Column B
Expenditures Made		
6. Payments Made Schedule E, Line 4	\$ 0.00	\$ 0.00
7. Loans Made Schedule E, Line 5	0.00	0.00
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ 0.00	\$ 0.00
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	0.00	2,500.00
10. Nonmonetary Adjustment Schedule F, Line 4	0.00	0.00
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$ 0.00	\$ 2,500.00

**Expenditure Limit Summary
for State Candidates**

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

_____ \$ _____
_____ \$ _____

* Amounts in this Section may be different from amounts reported in Column B.

Current Cash Statement	
12. Beginning Cash Balance See Also Summary Page, Line 1E	\$ 263.52
13. Cash Receipts Column A, Line 5 above	0.00
14. Miscellaneous Increases to Cash Schedule I, Line 1	1,523.18
15. Cash Payments Column A, Line 6 above	0.00
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ 1,786.70
17. LOAN GUARANTEES RECEIVED Schedule G, Part 2	\$ 0.00

Cash Equivalents and Outstanding Debts	
18. Cash Equivalents	\$ 0.00
19. Outstanding Debts Add Lines 2 + Line 9 in Column B above	\$ 6,600.00

**Schedule B - Part 1
Loans Received**

Statement covers period
from 07/01/2016
through 12/31/2016

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CANDIDATE: Heilman for City Council 2015

FORM NUMBER
1373698

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER	IF INDIVIDUAL, OCCUPATION & EMPLOYER IF COMMITTEE, ID NUMBER	(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 16633 Ventura Blvd # 1008 Encino, CA 91436 Contributor Code: IND		4,100.00		<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN	4100.00 DUE DATE / /	0.00 INTEREST RATE 0.00 %	4,100.00 DATE INCURRED 09/02/2014	CALENDAR YEAR 0 PER ELECTION **

SUBTOTALS \$	(b) 0.00	(c) 0.00	(d) 4,100.00	(e) 0.00	
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Schedule B Summary

- 1. Loans received this period
(Total Column (b) plus unitemized loans of less than \$100.) \$ 0.00
- 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 \$** 0.00
Enter the net here and on the Summary Page, Column A, Line 2.

** Contributor Codes
IND - Individual
COM - Recipient Committee (other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

**Schedule F
Accrued Expenses (Unpaid Bills)**

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NAME OF FILER Heilman for City Council 2015		ID NUMBER 1373698

CODES: If one of the following 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 production costs |
| FIL candidate filing / ballot fees | PHO phone banks | TRC candidate travel, lodging and meals |
| FND fundraising expenses | POL polling and survey research | TRS staff/spouse travel, lodging and meals |
| IND independent expenditures supporting/opposing others | 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 CREDITOR	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
SG&A Campaigns 600 Playhouse Alley #504 Pasadena, CA 91101	CNS	2,500.00	0.00	0.00	2,500.00
SUBTOTALS \$		2,500.00	\$ 0.00	\$ 0.00	\$ 2,500.00

Schedule F Summary

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.) **INCURRED TOTALS \$** 0.00
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) **PAID TOTALS \$** 0.00
- Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, column A, Line 9.) **NET \$** 0.00

Schedule I
Miscellaneous Increases to Cash

Statement covers period
from 07/01/2016
through 12/31/2016

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OFFICER Heilman for City Council 2015

ID NUMBER
1373698

DATE RECEIVED	NAME AND ADDRESS OF PAYEE	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
11/28/2016	Internal Revenue Services Ogden, OR	Refund of Overpayment	1,514.60

SUBTOTAL \$ 1,514.60

Schedule I Summary

1. Itemized increases to cash this period	\$ 1,514.60
2. Unitemized payments made this period of under \$100	\$ 8.58
3. Total interest received this period on loans made to others. (Schedule H, Column (e).)	\$ 0.00
4. Total miscellaneous increases to cash this period. Total to Summary Page, Line 14	TOTAL \$ 1,523.18