**COVER PAGE Recipient Committee CALIFORNIA FORM Campaign Statement Cover Page** Date of Election if applicable Page 1 of 6 Statement covers period JAN 30 PM 12: 12 07/01/2018 For Official Use Only DEELCE OF THE CITY CLERK through 12/31/2018 (Month, Day, Year) 2. Type of Statement 1. Type of Recipient Committee Pre-election Statement Quarterly Statement Officeholder, Candidate Controlled Committee Primarily Formed Ballot Measure Semi-Annual Statement Special Odd-Year Statement Committee O State Candidate Election Committee **Termination Statement** Supplemental Pre-election ○ Recall Controlled Statement - Attach Form 495 Sponsored Amendment General Purpose Committee Sponsored Primarily Formed Candidate/ Small Contributor Committee Officeholder Committee Political Party/Central Committee I.D. Number 3. Committee Information 1376237 Treasurer(s) COMMITTTEE NAME NAME OF TREASURER John Heilman for City Council 2015 John Heilman STREET ADDRESS 1155 La Cienega # 1202 STREET ADDRESS (NO PO BOX) CITY STATE ZIP CODE AREA CODE/PHONE 16633 Ventura Blvd # 1008 West Hollywood CA 90069 310/657-0400 CITY ZIP CODE AREA CODE/PHONE NAME OF ASSISTANT TREASURER, IF ANY Encino 91436 310/657-0400 MAILING ADDRESS (IF DIFFERENT) STREET ADDRESS CITY STATE ZIP CODE CITY ZIP CODE AREA CODE/PHONE OPTIONAL: FAX / E-MAIL ADDRESS 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 GNATURE OF TREASURER OR ASSISTANT TREASURER Executed on NDIDATE, STATE MEASURE PROPONENT OR RESPONSIBLE OFFICER OF SPONSOR Executed on 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

COVER PA	GE - PART 2
CALIFORNIA FORM	460

Page

Statement covers period om 07/01/2018

2 of 6

			through 12/31/20	18	
. Officeholder or Candidate Controlled Committ	ee	6. Primarily Formed Ball	ot Measure Committe	ee	
NAME OF OFFICEHOLDER OR CANDIDATE  John Heilman		NAME OF BALLOT MEASUR			
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT City Council Member West Hollywood	CT NUMBER IF APPLICABLE)	BÄLLOT NO. OR LETTER	JURISDICTION		SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)  1155 La Cienega # 1201 Wes	CITY STATE ZIP st Hollywood CA 90069	Identify the controlling	· · · · · · · · · · · · · · · · · · ·		oponent, if any.
Related Committees Not Included in this State not included in this statement that are controlled by you receive contributions or make expenditures on behalf	or are primarily formed to f your candidacy.	OFFICE SOUGHT OR HELD		DISTRICT	NO. IF ANY
COMMITTEE NAME John Heilman for West Hollywood City Council 2017	I.D. NUMBER 1387219	7. Primarily Formed Can			
NAME OF TREASURER Jane Leiderman  COMMITTEE STREET ADDRESS (NO P.O. BOX)  16633 Ventura Blvd # 1008	CONTROLLED COMMITTEE? YES NO	List names of officeholder NAME OF OFFICEHOLDER (		on this committee is pri	SUPPORT
CITY STATE Encino CA	ZIP CODE AREA CODE/PHONE 91436 323/655-4065	NAME OF OFFICEHOLDER (	PR CANDIDATE OF	FICE SOUGHT OR HELD	OPPOSE
COMMITTEE NAME Heilman for CIty Council 2015	LD. NUMBER 1373698				SUPPORT OPPOSE
NAME OF TREASURER John Heilman  COMMITTEE STREET ADDRESS (NO P.O. BOX)  1155 La Cienega # 1202	CONTROLLED COMMITTEE ? YES NO	NAME OF OFFICEHOLDER (	PR CANDIDATE OFF	FICE SOUGHT OR HELD	SUPPORT OPPOSE
CITY STATE West Hollywood CA	ZIP CODE AREA CODE/PHONE 90069 310/657-0400	NAME OF OFFICEHOLDER (	OR CANDIDATE OFF	FICE SOUGHT OR HELD	SUPPORT OPPOSE

**COVER PAGE - PART 2** 

### **Recipient Committee CALIFORNIA FORM Campaign Statement** Cover Page - Part 2 (Continuation Page) 3 of 6 Page Statement covers period 07/01/2018 through 12/31/2018 NAME OF FILER JOHN HEILMAN FOR CITY COUNCIL 2015 I.D. NUMBER 1376237 5. Officeholder or Candidate Controlled Committee - Related Committees Not Included in this Statement

COMMITTEE NAME Committee to Elect John Heilman for City Council 2007		***************************************	I.D. NUMBER 841705
NAME OF TREASURER  John Heilman			CONTROLLED COMMITTEE ?
COMMITTEE STREET ADDRESS (NO P.O. BOX)  1155 La Cienega # 1202			
спү	STATE	ZIP CODE	AREA CODE / PHONE
West Hollywood	CA	90069	310/657-0400

# **Campaign Disclosure Statement Summary Page**

NAME OF FILER John Heilman for City Council 2015

1376237

Contributions Received		Column A		Column B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates
1. Monetary Contributions	\$	(FROM ATTACHED SCHEDULES)  0.00	\$	0.00	Running in Both the State Primary and General Elections.
2. Loans Received		0.00	·	11,000.00	1/1 through 6/30 7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS	\$	0.00	\$	11,000.00	20. Contributions Received \$ \$
4. Nonmonetary Contributions		0.00		0.00	21. Expenditures
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	0.00	\$	11,000.00	Made \$ \$
Expenditures Made					
6. Payments MadeSchedule E, Line 4	\$	84.00	\$	706.66	Expenditure Limit Summary
7. Loans Made	_	0.00		0.00	for State Candidates
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	84.00	\$	706.66	22. Cumulative Expenditures Made *
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3		0.00		0.00	( If Subject to Voluntary Expenditure Limits)
10. Nonmonetary Adjustment		0.00		0.00	
11. TOTAL EXPENDITURES MADE	\$ <u></u>	84.00	\$	706.66	
Current Cash Statement  12. Beginning Cash Balance	\$	7,893.81			\$
13. Cash Receipts		0.00			
14. Miscellaneous Increases to CashSchedule I, Line 4		0.00			<ul> <li>Amounts in this Section may be different from amounts reported in Column B.</li> </ul>
15. Cash Payments		84.00			
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	7,809.81			
17. LOAN GUARANTEES RECEIVED	\$	0.00			
Cash Equivalents and Outstanding Debts					
18. Cash Equivalents	\$	0.00			
19. Outstanding Debts Add Lines 2 + Line 9 in Column 8 above	\$	11,000.00			FPPC Form 460 -(JAN/201 State of California

Schedule B - Part 1 Loans Received

Statem	ent covers period	CALIFO	
from	07/01/2018	FOR	M TOO
through _	12/31/2018	Page	5 of 6
		I.D. NUME	BER

NAME OF FILER John Heilman for City Council 2015

1376237

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	Professor			PAID				CALENDAR YEAR
		11,000.00			11000.00	0.00	11,000.00	0
1155 La Cienega # 1201				FORGIVEN				PER ELECTION **
West Hollywood, CA 90069	Southwestern Law School				DUE DATE	INTEREST RATE	DATE INCURRED	1
Contributor Code: IND					/ /	0.00 %	03/12/2015	

SUBTOTALS \$	(b) 0.00	(c) 0.00	(d) 11,000.00	(e) 0.0	
Schedule B Summary  1. Loans received this period    (Total Column (b) plus unitemized loans of less than \$100.)  2. Loans paid or forgiven this period    (Total Column (c) plus loans under \$100 paid or forgiven.)    (Include loans paid by a third party that are also itemized on Schedule A.)			\$	0.00	** Contributor Codes IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other PTY - Political Party SCC - Small Contributor Committee
3. Net change this period. (Subtract Line 2 from Line 1.)		··· NET	*	0.00	FPPC Form 460 -(JAN/2016)

## Schedule E **Payments Made**

**CALIFORNIA** Statement covers period **FORM** 07/01/2018 from 12/31/2018 6 of 6 Page through I.D. NUMBER 1376237

NAME OF FILER John Heilman for City Council 2015

**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 TEL t.v. or cable production costs CVC civic donations PET petition circulating FIL candidate filing / ballot fees TRC candidate travel, lodging and meals PHO phone banks

TRS staff/spouse travel, lodging and meals FND fundraising expenses POL polling and survey research 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)

_	

SUBTOTAL	\$	0.00
Schedule E Summary		
1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$	0.00
2. Unitemized payments made this period of under \$100	\$	84.00
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 Line 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	. \$	84.00