

Candidate Intention Statement

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CANDIDATE INTENTION STATEMENT

CALIFORNIA FORM 501

For Official Use Only

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Check One: [X] Initial [] Amendment (Explain)

OFFICE OF THE CITY CLERK

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) Heilman, John W DAYTIME TELEPHONE NUMBER (310) 657-0400 FAX NUMBER (optional) E-MAIL (optional) STREET ADDRESS 1155 La Cienega #1202 west Holly wood CA 90069 CITY STATE ZIP CODE OFFICE SOUGHT (POSITION TITLE) Councilmember AGENCY NAME City of West Hollywood DISTRICT NUMBER, if applicable. NON-PARTISAN PARTY: OFFICE JURISDICTION [X] City [] County [] Multi-County: (Name of Multi-County Jurisdiction) 2011 (Year of Election)

2. State Candidate Expenditure Limit Statement:

(CalPERS candidates, judges, judicial candidates, and candidates for local offices are not required to complete Part 2.)

Primary/general election Special/runoff election

(Check one box)

[] I accept the voluntary expenditure ceiling for the election stated above.

[] I do not accept the voluntary expenditure ceiling for the election stated above.

Amendment:

[] I did not exceed the expenditure ceiling in the primary or special election held on: and I accept the voluntary expenditure ceiling for the general or special run-off election.

(Mark if applicable)

[] On I contributed personal funds in excess of the expenditure ceiling for the election stated above.

3. Verification:

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 7/6/08 (month, day, year)

Signature John Heilman (Candidate)