1. Committee/Filer Information

COMMITTEE/FILER'S NAME
West Hollywood Chamber of Commerce MENO PAC (AKA MENO PAC)

STREET ADDRESS (NO P.O. BOX)
8272 Santa Monica Blvd.

CITY STATE ZIP CODE AREA CODE/PHONE
West Hollywood CA 90046 (323) 650-2688

OPTIONAL: FAX/E-MAIL ADDRESS

Treasurer (If recipient committee)

NAME OF TREASURER
Keith Kaplan

MAILING ADDRESS
8424-A Santa Monica Blvd., #660

CITY STATE ZIP CODE AREA CODE/PHONE
West Hollywood CA 90046 (323) 651-1400

OPTIONAL: FAX/E-MAIL ADDRESS

2. Name of Candidate or Measure Supported or Opposed

NAME OF CANDIDATE
Joe Guardarrama

NAME OF BALLOT MEASURE

OFFICE SOUGHT OR HELD AND DISTRICT, IF APPLICABLE
County Counsel: City of West Hollywood

BALLOT NO./LETTER JURISDICTION

CHECK ONE
SUPPORT OPPOSE
X

3. Independent Expenditures Made

DATE NAME AND ADDRESS OF PAYEE DESCRIPTION OF EXPENDITURE AMOUNT CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)

02/13/2015 The House of Printing, Inc. Mailer for 02/13/15 $552.19 $1,907.64
3316 E. Colorado Blvd. Pasadena, CA 91107

02/13/2015 Voter Newsletter Mailer for 02/13/15 $500.00 $1,907.64
25021 Ventura Blvd., #530 Sherman Oaks, CA 91403

02/13/2015 Star Mailing Service, Inc. Mailer for 02/13/15 $755.45 $1,907.64
3050 Rosslyn St. Los Angeles, CA 90005

FPPC Form 465 (June/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Supplemental Independent Expenditure Report

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
West Hollywood Chamber of Commerce WEHO PAC [AKA WEHO PAC]

4. Summary
1. Total independent expenditures of $100 or more made this period (Part 3) .......................................................... $ 1,907.64
2. Total independent expenditures under $100 made this period (Not itemized) .......................................................... $ 0.00
3. Total independent expenditures made this period (Add Lines 1 + 2) ..................................................................................... TOTAL $ 1,907.64

5. Filing Officers Enter the name and address of each filing officer with whom the filer's most recent campaign statements (Form 450, 460 or 461) have been filed.

1) NAME OF FILING OFFICER
Secretary of State
ADDRESS (NO. AND STREET) 1500 11th Street, Room 495
CITY Sacramento
STATE CA
ZIP CODE 95814

2) NAME OF FILING OFFICER
San Francisco Department of Elections
ADDRESS (NO. AND STREET) 1 Dr. Carlton Goodlett Place, #14
CITY San Francisco
STATE CA
ZIP CODE 94102

3) NAME OF FILING OFFICER
Los Angeles Registrar of Voters
ADDRESS (NO. AND STREET) 12400 Imperial Highway
CITY Norwalk
STATE CA
ZIP CODE 90650

4) NAME OF FILING OFFICER

6. Verification
I certify that the "independent expenditure(s)" disclosed in this statement were not "made at the behest of" the candidate or committee that benefited from the expenditure(s) as those terms are defined in Government Code Section 82031 and FPPC Regulation 13225.7. 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 02/25/2015

By [Signature]
SIGNATURE OF FILER, TREASURER OR ASSISTANT TREASURER

By [Signature]
SIGNATURE OF CONTROLLING OFFICERHOLDER, CANDIDATE, STATE MEASURE PROPONENT, OR RESPONSIBLE OFFICER OF SPONSOR

By [Signature]
SIGNATURE OF CONTROLLING OFFICERHOLDER, CANDIDATE, STATE MEASURE PROPONENT

By [Signature]
SIGNATURE OF CONTROLLING OFFICERHOLDER, CANDIDATE, STATE MEASURE PROPONENT

FPPC Form 465 (June/99)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)