

**496 Independent Expenditure Report**

Type or print in ink.  
Amounts may be rounded to whole dollars.

RECEIVED  
CITY OF WEST HOLLYWOOD  
496 INDEPENDENT EXPENDITURE REPORT

<b>NAME OF FILER</b> Friends of West Hollywood, A Committee to Elect John D'Amico, John Heilman, Lindsey Horvath & Joseph Guardarrama to the West Hollywood		<b>Date of This Filing</b> 02/27/2015	Date Stamp 15 FEB 27 PM 3:5 OFFICE OF THE CITY CLERK	CALIFORNIA FORM <b>496</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (562) 983-0815	<b>I.D. NUMBER (if applicable)</b> 1374259	<b>Report No.</b> 2-27-15 <i>496</i>		
<b>STREET ADDRESS</b> 8149 Santa Monica Blvd., #396		<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)		
<b>CITY</b> West Hollywood	<b>STATE</b> CA	<b>ZIP CODE</b> 90046	<b>No. of Pages</b> 2	

**1. List Only One Candidate or Ballot Measure**

<b>NAME OF CANDIDATE SUPPORTED OR OPPOSED</b> John Heilman				<b>NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED</b>			
<b>OFFICE SOUGHT OR HELD</b> City Council Member: City of West Hollywood	<b>DISTRICT NO.</b>	<b>SUPPORT</b> X	<b>OPPOSE</b>	<b>BALLOT NO./LETTER</b>	<b>JURISDICTION</b>	<b>SUPPORT</b>	<b>OPPOSE</b>

**2. Independent Expenditures Made** Attach additional information on appropriately labeled continuation sheets.

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
02/26/2015	Robo calls Cumulative to date total \$36612.26	800.00
02/26/2015	Mailer Cumulative to date total \$36612.26	2,480.80

Reason for Amendment: \_\_\_\_\_

# 496 Independent Expenditure Report

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<b>CALIFORNIA</b> <b>FORM</b>	<b>496</b>
<small>I.D. NUMBER (if applicable)</small>	
1374259	

NAME OF FILER  
 Friends of West Hollywood, A Committee to Elect John D'Amico, John Heilman, Lindsey Horvath & Joseph Guardarrama to the West Hollywood City Council 2015

### 3. Contributions of \$100 or More Received\*

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>	CONTRIBUTOR CODE **	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT RECEIVED	INTEREST RATES
02/26/2015	BMB Commercial Corp. 8600 Melrose Ave. West Hollywood, CA 90069	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		10,000.00	If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%

\*Major donor and independent expenditure committees that do not receive contributions are not required to complete Part 3.

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

FPPC Form 496 (March/2011)  
 FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)