Recipient Committee  
Campaign Statement  
Cover Page  
(Government Code Sections 84200-84216.5)

Type or print in ink.  

Statement covers period  

from 01/01/2015  

through 04/19/2015  

Date of election if applicable (Month, Day, Year):  

06/02/2015  

See Instructions on Reverse

1. Type of Recipient Committee:  All Committees – Complete Parts 1, 2, 3, and 4.  

☐ Officerholder, Candidate Controlled Committee  
☐ State Candidate Election Committee  
☐ Recall  
☐ Primarily Formed Ballot Measure Committee  
☐ Controlled  
☐ Sponsored  
☐ General Purpose Committee  
☐ Sponsored  
☐ Small Contributor Committee  
☐ Political Party/Central Committee  
☐ Primarily Formed Candidate/Officerholder Committee  
☐ Also Complete Part 7

2. Type of Statement:  

☐ Pre-election Statement  
☐ Semi-annual Statement  
☐ Termination Statement  
☐ Amendment (Explain below)

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

3. Committee Information:  

I.D. NUMBER:  

1376375

COMMITTEE NAME (OR CANDIDATE’S NAME IF NO COMMITTEE)  

WeHo United for John Heilman for City Council 2015

STREET ADDRESS (NO P.O. BOX)  

8999 Beverly Blvd.

CITY  

West Hollywood  

STATE  

CA  

ZIP CODE  

90048  

AREA CODE/PHONE  

(323) 983-0815

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX  

525 E. Seaside Way, #101-C

CITY  

Long Beach  

STATE  

CA  

ZIP CODE  

90802  

AREA CODE/PHONE  

(562) 983-0815

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX  

525 E. Seaside Way, #101-C

CITY  

Long Beach  

STATE  

CA  

ZIP CODE  

90802  

AREA CODE/PHONE  

(562) 983-0815

OPTIONAL: FAX / E-MAIL ADDRESS  

(562) 983-0817 / gary@crummittcandidraeassociate.com

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 and in the attached schedules 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 04/21/2015  

Signature of Treasurer or Assistant Treasurer

Executed on  

Date

Signature of Controlling Officerholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

Executed on  

Date

Signature of Controlling Officerholder, Candidate, State Measure Proponent

Executed on  

Date

Signature of Controlling Officerholder, Candidate, State Measure Proponent

www.netfile.com
5. Officeholder or Candidate Controlled Committee

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)</th>
<th>CITY</th>
<th>STATE</th>
<th>ZIP</th>
</tr>
</thead>
</table>

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.

<table>
<thead>
<tr>
<th>COMMITTEE NAME</th>
<th>I.D. NUMBER</th>
</tr>
</thead>
</table>

NAME OF TREASURER:  

<table>
<thead>
<tr>
<th>CONTROLLED COMMITTEE?</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] YES  [ ] NO</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>COMMITTEE ADDRESS</th>
<th>STREET ADDRESS (NO. P.O. BOX)</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>CITY</th>
<th>STATE</th>
<th>ZIP CODE</th>
<th>AREA CODE/PHONE</th>
</tr>
</thead>
</table>

6. Primarily Formed Ballot Measure Committee

<table>
<thead>
<tr>
<th>NAME OF BALLOT MEASURE</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>BALLOT NO. OR LETTER</th>
<th>JURISDICTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] SUPPORT  [ ] OPPOSE</td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER, CANDIDATE, OR PROponent</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>OFFICE SOUGHT OR HELD</th>
<th>DISTRICT NO. IF ANY</th>
</tr>
</thead>
</table>

7. Primarily Formed Candidate/Officeholder Committee: List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th>OFFICE SOUGHT OR HELD</th>
<th>[ ] SUPPORT  [ ] OPPOSE</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th>OFFICE SOUGHT OR HELD</th>
<th>[ ] SUPPORT  [ ] OPPOSE</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th>OFFICE SOUGHT OR HELD</th>
<th>[ ] SUPPORT  [ ] OPPOSE</th>
</tr>
</thead>
</table>

Attach continuation sheets if necessary
# Campaign Disclosure Statement

## Summary Page

- **Amounts may be rounded to whole dollars.**
- **Statement covers period from** 01/01/2015 **through** 04/10/2015

### Contributions Received

<table>
<thead>
<tr>
<th>1. Monetary Contributions</th>
<th>Schedule A, Line 3</th>
<th>$36,000.00</th>
<th>$35,000.00</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Loans Received</td>
<td>Schedule B, Line 3</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>3. SUBTOTAL CASH CONTRIBUTIONS</td>
<td>Add Lines 1 + 2</td>
<td>$36,000.00</td>
<td>$35,000.00</td>
</tr>
<tr>
<td>4. Nonmonetary Contributions</td>
<td>Schedule C, Line 3</td>
<td>6,012.00</td>
<td>5,012.00</td>
</tr>
<tr>
<td>5. TOTAL CONTRIBUTIONS RECEIVED</td>
<td>Add Lines 3 + 4</td>
<td>$40,012.00</td>
<td>$40,012.00</td>
</tr>
</tbody>
</table>

### Expenditures Made

<table>
<thead>
<tr>
<th>6. Payments Made</th>
<th>Schedule E, Line 4</th>
<th>$8,855.64</th>
<th>$8,855.64</th>
</tr>
</thead>
<tbody>
<tr>
<td>7. Loans Made</td>
<td>Schedule M, Line 3</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>8. SUBTOTAL CASH PAYMENTS</td>
<td>Add Lines 5 + 6 + 7</td>
<td>$8,855.64</td>
<td>$8,855.64</td>
</tr>
<tr>
<td>9. Accrued Expenses (Unpaid Bills)</td>
<td>Schedule F, Line 3</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>10. Nonmonetary Adjustment</td>
<td>Schedule C, Line 3</td>
<td>5,012.00</td>
<td>5,012.00</td>
</tr>
<tr>
<td>11. TOTAL EXPENDITURES MADE</td>
<td>Add Lines 9 + 9 + 10</td>
<td>$13,867.64</td>
<td>$13,867.64</td>
</tr>
</tbody>
</table>

### Current Cash Statement

<table>
<thead>
<tr>
<th>12. Beginning Cash Balance</th>
<th>Previous Summary Page, Line 15</th>
<th>$0.00</th>
</tr>
</thead>
<tbody>
<tr>
<td>13. Cash Receipts</td>
<td>Column A, Line 3 above</td>
<td>35,000.00</td>
</tr>
<tr>
<td>14. Miscellaneous Increases to Cash</td>
<td>Schedule i, Line 4</td>
<td>0.00</td>
</tr>
<tr>
<td>15. Cash Payments</td>
<td>Column A, Line 8 above</td>
<td>8,855.64</td>
</tr>
<tr>
<td>16. ENDING CASH BALANCE</td>
<td>Add Lines 12 + 13 + 14, then subtract Line 15</td>
<td>$26,144.36</td>
</tr>
</tbody>
</table>

### Cash Equivalents and Outstanding Debts

<table>
<thead>
<tr>
<th>18. Cash Equivalents</th>
<th>$0.00</th>
</tr>
</thead>
<tbody>
<tr>
<td>19. Outstanding Debts</td>
<td>Add Line 2 + Line 9 in Column B above</td>
</tr>
</tbody>
</table>

---

**Calendar Year Summary for Candidates Running in Both the State Primary and General Elections**

- **Contributions Received**
- **Expenditures Made**

**Expenditure Limit Summary for State Candidates**

- **Cumulative Expenditures Made**
- **Date of Election (mm/dd/yyyy)**
- **Total to Date**

---

FPPC Form 460 (January/05)

FPPC Toll-Free Helpline: 866/ASK-FPPC (855/275-3772)
### Schedule A
Monetary Contributions Received

**Statement covers period**

- **from:** 01/01/2015
- **through:** 04/18/2015

**California Form 460**

<table>
<thead>
<tr>
<th>Date Received</th>
<th>Full Name, Street Address and Zip Code of Contributor</th>
<th>Contributor Code</th>
<th>If an Individual, Enter Occupation and Employer (If Self-Employed, Enter Name of Business)</th>
<th>Amount Received This Period</th>
<th>Cumulative to Date Calendar Year (Jan. 1 - Dec. 31)</th>
<th>Per Election To Date (If Required)</th>
</tr>
</thead>
<tbody>
<tr>
<td>04/13/2015</td>
<td>Ace Outdoor Advertising LLC 2274 S. Technology Dr. West Valley, UT 84119</td>
<td>☑ IND  ☑ COM  ☑ OTH  ☑ PTY  ☑ SCC</td>
<td></td>
<td>5,000.00</td>
<td>5,000.00</td>
<td></td>
</tr>
<tr>
<td>04/03/2015</td>
<td>Mani Brothers LLC 9200 W. Sunset Blvd., #555 West Hollywood, CA 90069</td>
<td>☑ IND  ☑ COM  ☑ OTH  ☑ PTY  ☑ SCC</td>
<td></td>
<td>15,000.00</td>
<td>15,000.00</td>
<td></td>
</tr>
<tr>
<td>04/10/2015</td>
<td>Venice Investments 1526 South Broadway Los Angeles, CA 90015</td>
<td>☑ IND  ☑ COM  ☑ OTH  ☑ PTY  ☑ SCC</td>
<td></td>
<td>15,000.00</td>
<td>15,000.00</td>
<td></td>
</tr>
</tbody>
</table>

**SUBTOTAL $** 35,000.00

---

**Schedule A Summary**

1. Amount received this period – itemized monetary contributions.
   (Include all Schedule A subtotals.) ........................................ $ 35,000.00

2. Amount received this period – unitemized monetary contributions of less than $100 ........................................ $ 0.00

3. Total monetary contributions received this period.
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ........................................ TOTAL $ 35,000.00

---

*Contributor Codes:*
- IND – Individual
- COM – Recipient Committee
- OTH – Other (e.g., business entity)
- PTY – Political Party
- SCC – Small Contributors Committee

**www.netfile.com**
### Schedule C
#### Nonmonetary Contributions Received

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

**Statement covers period**

<table>
<thead>
<tr>
<th>From</th>
<th>Through</th>
</tr>
</thead>
<tbody>
<tr>
<td>02/01/2015</td>
<td>04/18/2015</td>
</tr>
</tbody>
</table>

**NAME OF FILER**

Wells United for John Hennigan for City Council 2015

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER ID. NUMBER)</th>
<th>CONTRIBUTOR CODE *</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER OR SELF-EMPLOYED ENTER NAME OF BUSINESS</th>
<th>DESCRIPTION OF GOODS OR SERVICES</th>
<th>AMOUNT/FAIR MARKET VALUE</th>
<th>CUMULATIVE TO DATE (JAN 1-DEC 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
<tbody>
<tr>
<td>04/14/2015</td>
<td>Townscape Management, Inc. 8899 Beverly Blvd. West Hollywood, CA 90046</td>
<td></td>
<td></td>
<td>Office Space</td>
<td>5,012.00</td>
<td>5,012.00</td>
<td></td>
</tr>
</tbody>
</table>

**Attach additional information on appropriately labeled continuation sheets.**

**SUBTOTAL $** 5,012.00

---

**Schedule C Summary**

1. Amount received this period – itemized nonmonetary contributions.
   (Include all Schedule C subtotals) .................................................. $ 5,012.00

2. Amount received this period – unitemized nonmonetary contributions of less than $100 ........................................ $ 0.00

3. Total nonmonetary contributions received this period.
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) .................................. TOTAL $ 5,012.00

---

*Contributor Codes*

- IND - Individual
- COM - Recipient Committee (other than PTY or SCC)
- OTH - Other (e.g., business entity)
- PTY - Political Party
- SCC - Small Contributor Committee

---

FPPC Form 460 (January 05)
FPPC Toll-Free Help Line: 866/ASK-FPPC (866/275-3772)

www.netfile.com
### Schedule D

**Summary of Expenditures**

**Supporting/Opposing Other Candidates, Measures and Committees**

**See Instructions on Reverse**

**NAME OF FILER**

WeHo United for John Heilman for City Council 2015

<table>
<thead>
<tr>
<th>DATE</th>
<th>NAME OF CANDIDATE, OFFICE, AND DISTRICT OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE</th>
<th>TYPE OF PAYMENT</th>
<th>DESCRIPTION (IF REQUIRED)</th>
<th>AMOUNT THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
<tbody>
<tr>
<td>04/09/2015</td>
<td>[Name] City Council Member City of West Hollywood</td>
<td>☑ Monetary</td>
<td>Voter Lists</td>
<td>3,450.00</td>
<td>8,470.80</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>□ Nonmonetary</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>☐ Independent</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>☑ Support</td>
<td></td>
<td>☐ Oppose</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>04/11/2015</td>
<td>[Name] City Council Member City of West Hollywood</td>
<td>☐ Monetary</td>
<td>Insurance</td>
<td>770.80</td>
<td>8,470.80</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>☐ Nonmonetary</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>☐ Independent</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>☑ Support</td>
<td></td>
<td>☐ Oppose</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>04/15/2015</td>
<td>[Name] City Council Member City of West Hollywood</td>
<td>☐ Monetary</td>
<td>Consulting</td>
<td>3,750.00</td>
<td>8,470.80</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>☐ Nonmonetary</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>☐ Independent</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>☑ Support</td>
<td></td>
<td>☐ Oppose</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Subtotal** $5,970.80

### Schedule D Summary

1. Contributions and independent expenditures made this period of $100 or more. (Include all Schedule D subtotals.) ........................................... $8,470.80
2. Unitemized contributions and independent expenditures made this period of under $100 ........................................................................ $ 0.00
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) .......................... TOTAL $8,470.80

FFPC Form 460 (Jan/05)

FFPC Toll-Free Helpline: 866/ASK-FPPC

www.netfile.com
### Schedule D
(Continuation Sheet)
**Summary of Expenditures**
Supporting/Opposing Other Candidates, Measures and Committees

<table>
<thead>
<tr>
<th>Date</th>
<th>Name of Candidate, Office, and District, or Measure Number or Letter and Jurisdiction, or Committee</th>
<th>Type of Payment</th>
<th>Description (if Required)</th>
<th>Amount This Period</th>
<th>Cumulative to Date Calendar Year (Jan 1 - Dec 31)</th>
<th>Per Election to Date (if Required)</th>
</tr>
</thead>
<tbody>
<tr>
<td>04/15/2015</td>
<td>John Mallman City Council Member City of West Hollywood</td>
<td>Monetary</td>
<td>Consulting</td>
<td>2,500.00</td>
<td>8,470.80</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Nonmonetary</td>
<td>Contribution</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Independent</td>
<td>Expenditure</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Support</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Oppose</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**SUBTOTAL** $ 2,500.00
## Schedule E
Payments Made

**NAME OF FILER**
W&K United for John Heilman for City Council 2015

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- CROP: campaign paraphernalia/misc.
- CNS: campaign consultants
- CTB: contribution (explain nonmonetary)*
- CVC: civic donations
- FIL: candidate filing/ballot fees
- FND: fundraising events
- IND: independent expenditure supporting/opposing others (explain)*
- LEG: legal defense
- UT: campaign literature and mailings
- MBR: member communications
- MFG: meetings and appearances
- PTC: petition circulator
- PHO: phone banks
- POL: polling and survey research
- POS: postage, delivery and messenger services
- PRO: professional services (legal, accounting)
- PRT: print ads
- RAD: radio airtime and production costs
- RAD: returned contributions
- SAL: campaign workers' salaries
- TEL: TV or cable airtime and production costs
- TRC: candidate travel, lodging, and meals
- TRS: staff/personnel travel, lodging, and meals
- TSF: transfer between committees of the same candidate/organization
- VOT: voter registration
- WEB: information technology costs (internet, e-mail)

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE</th>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>Norman Chramoff</td>
<td>IND</td>
<td>Consulting supporting John Heilman for City Council</td>
<td>2,500.00</td>
</tr>
<tr>
<td>5904 Carlton Way</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Los Angeles, CA</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>90028</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>EJM Strategies</td>
<td>IND</td>
<td>Consulting supporting John Heilman for City Council</td>
<td>3,750.00</td>
</tr>
<tr>
<td>362 N. San Vicente Blvd., NC</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>West Hollywood, CA</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>90058</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>EJM Strategies</td>
<td>CPC</td>
<td></td>
<td>384.84</td>
</tr>
<tr>
<td>362 N. San Vicente Blvd., NC</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>West Hollywood, CA</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>90058</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL $** 6,634.84

---

**Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.) .................................................. $ 8,855.44
2. Unitemized payments made this period of under $100 ....................................................................................... $ 0.00
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 Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) TOTAL $ 8,855.44

---

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### Schedule E (Continuation Sheet)
#### Payments Made

*PAYMENTS TO POLITICAL COMMITTEES, POLITICAL ACTION COMMITTEES, AND POLITICAL PARTY COMMITTEES, OR INDEPENDENT EXPENDITURES RELATED TO POLITICAL PURPOSES.*

**NAME OF FILER:**
Kallab United for John Heilman for City Council 2015

**NAME AND ADDRESS OF PAYEE:**

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE</th>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
</table>
| Nanasab Insurance Services, Inc.  
625 S. Fairfax Ave  
Los Angeles, CA 90036 | IND | Office insurance supporting John Heilman for City Council | 770.00 |
| Political Data, Inc.  
17981 Imperial Hwy., #200  
Norwalk, CA 90650 | DED | Voter lists supporting John Heilman for City Council | 1,456.00 |

*Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL:** $2,226.00

FPPC Form 460 (January/05)  
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

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