# Supplemental Independent Expenditure Report

(Government Code Section 84203.5)

1. **Committee/Filer Information**
   - **ID NUMBER (If recipient committee)**: 1374259
   - **COMMITTEE/FILER'S NAME**: Friends of West Hollywood, A Committee to Elect John Heilman to the West Hollywood City Council 2015
   - **STREET ADDRESS (NO P.O. BOX)**: 8149 Santa Monica Blvd., #396
   - **CITY**: West Hollywood
   - **STATE**: CA
   - **ZIP CODE**: 90046
   - **AREA CODE/PHONE**: (310) 872-0915

2. **Treasurer (If recipient committee)**
   - **NAME OF TREASURER**: Gary Crumitt
   - **MAILING ADDRESS**: 525 E. Seaside Way, #101-C
   - **CITY**: Long Beach
   - **STATE**: CA
   - **ZIP CODE**: 90802
   - **AREA CODE/PHONE**: (562) 383-0815

3. **Name of Candidate or Measure Supported or Opposed**
   - **NAME OF CANDIDATE**: Lauren Meister
   - **OFFICE SOUGHT OR HELD AND DISTRICT, IF APPLICABLE**: City Council Member; City of West Hollywood

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

<table>
<thead>
<tr>
<th>DATE</th>
<th>NAME AND ADDRESS OF PAYEE</th>
<th>DESCRIPTION OF EXPENDITURE</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>02/23/2015</td>
<td>Ryan Press 6400 Dale St. Buena Park, CA 90621</td>
<td>Mailer</td>
<td>8,063.00</td>
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<tr>
<td>03/02/2015</td>
<td>Political Data Inc. 12501 Imperial Hwy., #200 Norwalk, CA 90650</td>
<td>Mail data files</td>
<td>207.05</td>
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</tbody>
</table>
Supplemental Independent Expenditure Report

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Friends of West Hollywood, A Committee to Elect John Heilman to the West Hollywood City Council 2015

4. Summary

1. Total independent expenditures of $100 or more made this period. (Part 3.) ......................................................... $ 8,270.05
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 $ 8,270.05

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
City of West Hollywood
ADDRESS (NO. AND STREET)
8309 Santa Monica Blvd.
CITY State ZIP CODE
West Hollywood CA 90069

3) NAME OF FILING OFFICER
ADDRESS (NO. AND STREET)

5) NAME OF FILING OFFICER
ADDRESS (NO. AND STREET)

6. Verification

I certify that the "independent expenditure(s)" disclosed in this statement were not "mace 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 13225.2. 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 hereby under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 07/30/2015 DATE

By ____________________________ SIGNATURE OF FILER, TREASURER OR ASSISTANT TREASURER

Executed on DATE

By ____________________________ SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPOSER, OR RESPONSIBLE OFFICER OF SPONSOR

Executed on DATE

By ____________________________ SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPOSER

Executed on DATE

By ____________________________ SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPOSER

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