COVER PAGE

Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

Type or print in ink.

Date Stamp
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CITY OF WEST HOLLYWOOD
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OFFICE OF THE CITY CLERK

CALIFORNIA FORM 460

Page 1 of 21

For Official Use Only

SEE INSTRUCTIONS ON REVERSE

Statement covers period
from 1/1/07
through 1/20/07

Date of election if applicable: (Month, Day, Year)
3/6/07

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

- [X] Officeholder, Candidate Controlled Committee
  - ○ State Candidate Election Committee
  - ○ Recall
  - *(Also Complete Part 5)*
- [ ] General Purpose Committee
  - ○ Sponsored
  - ○ Small Contributor Committee
  - ○ Political Party/Central Committee
- [ ] Primarily Formed Ballot Measure Committee
  - ○ Controlled
  - ○ Sponsored
  - *(Also Complete Part 6)*
- [ ] Primarily Formed Candidate/ Officeholder Committee
  - *(Also Complete Part 7)*

2. Type of Statement:

- [X] Preelection Statement
- [ ] Semi-annual Statement
- [ ] Termination Statement (Also file a Form 410 Termination)
- [ ] Amendment (Explain below)
- [ ] Quarterly Statement
- [ ] Special Odd-Year Report
- [ ] Supplemental Preelection Statement - Attach Form 495

3. Committee Information

I.D. NUMBER: 841705

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Committee to Elect John Heilman

STREET ADDRESS (NO P.O. BOX)
1155 La Cienega #1202

CITY | STATE | ZIP CODE | AREA CODE/PHONE
West Hollywood, CA 90069 310-657-0400

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

CITY | STATE | ZIP CODE | AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS
jheilman 90069@aol.com.

Treasurer(s)

NAME OF TREASURER
Tim McCracken

MAILING ADDRESS
8400 De Longpre #214

CITY | STATE | ZIP CODE | AREA CODE/PHONE
West Hollywood, CA 90069 323-650-5691

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY | STATE | ZIP CODE | AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

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 1/25/07 (Date) By Tim McCracken (Signature of Treasurer or Assistant Treasurer)

Executed on 1/25/07 (Date) By John Heilman (Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor)

Executed on _____ (Date) By _____ (Signature of Controlling Officeholder, Candidate, State Measure Proponent)

Executed on _____ (Date) By _____ (Signature of Controlling Officeholder, Candidate, State Measure Proponent)

Recipient Committee Campaign Statement Cover Page — Part 2

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA FORM **460**

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5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

John Heilman

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

West Hollywood City Council

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

1155 La Cienega #1202 West Hollywood CA 90069

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.***

COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? ☐ YES ☐ NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? ☐ YES ☐ NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER	JURISDICTION	☐ SUPPORT ☐ OPPOSE

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

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY

7. Primarily Formed Candidate/Officeholder Committee

List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	☐ SUPPORT ☐ OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	☐ SUPPORT ☐ OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	☐ SUPPORT ☐ OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	☐ SUPPORT ☐ OPPOSE

Attach continuation sheets if necessary

Campaign Disclosure Statement
Summary Page

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

SUMMARY PAGE

Statement covers period
from 1/1/07
through 1/20/07

CALIFORNIA FORM 460

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Committee to Elect John Heilman

I.D. NUMBER
841705

Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	*Schedule A, Line 3*	$ 13,850	$
2. Loans Received	*Schedule B, Line 3*	0	
3. SUBTOTAL CASH CONTRIBUTIONS	*Add Lines 1 + 2*	$ 13,850	$
4. Nonmonetary Contributions	*Schedule C, Line 3*	0	
5. TOTAL CONTRIBUTIONS RECEIVED	*Add Lines 3 + 4*	$ 13,850.	$

Expenditures Made

6. Payments Made	*Schedule E, Line 4*	$ 1836.86	$
7. Loans Made	*Schedule H, Line 3*	0	
8. SUBTOTAL CASH PAYMENTS	*Add Lines 6 + 7*	$ 1836.86	$
9. Accrued Expenses (Unpaid Bills)	*Schedule F, Line 3*	0	
10. Nonmonetary Adjustment	*Schedule C, Line 3*	0	
11. TOTAL EXPENDITURES MADE	*Add Lines 8 + 9 + 10*	$ 1836.86	$

Current Cash Statement

12. Beginning Cash Balance	*Previous Summary Page, Line 16*	$ 62,617.46
13. Cash Receipts	*Column A, Line 3 above*	13,850.00
14. Miscellaneous Increases to Cash	*Schedule I, Line 4*	0
15. Cash Payments	*Column A, Line 8 above*	1836.86
16. **ENDING CASH BALANCE**	*Add Lines 12 + 13 + 14, then subtract Line 15*	$ 74,630.60

If this is a termination statement, Line 16 must be zero.

17. LOAN GUARANTEES RECEIVED *Schedule B, Part 2* $ 0

Cash Equivalents and Outstanding Debts

18. Cash Equivalents *See instructions on reverse* $ 0

19. Outstanding Debts *Add Line 2 + Line 9 in Column B above* $ 34,200.00

outstanding loan

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

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

	1/1 through 6/30	7/1 to Date
20. Contributions Received	$	$
21. Expenditures Made	$	$

Expenditure Limit Summary for State Candidates

22. **Cumulative Expenditures Made***
(If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy)	Total to Date
__/__/__	$
__/__/__	$

*Amounts in this section may be different from amounts reported in Column B.

Schedule A
Monetary Contributions Received

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

SCHEDULE A

Statement covers period
from 1/1/07
through 1/20/07

CALIFORNIA FORM **460**

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Committee to Elect John Heilman

I.D. NUMBER
841705

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/3/07	Charles Whitehead 2021 3rd St. Santa Monica, CA 90405	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Law School Professor USC	300.00	300.00	
1/3/06	James Perriott Diane Cary 8235 Lincoln Terrace ~~West Hollywood~~, CA 90069	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Director Broadway Arts	500.00	500.00	
		☐IND ☐COM ☐OTH ☐PTY ☐SCC				
		☐IND ☐COM ☐OTH ☐PTY ☐SCC				
		☐IND ☐COM ☐OTH ☐PTY ☐SCC				
			SUBTOTAL $	800.00		

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 13,850
2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ 0
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL $** 13,850

*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

Schedule A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period
from 1/1/06
through 1/20/06

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NAME OF FILER
Committee to Elect John Heilman

I.D. NUMBER
841705

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/16/07	Kevin Norte 715 N. Genesee Los Angeles, CA 90046	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Attorney Los Angeles Superior Ct.	$200.	200.	
1/16/07	Dan Siegel 8560 Sunset Blvd. Ste 300 West Hollywood CA 90069	☒IND ☐COM ☐OTH ☐PTY ☐SCC	realtor self	$100.	100.	
1/10/07	American Advanced Auto 1020 N. Doheny Dr. # 6 West Hollywood, CA 90069	☐IND ☐COM ☒OTH ☐PTY ☐SCC		$100	$100	
1/12/07	Eric + Judith Daar 28 Ave De Azalea Rancho Palos Verdes, 90275	☒IND ☐COM ☐OTH ☐PTY ☐SCC	law school professor Whittier Law	$250	$250.	
1/8/07	E.T. Legg & Associates 11684 Ventura Blvd. #807 Studio City, CA 91604	☐IND ☐COM ☒OTH ☐PTY ☐SCC		$500	$500.	
			SUBTOTAL $	1050.00		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period
from 1/1/06
through 1/20/06

CALIFORNIA FORM 460

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NAME OF FILER
Committee to Elect John Heilman

I.D. NUMBER
841705

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/8/07	Dan Bertowitz 1110 Hacienda Pl. #102 West Hollywood, CA 90069	☒IND ☐COM ☐OTH ☐PTY ☐SCC	self writer/producer	250.	250.	
1/8/07	Madeleine Rackley 1201 Lanrabee St. #104 West Hollywood, CA 90069	☒IND ☐COM ☐OTH ☐PTY ☐SCC	senior administrator City of L.A.	250.	250.	
1/11/07	Los Angeles Patients + Caregivers 7213 Santa Monica Blvd. West Hollywood, CA 90046	☐IND ☐COM ☒OTH ☐PTY ☐SCC		500.	500.	
1/4/07	Mark Lehman 935 Westbourne Dr. #101 West Hollywood, CA 90069	☒IND ☐COM ☐OTH ☐PTY ☐SCC	attorney self	500.	500.	
1/4/07	Erik Barker 7715 Lexington Ave. West Hollywood 90069	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Branch Chief U.S. Securities + Exchange Commission	250	250	
			SUBTOTAL $	1750.00		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period
from 1/1/06
through 1/20/06

CALIFORNIA FORM **460**

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NAME OF FILER
Committee to Elect John Heilman

I.D. NUMBER
841705

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/3/07	Eric McLaughlin 170 N. Vista Street Los Angeles, CA 90036	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	associate Warner Bros.	1000.00	1000.00	
1/3/06	Terry Davis Insurance Agency 1504 W. Whittier Blvd. La Habra, CA 90631	[ ] IND [ ] COM [X] OTH [ ] PTY [ ] SCC		100.00	100.00	
1/3/07	Chris Baker 8455 Fountain #730 West Hollywood 90069	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	executive recruiter self	250.00	250.00	
1/9/06	James Kazakos 1010 Hammond St. West Hollywood CA 90069	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	retired	100.00	100.00	
1/11/07	Sunset View Plaza, LLC 2000 South Alameda Los Angeles, CA 90058	[ ] IND [ ] COM [X] OTH [ ] PTY [ ] SCC		500.00	500.00	
			SUBTOTAL $	1950.00		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

Type or print in ink.
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SCHEDULE A (CONT.)

Statement covers period
from 1/1/06
through 1/20/06

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NAME OF FILER
Committee to Elect John Heilman

I.D. NUMBER
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1/12/07	Emser International 8431 Santa Monica Blvd. Los Angeles, CA 90069	☐IND ☐COM ☒OTH ☐PTY ☐SCC		500.00	500.00	
1/17/07	Anil Mohin 11453 Dona Teresa Dr. Studio City, CA 91604	☒IND ☐COM ☐OTH ☐PTY ☐SCC	self doctor	100.00	100.00	
1/17/07	Cory Davidson 5018 Los Feliz Los Angeles 9027	☒IND ☐COM ☐OTH ☐PTY ☐SCC	attorney Reed & Davidson	250.00	250.00	
1/16/07	Brad Leathers 1201 Larrabee St. #106 West Hollywood, CA 90069	☒IND ☐COM ☐OTH ☐PTY ☐SCC	owner West Hollywood Medical Mgmt	100.00	100.00	
1/16/07	Mark Poncher 49 18th St. Hermosa Beach, CA 90254	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Producer Round Boxx Group.	100.00	100.00	
			SUBTOTAL $	1050.00		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

Type or print in ink.
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SCHEDULE A (CONT.)

Statement covers period
from 1/1/07
through 1/20/07

CALIFORNIA FORM **460**

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NAME OF FILER
Committee to Elect John Heilman

I.D. NUMBER
841705

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/16/07	Friends of Richard Alarcon c/o David Gould 1250551 555 S. Flower St. #4210 Los Angeles, CA 90071	☐IND ☒COM ☐OTH ☐PTY ☐SCC		250.	250.00	
1/06/07	Avner Papouchado 999 N. Sepulveda Blvd. El Segundo, CA 90245	☒IND ☐COM ☐OTH ☐PTY ☐SCC	President Red Sea Group	250	250.	
1/12/07	Janet Witkin 345 Pioneer Dr. #1802W Glendale, CA 91203	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Executive Director Alternative Living for the Aging	100	100	
1/6/07	Montgomery Management 8623 Sunset Blvd. B West Hollywood CA 90069	☐IND ☐COM ☒OTH ☐PTY ☐SCC		250	250	
1/19/07	Fred Shaefer 100 Wilshire #1270 Santa Monica, CA 90266	☒IND ☐COM ☐OTH ☐PTY ☐SCC	real estate ~~GTO~~ Dev.	1000.00	1000.00	
			SUBTOTAL $	1850.00		

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IND – Individual
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OTH – Other (e.g., business entity)
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SCC – Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period
from 1/1/07
through 1/20/07

CALIFORNIA FORM 460

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NAME OF FILER
Committee to Elect John Heilman

I.D. NUMBER
841705

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/18/07	Bennett & Bridman 5670 Wilshire Blvd. #1400 Los Angeles, CA 90036	☐IND ☐COM ☒OTH ☐PTY ☐SCC		250.00	250.00	
1/20/07	Rainbow Bar & Grill 9015 Sunset Blvd. West Hollywood, CA 90069	☐IND ☐COM ☒OTH ☐PTY ☐SCC		250.00	250.00	
1/04/07	Nicole Perlman 8424 A Santa Monica #237 West Hollywood, CA 90069	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Psychotherapist Comprehensive Drug Court	100.00	100.00	
1/4/07	Jerad Schempp 128 S. Clark Dr. Beverly Hills, CA 90211	☒IND ☐COM ☐OTH ☐PTY ☐SCC		100.00	100.00	
[redacted]	[redacted]	☒IND ☐COM ☐OTH ☐PTY ☐SCC	[redacted]	[redacted]	[redacted]	
			SUBTOTAL $	700.00		

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

Schedule A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period
from 1/1/07
through 1/20/07

CALIFORNIA FORM **460**

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NAME OF FILER
Committee to Elect John Heilman

I.D. NUMBER
841705

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/20/07	Food Play Corp. 8350 Santa Monica West Hollywood, CA 90069	☐IND ☐COM ☒OTH ☐PTY ☐SCC		250.00	250.00	
1/20/07	Food Biz Corp. 8350 Santa Monica West Hollywood, CA 90069	☐IND ☐COM ☒OTH ☐PTY ☐SCC		250.00	250.00	
1/20/07	Dvorskaya Alternative School 1317 N. Crescent Hts. Blvd. West Hollywood, CA 90046	☐IND ☐COM ☒OTH ☐PTY ☐SCC		500.00	500.00	
1/13/07	Fountain Day School 1126 N. Orange Grove West Hollywood 90046	☐IND ☐COM ☒OTH ☐PTY ☐SCC		100.00	100.00	
1/16/07	William Cunningham 812 N. Harper Ave. West Hollywood 90046	☒IND ☐COM ☐OTH ☐PTY ☐SCC		1000.00	1000.00	
			SUBTOTAL $	2100.00		

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IND – Individual
COM – Recipient Committee (other than PTY or SCC)
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Schedule A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period
from 1/1/06
through 1/26/06

CALIFORNIA FORM **460**

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NAME OF FILER
Committee to Elect John Heilman

I.D. NUMBER
841705

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/19/07	Tony Sakajian 7029 Bellaire N. Hollywood, CA 91605	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Manager Johnson's Super Service	1,000.00	1000.00	
1/19/07	Jim Ballard 148 N. June St. Los Angeles, CA 90004	☒IND ☐COM ☐OTH ☐PTY ☐SCC	attorney Retired	100.00	100.00	
1/19/07	Executive Carleasing 7807 Santa Monica Blvd. West Hollywood, CA 90046	☐IND ☐COM ☒OTH ☐PTY ☐SCC		500.00	500.00	
1/19/07	Jim Curtis 1155 N. La Cienega #505 West Hollywood, CA 90069	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Attorney Bank of the West	500.00	500.00	
1/17/07	Russ Wilson Koontz Hardware 8914 Santa Monica Blvd. West Hollywood, CA 90069	☒IND ☐COM ☐OTH ☐PTY ☐SCC	owner Kootz Hardware	500.00	500.00	
			SUBTOTAL $	2600.00		

*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

Schedule B – Part 1
Loans Received

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

Statement covers period
from 1/1/07
through 1/20/07

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Committee to Elect John Heilman

I.D. NUMBER
841705

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD *	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
John Heilman 1155 La Cienega #1202 West Hollywood CA 90069 †[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Professor Whittier Law School	$34,200	$ 0	[ ] PAID $ 0 [ ] FORGIVEN $ 0	$34,200 DATE DUE	0 % RATE $	$ various DATE INCURRED	CALENDAR YEAR $ _____ PER ELECTION** $ 34,200.
†[ ] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC		$	$	[ ] PAID $ [ ] FORGIVEN $	$ DATE DUE	% RATE $	$ DATE INCURRED	CALENDAR YEAR $ PER ELECTION** $
†[ ] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC		$	$	[ ] PAID $ [ ] FORGIVEN $	$ DATE DUE	% RATE $	$ DATE INCURRED	CALENDAR YEAR $ PER ELECTION** $
		SUBTOTALS $	$	$	$			

(Enter (e) on Schedule E, Line 3)

Schedule B Summary

1. Loans received this period ..... $ 0
   (Total Column (b) plus unitemized loans of less than $100.)
2. Loans paid or forgiven this period ..... $ 0
   (Total Column (c) plus loans under $100 paid or forgiven.)
   (Include loans paid by a third party that are also itemized on Schedule A.)
3. Net change this period. (**Subtract** Line 2 from Line 1.) ..... NET $ 0
   (May be a negative number)
   Enter the net here and on the Summary Page, Column A, Line 2.

†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

*Amounts forgiven or paid by another party also must be reported on Schedule A.
** If required.

* 34,200.00 outstanding

Schedule B – Part 2
Loan Guarantors

SEE INSTRUCTIONS ON REVERSE

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

Statement covers period
from 1/1/07
through 1/20/07

CALIFORNIA FORM **460**

NAME OF FILER: Committee to Elect John Heilman

I.D. NUMBER: 841705

FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	LOAN	AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE
	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		LENDER ___ DATE ___		CALENDAR YEAR $ ___ PER ELECTION (IF REQUIRED) $ ___	
	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		LENDER ___ DATE ___		CALENDAR YEAR $ ___ PER ELECTION (IF REQUIRED) $ ___	
	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		LENDER ___ DATE ___		CALENDAR YEAR $ ___ PER ELECTION (IF REQUIRED) $ ___	
	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		LENDER ___ DATE ___		CALENDAR YEAR $ ___ PER ELECTION (IF REQUIRED) $ ___	

SUBTOTAL $ 0 — Enter on Summary Page, Line 17 only

Schedule C
Nonmonetary Contributions Received

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

SCHEDULE C

Statement covers period
from 1/1/07
through 1/20/07

CALIFORNIA FORM **460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Committee to Elect John Heilman

I.D. NUMBER

841705

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					

Attach additional information on appropriately labeled continuation sheets. **SUBTOTAL $** 0

Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.) ..... $ 0
2. Amount received this period – unitemized nonmonetary contributions of less than $100 ..... $ 0
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 $** 0

*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

Schedule D
Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees

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

SCHEDULE D

Statement covers period
from 1/1/07
through 1/20/07

CALIFORNIA FORM **460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Committee to Elect John Heilman

I.D. NUMBER
841705

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
	☐ Support ☐ Oppose	☐ Monetary Contribution ☐ Nonmonetary Contribution ☐ Independent Expenditure				
	☐ Support ☐ Oppose	☐ Monetary Contribution ☐ Nonmonetary Contribution ☐ Independent Expenditure				
	☐ Support ☐ Oppose	☐ Monetary Contribution ☐ Nonmonetary Contribution ☐ Independent Expenditure				
			SUBTOTAL $	0		

Schedule D Summary

1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.) ..... $ 0
2. Unitemized contributions and independent expenditures made this period of under $100 ..... $ 0
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) ..... **TOTAL $** 0

Schedule E (Continuation Sheet) Payments Made

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

Statement covers period
from 1/1/06
through 1/20/06

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Committee to Elect John Heilman

I.D. NUMBER
841705

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

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
SBC/AT+T	Pho.			1736.86
Stonewall Democratic Club	CVC.			100.00

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

SUBTOTAL $ 1836.86

Schedule F
Accrued Expenses (Unpaid Bills)

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

Statement covers period
from 1/1/07
through 1/20/07

CALIFORNIA FORM **460**

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Committee to Elect John Heilman

I.D. NUMBER
841705

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

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS $	$	$	$	0

Schedule F Summary

1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of $100 or more, plus total unitemized accrued expenses under $100.) ..... INCURRED TOTALS $ 0
2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of $100 or more, plus total unitemized payments on accrued expenses under $100.) ..... PAID TOTALS $ 0
3. Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) ..... NET $ 0
   May be a negative number

SCHEDULE G

Schedule G
Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

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

Statement covers period
from 1/1/07
through 1/20/07

CALIFORNIA FORM **460**

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Committee to Elect John Heilman

I.D NUMBER
841705

NAME OF AGENT OR INDEPENDENT CONTRACTOR

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

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID

Attach additional information on appropriately labeled continuation sheets.

TOTAL* $ 0

** Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.*

SCHEDULE H

Schedule H
Loans Made to Others*

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

Statement covers period
from 1/1/07
through 1/20/07

CALIFORNIA FORM **460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Committee to Elect John Heilman

I.D. NUMBER
841705

FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT LOANED THIS PERIOD	(c) REPAYMENT OR FORGIVENESS THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
		$	$	☐ PAID $ ☐ FORGIVEN $	$ DATE DUE	% RATE $	$ DATE INCURRED	CALENDAR YEAR $ PER ELECTION** $
		$	$	☐ PAID $ ☐ FORGIVEN $	$ DATE DUE	% RATE $	$ DATE INCURRED	CALENDAR YEAR $ PER ELECTION** $
*Loans that are contributions to another candidate or committee must also be summarized on Schedule D. Loans forgiven must also be reported on Schedule E.		SUBTOTALS $	$	$	$	$ (Enter (e) on Schedule I, Line 3)		

Schedule H Summary

1. Loans made this period ..... $ 0
   (Total Column (b) plus unitemized loans of less than $100.)
2. Payments received on loans ..... $ 0
   (Total Column (c) plus unitemized payments of less than $100.)
3. Net change this period. (**Subtract** Line 2 from Line 1.) ..... NET $ 6
   (May be a negative number)
   (Enter the net here and on the Summary Page, Column A, Line 7.)

**If Required

SCHEDULE I

Schedule I
Miscellaneous Increases to Cash

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

Statement covers period
from 1/1/07
through 1/20/07

CALIFORNIA FORM **460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Committee to Elect John Heilman

I.D. NUMBER
841705

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL $

Schedule I Summary

1. Itemized increases to cash this period. ..... $ 0
2. Unitemized increases to cash of under $100 this period. ..... $ 0
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).) ..... $ 0
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) ..... **TOTAL** $ 0