

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Zein Obagi for Congress

ADDRESS (number and street)

1250 S. Beverly Glen Blvd

206

Check if different than previously reported. (ACC)

Los Angeles

CA

90024

2. FEC IDENTIFICATION NUMBER ▼

C C00514414

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

CA

33

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

- Primary (12P)  General (12G)  Runoff (12R)
- Convention (12C)  Special (12S)

Election on 06 / 05 / 2012 in the State of CA

(c) 30-Day POST-Election Report for the:

- General (30G)  Runoff (30R)  Special (30S)

Election on 06 / 05 / 2012 in the State of CA

5. Covering Period

04 / 01 / 2012

through

05 / 16 / 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Zein E Obagi Jr.

Signature of Treasurer Zein E Obagi Jr.

[Electronically Filed]

Date

05 / 24 / 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3 (Revised 02/2003)

## SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 32

Write or Type Committee Name

**Zein Obagi for Congress**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	2

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	6		2	0	1	2

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	23930.24	26918.00
(b) Total Contribution Refunds (from Line 20(d)) .....	485.50	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	23444.74	26918.00
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	17240.40	27337.84
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	300.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	17240.40	27037.84
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>		
	9877.50	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>		
	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>		
	3793.00	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Zein Obagi for Congress**

Report Covering the Period: From:  /  /  To:  /  /

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	20400.00	20908.00
(ii) Unitemized.....	3530.24	6010.00
(iii) TOTAL of contributions from individuals ▶	23930.24	26918.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	23930.24	26918.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	650.00	3743.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	650.00	3743.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	300.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	24580.24	30961.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	17240.40	27337.84
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	600.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	600.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	485.50	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	485.50	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	18325.90	27337.84

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	3623.16
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	24580.24
25. SUBTOTAL (add Line 23 and Line 24).....	28203.40
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	18325.90
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	9877.50

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 32
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Zein Obagi for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dima Ali**

Mailing Address 1801 Robert Fulton Drive

City Reston State VA Zip Code 20191

FEC ID number of contributing federal political committee. **C**

Name of Employer Wellmedica Aesthetic Occupation Physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 08 / 2012

**Transaction ID : SA11AI.4631**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Adel Bagh**

Mailing Address 2781 Carmon On Wesley

City Atlanta State GA Zip Code 30327

FEC ID number of contributing federal political committee. **C**

Name of Employer Piedmont Colorectal Associatio Occupation Surgeon/President/Physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 21 / 2012

**Transaction ID : SA11AI.4719**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Nazanin Barouti Esq.**

Mailing Address 6320 Canoga Ave, Ste 1500

City Woodland Hills State CA Zip Code 91367

FEC ID number of contributing federal political committee. **C**

Name of Employer Barouti Law Corporation Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 26 / 2012

**Transaction ID : SA11AI.4697**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 32
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zein Obagi for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Diego Berdakin**

Mailing Address 101 S Rossmore

City Los Angeles State CA Zip Code 90004

FEC ID number of contributing federal political committee. **C**

Name of Employer Beach Mint Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 15 / 2012

**Transaction ID : SA11AI.4650**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Sandra Chen**

Mailing Address 4321 Aspenglow Cir.

City Yorba Linda State CA Zip Code 92886

FEC ID number of contributing federal political committee. **C**

Name of Employer Farmers Insurance Occupation Insurance Agent

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 06 / 2012

**Transaction ID : SA11AI.4728**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Jeff Davis**

Mailing Address 6166 Mulholland Highway

City Hollywood State CA Zip Code 90068

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Producer/TV Voice

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 16 / 2012

**Transaction ID : SA11AI.5001**

Amount of Each Receipt this Period  
 2000.00  
 In-kind -

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2750.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 32
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zein Obagi for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Joshua Del Castillo**

Mailing Address 385 E. Green Street Apt 2519

City Pasadena State CA Zip Code 91101

FEC ID number of contributing federal political committee. **C**

Name of Employer Allen Matkins LLP Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2012

**Transaction ID : SA11AI.4615**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Vadim Dzhalyants**

Mailing Address 241 S Reeves Dr #201

City Beverly Hills State CA Zip Code 90212

FEC ID number of contributing federal political committee. **C**

Name of Employer 3F Engineering Occupation CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 12 / 2012

**Transaction ID : SA11AI.4647**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Murray D. Fischer Esq.**

Mailing Address 433 N. Camden Drive, Ste. 888

City Beverly Hills State CA Zip Code 90210

FEC ID number of contributing federal political committee. **C**

Name of Employer Law Offices Murray D. Fischer Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 12 / 2012

**Transaction ID : SA11AI.4722**

Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

750.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 32
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zein Obagi for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kevin K. Fitzgerald Esq.**

Mailing Address 601 S Figueroa Street, Ste 2700

City Los Angeles	State CA	Zip Code 90017
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FEC ID number of contributing federal political committee. **C**

Name of Employer Jones Bell LLP	Occupation Attorney
------------------------------------	------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2012

**Transaction ID : SA11AI.4714**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. G. Thomas Fleming Esq.**

Mailing Address 601 S. Figueroa Street, 27th Floor

City Los Angeles	State CA	Zip Code 90017
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FEC ID number of contributing federal political committee. **C**

Name of Employer Jones Bell LLP	Occupation Attorney
------------------------------------	------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2012

**Transaction ID : SA11AI.4691**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Michael Shane Foley**

Mailing Address 350 West Colorado Blvd. Ste 390

City Pasadena	State CA	Zip Code 91105
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FEC ID number of contributing federal political committee. **C**

Name of Employer Wells Fargo Private Bank	Occupation Banker
--	----------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 03 / 2012

**Transaction ID : SA11AI.4992**

Amount of Each Receipt this Period  
1000.00  
 In-kind - 2 Entry to 'A Better LA' Gala

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1500.00



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 32
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zein Obagi for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**James Headley**

Mailing Address 17671 San Rafael Street

City State Zip Code  
Fountain Valley CA 92708

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
ZO Skin Health, Inc. C.E.O.

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 10 / 2012

**Transaction ID : SA11AI.4678**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Steven Johnson**

Mailing Address 367 Newport Glen Ct.

City State Zip Code  
Newport Beach CA 92660

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Epic President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 08 / 2012

**Transaction ID : SA11AI.4636**

Amount of Each Receipt this Period  
250.00

Tickets to Fundraiser

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Omar Kadro**

Mailing Address 710 Browning Ct

City State Zip Code  
Bloomfield Hills MI 48304

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Medical Doctor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 09 / 2012

**Transaction ID : SA11AI.4642**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 32
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zein Obagi for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mouhamed Kamel**

Mailing Address 804 Amherst NE

City Massillon State OH Zip Code 44646

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Doctor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 07 / 2012

**Transaction ID : SA11AI.4623**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Derek Lazzaro**

Mailing Address 446 Bayview Drive

City Hermosa Beach State CA Zip Code 90254

FEC ID number of contributing federal political committee. **C**

Name of Employer Univ of Southern California Occupation Counsel

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 01 / 2012

**Transaction ID : SA11AI.4693**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Craig Lee**

Mailing Address 30 Fairway Drive

City Manhattan Beach State CA Zip Code 90266

FEC ID number of contributing federal political committee. **C**

Name of Employer Lilly Enterprises, Inc Occupation Real Estate

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 16 / 2012

**Transaction ID : SA11AI.4589**

Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1750.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 32
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zein Obagi for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Darin Marinov**

Mailing Address PO BOX 1640

City State Zip Code  
Studio City CA 91614

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Small Business Owner/ Bus. Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 16 / 2012

**Transaction ID : SA11AI.4656**

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
**Bassam Masri**

Mailing Address 12091 E Mescal Street

City State Zip Code  
Scottsdale AZ 85259

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Goodrich Corporation Engineer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 26 / 2012

**Transaction ID : SA11AI.4609**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Daryl McCormick**

Mailing Address 3408 Crest Drive

City State Zip Code  
Manhattan Beach CA 90266

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Raytheon Financial Analyst

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 16 / 2012

**Transaction ID : SA11AI.4657**

Amount of Each Receipt this Period  
1500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2050.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 32
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zein Obagi for Congress**

Full Name (Last, First, Middle Initial) <b>A. Michael R. Morris Esq.</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2012
Mailing Address 2812 Angelo Drive		<b>Transaction ID : SA11AI.4640</b>
City Los Angeles	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Valensi Rose PLC	Occupation Attorney	Fundrasier Ticket
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>B. Michael R. Morris Esq.</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 16 / 2012
Mailing Address 2812 Angelo Drive		<b>Transaction ID : SA11AI.4703</b>
City Los Angeles	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Valensi Rose PLC	Occupation Attorney	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1250.00	

Full Name (Last, First, Middle Initial) <b>C. Zubin Mowlavi</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2012
Mailing Address 7 Toscany		<b>Transaction ID : SA11AI.4649</b>
City Irvine	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Lucid Fusion Inc	Occupation Digital Marketing	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1350.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 32
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zein Obagi for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Kevin Nagengast**

Mailing Address 4116 Dakota Street

City Moorpark State CA Zip Code 93021

FEC ID number of contributing federal political committee. **C**

Name of Employer Cedards Sinai Occupation Pharmacist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 01 / 2012

**Transaction ID : SA11Al.4730**

Amount of Each Receipt this Period  
1500.00

In-kind -

**B.** Full Name (Last, First, Middle Initial)  
**Silvia Obagi Esq.**

Mailing Address 126 Greenfield Avenue

City Los Angeles State CA Zip Code 90049

FEC ID number of contributing federal political committee. **C**

Name of Employer Sotheby's International Occupation Real Estate Broker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 11 / 2012

**Transaction ID : SA11Al.4680**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Sylia Obagi**

Mailing Address 4501 Cedros Ave #120

City Sherman Oaks State CA Zip Code 91403

FEC ID number of contributing federal political committee. **C**

Name of Employer Annenberg Occupation Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 08 / 2012

**Transaction ID : SA11Al.4634**

Amount of Each Receipt this Period  
350.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2350.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 32
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zein Obagi for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Michael Robarts**

Mailing Address 3800 North Mission Road

City Los Angeles State CA Zip Code 90031

FEC ID number of contributing federal political committee. **C**

Name of Employer Bert Co. Occupation Vice President/Executive

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 01 / 2012

**Transaction ID : SA11AI.4995**

Amount of Each Receipt this Period  
 2100.00

In-kind - Banners and Lawn Signs

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Lauren Robinson Esq.**

Mailing Address 1009 21st Street, Unit A

City Santa Monica State CA Zip Code 90403

FEC ID number of contributing federal political committee. **C**

Name of Employer Southern California Edison Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 11 / 2012

**Transaction ID : SA11AI.4682**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Steven Roth**

Mailing Address 10560 Wilshire Blvd., #1703

City Los Angeles State CA Zip Code 90024

FEC ID number of contributing federal political committee. **C**

Name of Employer Wealth Management Internationa Occupation Wealth Protection Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 09 / 2012

**Transaction ID : SA11AI.4643**

Amount of Each Receipt this Period  
 250.00

Fundraiser ticket

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2850.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 32
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zein Obagi for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Steven Roth**

Mailing Address 10560 Wilshire Blvd., #1703

City Los Angeles State CA Zip Code 90024

FEC ID number of contributing federal political committee. **C**

Name of Employer Wealth Management Internationa Occupation Wealth Protection Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 11 / 2012

**Transaction ID : SA11Al.4702**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Magdy Seif**

Mailing Address 18001 Railroad Street

City Industry State CA Zip Code 91748

FEC ID number of contributing federal political committee. **C**

Name of Employer Safe Plating, Inc. Occupation Executive

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 01 / 2012

**Transaction ID : SA11Al.4690**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Magdy Seif**

Mailing Address 18001 Railroad Street

City Industry State CA Zip Code 91748

FEC ID number of contributing federal political committee. **C**

Name of Employer Safe Plating, Inc. Occupation Executive

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 11 / 2012

**Transaction ID : SA11Al.4688**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 32
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zein Obagi for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Monique Seif**

Mailing Address 18001 RailRoad Street

City State Zip Code  
Industry CA 91748

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Champan LLC Property Management

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 11 / 2012

**Transaction ID : SA11AI.4695**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Amina M. Shah**

Mailing Address 1203 N. Wetherly Drive

City State Zip Code  
Los Angeles CA 90069-1815

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Coldwell Banker Real Estate Agent

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 10 / 2012

**Transaction ID : SA11AI.4726**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Jean- Louis Sorondo**

Mailing Address 162 West 56th Street 1501

City State Zip Code  
New York NY 10019

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Proitviti Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 07 / 2012

**Transaction ID : SA11AI.4627**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

750.00



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 32
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zein Obagi for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jean- Louis Sorondo**

Mailing Address 162 West 56th Street 1501

City State Zip Code  
New York NY 10019

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Proitviti Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 11 / 2012

**Transaction ID : SA11AI.4686**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Michael B. Stevens**

Mailing Address 2820 N. Main Street

City State Zip Code  
Visalia CA 93291

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Plastic Surgeon/Physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 01 / 2012

**Transaction ID : SA11AI.4700**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Seth Stodder**

Mailing Address 1714 Morgan Lane

City State Zip Code  
Redondo Beach CA 90278

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Palindrome Strategies, LLC Attorney/ Homeland Sec. Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 14 / 2012

**Transaction ID : SA11AI.4705**

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

800.00

20400.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 32
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zein Obagi for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Zein E Obagi Jr.**

Mailing Address 1250 S. Beverly Glen Blvd  
206

City Los Angeles State CA Zip Code 90024

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 10 / 2012

**Transaction ID : SA13A.4988**

Amount of Each Receipt this Period  
 650.00

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

650.00

650.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 32		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Zein Obagi for Congress**

Full Name (Last, First, Middle Initial) <b>A. Arco</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2012
Mailing Address 2740 E. Olympic Blvd.		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : SB17.4911</b>
City Los Angeles	State CA	
Zip Code 90023	Purpose of Disbursement 002	Category/ Type
Candidate Name <b>Zein Obagi for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CA District: 33	

Full Name (Last, First, Middle Initial) <b>B. Arete Digital Imaging</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2012
Mailing Address 913 North Highland Ave		Amount of Each Disbursement this Period 205.56 <b>Transaction ID : SB17.4896</b>
City Los Angeles	State CA	
Zip Code 90038	Purpose of Disbursement 004	Category/ Type
Candidate Name <b>Zein Obagi for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CA District: 33	

Full Name (Last, First, Middle Initial) <b>c. Jeff Davis</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2012
Mailing Address 6166 Mulholland Highway		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : SB17.5003</b>
City Hollywood	State CA	
Zip Code 90068	Purpose of Disbursement In-kind -	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2305.56
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Zein Obagi for Congress**

Full Name (Last, First, Middle Initial) <b>A. Dietz Bros. Music</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2012
Mailing Address 240 S. Sepulveda Blvd		Amount of Each Disbursement this Period 650.00 <b>Transaction ID : SB17.5004</b>
City Manhattan Beach	State CA	
Zip Code 90266	Purpose of Disbursement Band Performance	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Dietz Bros. Music</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 240 S. Sepulveda Blvd		Amount of Each Disbursement this Period 650.00 <b>Transaction ID : SB17.4823</b>
City Manhattan Beach	State CA	
Zip Code 90266	Purpose of Disbursement	Category/ Type 003
Candidate Name <b>Zein Obagi for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CA District: 33	

Full Name (Last, First, Middle Initial) <b>c. digitalroom</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2012
Mailing Address 10936 Santa Monica Blvd.		Amount of Each Disbursement this Period 174.00 <b>Transaction ID : SB17.4755</b>
City Los Angeles	State CA	
Zip Code 90025	Purpose of Disbursement	Category/ Type 006
Candidate Name <b>Zein Obagi for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CA District: 33	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1474.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 32		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Zein Obagi for Congress**

Full Name (Last, First, Middle Initial) <b>A. digitalroom</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2012
Mailing Address 10936 Santa Monica Blvd.		Amount of Each Disbursement this Period 8.70 <b>Transaction ID : SB17.4756</b>
City Los Angeles	State CA	
Zip Code 90025	Purpose of Disbursement	Category/ Type 006
Candidate Name <b>Zein Obagi for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA	District: 33	

Full Name (Last, First, Middle Initial) <b>B. Mr. Michael Shane Foley</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2012
Mailing Address 350 West Colorado Blvd. Ste 390		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.4994</b>
City Pasadena	State CA	
Zip Code 91105	Purpose of Disbursement In-kind - 2 Entry to 'A Better LA' Gala	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>c. I-Payment INC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2012
Mailing Address PO box 3429		Amount of Each Disbursement this Period 74.62 <b>Transaction ID : SB17.4764</b>
City Thousand oks	State CA	
Zip Code 91359	Purpose of Disbursement	Category/ Type 001
Candidate Name <b>Zein Obagi for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA	District: 33	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1083.32
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 32		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Zein Obagi for Congress**

Full Name (Last, First, Middle Initial) <b>A. Los Angeles County Democratic Party</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2012
Mailing Address 3550 Wilshire Blvd Suite 1203		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : SB17.4891</b>
City Los Angeles State CA Zip Code 90010	Purpose of Disbursement 012 Category/Type	
Candidate Name <b>Zein Obagi for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 33	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>B. Los Angeles County Democratic Party</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2012
Mailing Address 3550 Wilshire Blvd Suite 1203		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : SB17.4894</b>
City Los Angeles State CA Zip Code 90010	Purpose of Disbursement 004 Category/Type	
Candidate Name <b>Zein Obagi for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 33	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>c. Dr. Kevin Nagengast</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2012
Mailing Address 4116 Dakota Street		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : SB17.4731</b>
City Moorpark State CA Zip Code 93021	Purpose of Disbursement In-kind - Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Zein Obagi for Congress**

**A. Paperless Post**

Full Name (Last, First, Middle Initial)  
Mailing Address 151 w. 25th street 9th floor

City new york State NM Zip Code 10001

Purpose of Disbursement Event Invitations

Candidate Name **Zein Obagi for Congress**

Office Sought:  House  Senate  President  
State: CA District: 33

Disbursement For: 2012  
 Primary  General  
 Other (specify)

Date of Disbursement: 04 / 29 / 2012

Amount of Each Disbursement this Period: 650.00

Transaction ID : SB17.4733

**B. Paypal Inc.**

Full Name (Last, First, Middle Initial)  
Mailing Address 1840 Embarcadero Rd

City Palo Alto State CA Zip Code 94303

Purpose of Disbursement Paypal Fees on Donatinos

Candidate Name **Zein Obagi for Congress**

Office Sought:  House  Senate  President  
State: CA District: 33

Disbursement For: 2012  
 Primary  General  
 Other (specify)

Date of Disbursement: 05 / 16 / 2012

Amount of Each Disbursement this Period: 238.99

Transaction ID : SB17.4659

**c. Michael Robarts**

Full Name (Last, First, Middle Initial)  
Mailing Address 3800 North Mission Road

City Los Angeles State CA Zip Code 90031

Purpose of Disbursement In-kind - Banners and Lawn Signs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify)

Date of Disbursement: 05 / 01 / 2012

Amount of Each Disbursement this Period: 2100.00

Transaction ID : SB17.4997

**SUBTOTAL** of Disbursements This Page (optional) ..... 2988.99

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Zein Obagi for Congress**

Full Name (Last, First, Middle Initial) <b>A. Julianne Shinto</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2012
Mailing Address 269 S Beverly Drive		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : SB17.4981</b>
City Beverly Hills	State CA	
Zip Code 90212	Purpose of Disbursement 001	Category/ Type
Candidate Name <b>Zein Obagi for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA	District: 33	

Full Name (Last, First, Middle Initial) <b>B. Julianne Shinto</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2012
Mailing Address 269 S Beverly Drive		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.4760</b>
City Beverly Hills	State CA	
Zip Code 90212	Purpose of Disbursement 001	Category/ Type
Candidate Name <b>Zein Obagi for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA	District: 33	

Full Name (Last, First, Middle Initial) <b>c. Twain Group LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2012
Mailing Address 15332 Antioch		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.4872</b>
City Pacific Palisades	State CA	
Zip Code 90272	Purpose of Disbursement 001	Category/ Type
Candidate Name <b>Zein Obagi for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA	District: 33	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3500.00
<b>TOTAL</b> This Period (last page this line number only).....	13351.87



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 32	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Zein Obagi for Congress**

Full Name (Last, First, Middle Initial) <b>A. Zein E Obagi Jr.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2012
Mailing Address 1250 S. Beverly Glen Blvd. 206		Amount of Each Disbursement this Period 600.00 <b>Transaction ID : SB19A.4986</b>
City Los Angeles State CA Zip Code 90024	Purpose of Disbursement loan repayment	
Candidate Name <b>Zein Obagi for Congress</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 33	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Zein E Obagi Jr.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2012
Mailing Address 1250 S. Beverly Glen Blvd. 206		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB19A.4907</b>
City Los Angeles State CA Zip Code 90024	Purpose of Disbursement loan repayment	
Candidate Name <b>Zein Obagi for Congress</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 33	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	600.00
<b>TOTAL</b> This Period (last page this line number only).....	600.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 32			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**Zein Obagi for Congress**

Full Name (Last, First, Middle Initial) <b>A. Pierre Onasis</b>		Date of Disbursement MM / DD / YYYY 04 / 02 / 2012
Mailing Address 625 S Hill Street Ste 107		Amount of Each Disbursement this Period 485.50
City Los Angeles	State CA Zip Code 90014	
Purpose of Disbursement	Category/Type	<b>Transaction ID : SB20A.4311</b>
Candidate Name <b>Zein Obagi for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 33		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	485.50
<b>TOTAL</b> This Period (last page this line number only).....	485.50

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Zein Obagi for Congress** Transaction ID : **SC/10.4497**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Zein E Obagi Jr.</b>	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1250 S. Beverly Glen Blvd 206	
City State ZIP Code Los Angeles CA 90024	

Original Amount of Loan 53.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 53.00
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**TERMS**

Date Incurred M 02 / D 18 / Y 2012	Date Due M / D / Y 12/31/2012	Interest Rate 5.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	[ ] 53.00
<b>TOTALS</b> This Period (last page in this line only).....	[ ]
<b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b>	

**SCHEDULE C (FEC Form 3)**  
**LOANS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Zein Obagi for Congress

Transaction ID : SC/10.4442

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Zein E Obagi Jr.

Election: 2012

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1250 S. Beverly Glen Blvd.  
206

City State ZIP Code  
Los Angeles CA 90024

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
2000.00 0.00 2000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
02 / 23 / 2012 M M / D D / Y Y / Y Y 12/31/12 5.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... 2000.00

**TOTALS** This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Zein Obagi for Congress**

Transaction ID : **SC/10.4443**

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
**Zein E Obagi Jr.**

Election: 2012

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1250 S. Beverly Glen Blvd.  
206

City State ZIP Code  
Los Angeles CA 90024

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
1000.00 100.00 900.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
02 / 26 / 2012 M M / D D / Y Y / Y Y 12/31/12 5.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... 900.00

**TOTALS** This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Zein Obagi for Congress** Transaction ID : **SC/10.4451**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Zein E Obagi Jr.</b>	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1250 S. Beverly Glen Blvd 206	
City State ZIP Code Los Angeles CA 90024	

Original Amount of Loan 650.00	Cumulative Payment To Date 500.00	Balance Outstanding at Close of This Period 150.00
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**TERMS**

Date Incurred M 02 / D 29 / Y 2012	Date Due M / D / Y 12/31/12	Interest Rate 5.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	[ ] 150.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	[ ]

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Zein Obagi for Congress** Transaction ID : **SC/10.4543**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Zein E Obagi Jr.	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Mailing Address 1250 S. Beverly Glen Blvd 206		
City Los Angeles	State CA	ZIP Code 90024

Original Amount of Loan 40.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 40.00
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**TERMS**

Date Incurred M 03 / D 14 / Y 2012	Date Due M M / D D / Y 12/31/2012	Interest Rate 5.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)  Mailing Address  City State ZIP Code	Name of Employer  Occupation  Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)  Mailing Address  City State ZIP Code	Name of Employer  Occupation  Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)  Mailing Address  City State ZIP Code	Name of Employer  Occupation  Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)  Mailing Address  City State ZIP Code	Name of Employer  Occupation  Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional).....	40.00
<b>TOTALS</b> This Period (last page in this line only).....	

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Zein Obagi for Congress**

Transaction ID : **SC/10.4988**

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
**Zein E Obagi Jr.**

Election: 2012

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1250 S. Beverly Glen Blvd  
206

City State ZIP Code  
Los Angeles CA 90024

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
650.00 0.00 650.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
05 / 10 / 2012 M M / D D / 12/30/2012 5.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶ 650.00  
**TOTALS** This Period (last page in this line only)..... ▶ 3793.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.