

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

CITY

STATE

ZIP CODE

STATE DISTRICT

C C00514414

3. IS THIS REPORT

X

NEW (N)

OR

AMENDED (A)

CA

33

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

X

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

M M / D D / Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y 05 / 17 / 2012

through

M M / D D / Y Y Y Y 06 / 30 / 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

M M / D D / Y Y Y Y 07 / 12 / 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 / 20

Write or Type Committee Name

Zein Obagi for Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	2265.00	54113.24
(b) Total Contribution Refunds (from Line 20(d))	0.00	485.50
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	2265.00	53627.74
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	12856.30	58434.54
(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)).....	12856.30	58134.54
8. Cash on Hand at Close of Reporting Period (from Line 27).....	0.00	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	4506.80	

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: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1000.00	43308.00
(ii) Unitemized.....	1265.00	10805.24
(iii) TOTAL of contributions from individuals ▶	2265.00	54113.24
(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))..	2265.00	54113.24
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	930.52	5323.52
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	930.52	5323.52
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	300.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	3195.52	59736.76

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	12856.30	58434.54
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	216.72	816.72
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	216.72	816.72
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	485.50
(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)).....	0.00	485.50
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	13073.02	59736.76

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	9877.50
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	3195.52
25. SUBTOTAL (add Line 23 and Line 24).....	13073.02
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	13073.02
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	0.00

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

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

FOR LINE NUMBER: PAGE 5 OF 20
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 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)
Michael B. Stevens MD

Mailing Address 2820 West Main Street

City Visalia State CA Zip Code 93291

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

Name of Employer Self Occupation Physician/ Plastic Surgeon

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 / 24 / 2012

Transaction ID : SA11Al.5034

Amount of Each Receipt this Period
 1000.00

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).....

1000.00

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 20
	<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	

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)
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
1483.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 21 / 2012

Transaction ID : SA13A.4908

Amount of Each Receipt this Period
 40.00
 shutter styles photography

B. 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
2373.52

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2012

Transaction ID : SA13A.5148

Amount of Each Receipt this Period
 890.52

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).....

930.52

930.52

**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 7 OF 20			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) A. 208 Rodeo		Date of Disbursement MM / DD / YYYY 06 / 05 / 2012
Mailing Address 208 Rodeo Drive		Amount of Each Disbursement this Period 243.42 Transaction ID : SB17.5140
City Beverly Hills	State CA	
Purpose of Disbursement Campaign Team Dinner	Category/ Type 001	
Candidate Name Zein Obagi for Congress	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. Arco		Date of Disbursement MM / DD / YYYY 05 / 23 / 2012
Mailing Address 2740 E. Olympic Blvd.		Amount of Each Disbursement this Period 52.93 Transaction ID : SB17.5094
City Los Angeles	State CA	
Purpose of Disbursement	Category/ Type 002	
Candidate Name Zein Obagi for Congress	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) c. Easy Reader Newspaper		Date of Disbursement MM / DD / YYYY 05 / 25 / 2012
Mailing Address 832 Hermosa Avenue		Amount of Each Disbursement this Period 1550.00 Transaction ID : SB17.5097
City Hermosa Beach	State CA	
Purpose of Disbursement	Category/ Type 004	
Candidate Name Zein Obagi for Congress	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	

SUBTOTAL of Disbursements This Page (optional).....	1846.35
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 8 OF 20			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) A. Facebook Inc		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 156 University Ave		Amount of Each Disbursement this Period 358.48 Transaction ID : SB17.5133
City Palo Alto	State CA Zip Code 94301	
Purpose of Disbursement	Category/Type 004	
Candidate Name Zein Obagi for Congress	Disbursement For: 2012	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<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. FedEx Office		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address 9334 Wilshire Boulevard		Amount of Each Disbursement this Period 516.76 Transaction ID : SB17.5111
City Beverly Hills	State CA Zip Code 90212	
Purpose of Disbursement	Category/Type 004	
Candidate Name Zein Obagi for Congress	Disbursement For: 2012	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 33		

Full Name (Last, First, Middle Initial) c. Gravis Marketing		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address 910 Belle Avenue, Ste. 1042		Amount of Each Disbursement this Period 2050.00 Transaction ID : SB17.5100
City Winter Springs	State FL Zip Code 32708	
Purpose of Disbursement	Category/Type 004	
Candidate Name Zein Obagi for Congress	Disbursement For: 2012	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 33		

SUBTOTAL of Disbursements This Page (optional)	2925.24
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 9 OF 20			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) A. I-Payment INC		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address PO box 3429		Amount of Each Disbursement this Period 255.10
City Thousand oks State CA Zip Code 91359	Purpose of Disbursement 001 Category/Type	
Candidate Name Zein Obagi for Congress		Transaction ID : SB17.5049
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. Los Angeles Newspaper Group		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2012
Mailing Address 21860 Burbank Blvd, Ste. 200		Amount of Each Disbursement this Period 1000.00
City Woodhalnd Hills State CA Zip Code 91367	Purpose of Disbursement PV News 004 Category/Type	
Candidate Name Zein Obagi for Congress		Transaction ID : SB17.5041
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) c. Los Angeles Newspaper Group		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 21860 Burbank Blvd, Ste. 200		Amount of Each Disbursement this Period 2250.00
City Woodhalnd Hills State CA Zip Code 91367	Purpose of Disbursement Daily Breeze Ad 004 Category/Type	
Candidate Name Zein Obagi for Congress		Transaction ID : SB17.5046
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 33	Disbursement For: 2021 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	3505.10
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 10 OF 20			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) A. Zein E Obagi Jr.		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address 1250 S. Beverly Glen Blvd 206		Amount of Each Disbursement this Period 45.50 Transaction ID : SB17.5122
City Los Angeles	State CA Zip Code 90024	
Purpose of Disbursement Reimbursement for out of pocket/cash expenses	Category/Type 002	
Candidate Name Zein Obagi for Congress	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. Paypal Inc.		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2012
Mailing Address 1840 Embarcadero Rd		Amount of Each Disbursement this Period 65.55 Transaction ID : SB17.5137
City Palo Alto	State CA Zip Code 94303	
Purpose of Disbursement Processing fee for donations	Category/Type 001	
Candidate Name Zein Obagi for Congress	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) c. Printing Services-uprintng.com		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address 8000 Haskell Ave		Amount of Each Disbursement this Period 302.31 Transaction ID : SB17.5110
City Van Nuys	State CA Zip Code 91406	
Purpose of Disbursement	Category/Type 004	
Candidate Name Zein Obagi for Congress	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		

SUBTOTAL of Disbursements This Page (optional).....	413.36
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 11 OF 20			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) A. Ritz Carlton		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address 900 W Olympic Blvd		Amount of Each Disbursement this Period 308.45 Transaction ID : SB17.5108
City Los Angeles	State CA	
Purpose of Disbursement Dr. Wong & James Clark Dinner		Category/ Type 003
Candidate Name Zein Obagi for Congress		
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. Julianne Shinto		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address 269 S Beverly Drive		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.5069
City Beverly Hills	State CA	
Purpose of Disbursement		Category/ Type 001
Candidate Name Zein Obagi for Congress		
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) c. Bartek Sumowski		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address Grunwaldzka 2/7 POLAND		Amount of Each Disbursement this Period 132.26 Transaction ID : SB17.5129
City 82-200 Malbork	State ZZ	
Purpose of Disbursement		Category/ Type 001
Candidate Name Zein Obagi for Congress		
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	

SUBTOTAL of Disbursements This Page (optional).....	2440.71
TOTAL This Period (last page this line number only).....	11130.76

**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 12 OF 20	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. Zein E Obagi Jr.		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2012
Mailing Address 1250 S. Beverly Glen Blvd. 206		Amount of Each Disbursement this Period 216.72
City Los Angeles	State CA Zip Code 90024	
Purpose of Disbursement	<input type="checkbox"/> 009	Transaction ID : SB19A.5146
Candidate Name Zein Obagi for Congress	Category/Type	
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.		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	<input type="checkbox"/>	
Candidate Name	Category/Type	
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) C.		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	<input type="checkbox"/>	
Candidate Name	Category/Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....	216.72
TOTAL This Period (last page this line number only).....	216.72

SCHEDULE C (FEC Form 3)
LOANS

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

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 53.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 53.00
----------------------------------	------------------------------------	------------------------------------------------------

TERMS

Date Incurred: M 02 / D 18 / Y 2012
Date Due: M / D / Y 12/31/2012
Interest Rate: 5.00 % (apr)
Secured: 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)..... ▶ 53.00

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/10.4442**

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 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

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 <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 1000.00	Cumulative Payment To Date 316.72	Balance Outstanding at Close of This Period 683.28
------------------------------------	--------------------------------------	-------------------------------------------------------

TERMS

Date Incurred M 02 / D 26 / 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
---------------------------------------	--------------------------------	-------------------------------	---------------------------------------------------------------------------------

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).....	▶	683.28
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/10.4451**

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
650.00 500.00 150.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 02 / D 29 / Y 2012 M M / D D / Y 12/31/12 Y 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)..... ▶ 150.00

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/10.4543**

LOAN SOURCE 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	State	ZIP Code
Los Angeles	CA	90024

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

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 03 / D 14 / Y 2012	M / D / Y 12/31/2012	5.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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).....	▶	40.00
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/10.4988

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:
M 05 / D 10 / Y 2012 M M / D D / Y 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)..... ▶

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/10.4908**

LOAN SOURCE 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	State	ZIP Code
Los Angeles	CA	90024

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

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
05 / 21 / 2012	12/30/2012	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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).....	▶	40.00
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/10.5148**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** 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
890.52	0.00	890.52

TERMS
 Date Incurred: M 06 / D 30 / Y 2012
 Date Due: M / D / Y 12/30/2012
 Interest Rate: 5.00 % (apr)
 Secured: 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).....	▶	890.52
TOTALS This Period (last page in this line only).....	▶	4506.80

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