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

SEE INSTRUCTIONS ON REVERSE

Statement covers period from 1-1-12 through 6-30-12

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

1. Type of Recipient Committee:
   - All Committees - Complete Parts 1, 2, 3, and 4.
     - Officierholder, Candidate Controlled Committee
     - State Candidate Election Committee
     - Recall (Also Complete Part 5)
     - General Purpose Committee
       - Sponsored
       - Small Contributor Committee
       - Political Party/Central Committee
   - Ballot Measure Committee
     - Primarily Formed
     - Controlled
     - Sponsored (Also Complete Part 6)
   - Primarily Formed Candidate/Officierholder Committee
     (Also Complete Part 7)

2. Type of Statement:
   - Preelection Statement
   - Semi-annual Statement
   - Quarterly Statement
   - Special Odd-Year Report
   - Amendment (Explain below)

3. Committee Information
   - I.D. NUMBER: 1333471
   - COMMITTEE NAME (OR CANDIDATE’S NAME IF NO COMMITTEE):
     FRIENDS OF THE IRANIAN AMERICAN JEWISH FEDERATION
   - STREET ADDRESS (NO P.O. BOX): 1317 CRESCENT HEIGHTS BLVD
   - CITY: WEST HOLLYWOOD
   - STATE: CA
   - ZIP CODE: 90046
   - AREA CODE/PHONE: 323-654-4700
   - Mailing Address (If Different) No. and Street or P.O. Box
   - CITY: WEST HOLLYWOOD
   - STATE: CA
   - ZIP CODE: 90046
   - AREA CODE/PHONE: 323-654-4700
   - Optional: Fax / E-mail Address

4. Verification
   I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

   Executed on 1-30-2012

   By
   (Signature of Treasurer or Assistant Treasurer)

   Executed on Date

   By
   (Signature of Controlling Officierholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor)

   Executed on Date

   By
   (Signature of Controlling Officierholder, Candidate, State Measure Proponent)

   Executed on Date

   By
   (Signature of Controlling Officierholder, Candidate, State Measure Proponent)

FPPC Form 460 (Draft-August/04)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
State of California
<table>
<thead>
<tr>
<th>Contributions Received</th>
<th>Column A</th>
<th>Column B</th>
<th>Calendar Year Summary for Candidates Running in Both the State Primary and General Elections</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Monetary Contributions</td>
<td>Schedule A, Line 3</td>
<td>$3900</td>
<td>$3900</td>
</tr>
<tr>
<td>2. Loans Received</td>
<td>Schedule B, Line 3</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>3. SUBTOTAL CASH CONTRIBUTIONS</td>
<td>Add Lines 1 + 2</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>4. Nonmonetary Contributions</td>
<td>Schedule C, Line 3</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>5. TOTAL CONTRIBUTIONS RECEIVED</td>
<td>Add Lines 3 + 4</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Expenditures Made</th>
<th>Column A</th>
<th>Column B</th>
<th>Expenditure Limit Summary for State Candidates</th>
</tr>
</thead>
<tbody>
<tr>
<td>6. Payments Made</td>
<td>Schedule E, Line 4</td>
<td>$3900</td>
<td>$3900</td>
</tr>
<tr>
<td>7. Loans Made</td>
<td>Schedule H, Line 3</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>8. SUBTOTAL CASH PAYMENTS</td>
<td>Add Lines 6 + 7</td>
<td>$3900</td>
<td>$3900</td>
</tr>
<tr>
<td>9. Accrued Expenses (Unpaid Bills)</td>
<td>Schedule F, Line 3</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>10. Nonmonetary Adjustment</td>
<td>Schedule C, Line 3</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>11. TOTAL EXPENDITURES MADE</td>
<td>Add Lines 8 + 9 + 10</td>
<td>$3900</td>
<td>$3900</td>
</tr>
</tbody>
</table>

Current Cash Statement

12. Beginning Cash Balance | Previous Summary Page, Line 16 | $146.39 |
13. Cash Receipts | Column A, Line 3 above |
14. Miscellaneous Increases to Cash | Schedule I, Line 4 |
15. Cash Payments | Column A, Line 8 above |
16. ENDING CASH BALANCE | Add Lines 12 + 13 + 14, then subtract Line 15 | $5.70 |

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

Cash Equivalents and Outstanding Debts

17. LOAN GUARANTEES RECEIVED | Schedule B, Part 2 | $0 |
18. Cash Equivalents | See instructions on reverse | 0 |
19. Outstanding Debts | Add Line 2 + Line 9 in Column B above | 0 |

*Since January 1, 2001. Amounts in this section may be different from amounts reported in Column B.
## Schedule B – Part 1
### Loans Received

**Statement covers period** from 1-1-12 through 6-30-12

<table>
<thead>
<tr>
<th>NAME OF FILER</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>OUTSTANDING BALANCE BEGINNING THIS PERIOD</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>AMOUNT PAID OR FORGIVEN THIS PERIOD</th>
<th>OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD</th>
<th>INTEREST PAID THIS PERIOD</th>
<th>ORIGINAL AMOUNT OF LOAN</th>
<th>CUMULATIVE CONTRIBUTIONS TO DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Friends of the Iranian American Jewish Federation</td>
<td>Manochehr Nazarian, President, Westside Wholesale Electric, 7122-A Beverly Blvd., Los Angeles, CA 90063</td>
<td>$0</td>
<td>$0</td>
<td>$3900</td>
<td>9/12/12</td>
<td>$0</td>
<td>0%</td>
<td>$3900</td>
<td>CALENDAR YEAR</td>
</tr>
<tr>
<td></td>
<td>☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC</td>
<td>☐ PAID ☐ FORGIVEN</td>
<td>☐ PAID ☐ FORGIVEN</td>
<td>☐ PAID ☐ FORGIVEN</td>
<td>☐ PAID ☐ FORGIVEN</td>
<td>☐ PAID ☐ FORGIVEN</td>
<td>☐ PAID ☐ FORGIVEN</td>
<td>☐ PAID ☐ FORGIVEN</td>
<td>☐ PAID ☐ FORGIVEN</td>
</tr>
</tbody>
</table>

| TOTALS | $0 | $0 | $3900 | $0 |

### Schedule B Summary

1. Loans received this period
   (Total Column (b) plus unitemized loans less than $100.)
   $$3900$$

2. Loans paid or forgiven this period
   (Total Column (c) plus loans under $100 paid or forgiven.)
   (Include loans paid by a third party that are also itemized on Schedule A.)
   $$0$$

3. Net change this period. (Subtract Line 2 from Line 1.)
   Enter the net here and on the Summary Page, Column A, Line 2.
   $$3900$$

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

**Contributor Codes**

IND – Individual	COM – Recipient Committee (other than PTY or SCC)
OTH – Other	PTY – Political Party	SCC – Small Contributor Committee
Schedule D
Summary of Expenditures
Supporting/Opposing Other Candidates, Measures and Committees

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

Statement covers period from 1-1-12 through 6-30-12

Friends of the Iranian American Jewish Federation
I.D. NUMBER 1333971

<table>
<thead>
<tr>
<th>DATE</th>
<th>NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE</th>
<th>TYPE OF PAYMENT</th>
<th>DESCRIPTION (IF REQUIRED)</th>
<th>AMOUNT THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
<tbody>
<tr>
<td>3-19-12</td>
<td>Healey For State Assembly 2012</td>
<td>X Monetary Contribution</td>
<td>3900</td>
<td>3900</td>
<td>3900</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Support</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Oppose</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

SUBTOTAL $ 3900

Schedule D Summary
1. Contributions and independent expenditures made this period of $100 or more. (Include all Schedule D subtotals.) .......................................................... $ 3900
2. Unitemized contributions and independent expenditures made this period of under $100 .......................................................... $ 0
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) .................. TOTAL $ 3900

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC