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Statement of C Recipient Con	-						ıp	CALIFC FOR	ACCRETE AND ACCESSION AND ACCESSION AND ACCESSION AND ACCESSION AND ACCESSION ACCESSIO	
Statement Type	Initial Amendment			Termi	ermination – See Part 5			Fo	r Official Use Only	
	Not yet qualified	ſ				narray frances		0 . 1		
	or O Date qualification t	or O Date qualification threshold met			Date of termination		anaronal Monara		indexed 10/28/21	
		/	10, 12, 21			instand manual m		HA HA	were for the second sec	
1. Committee Ir		D. Number			2. Treasurer and C	CO )ther Princina		re		
		(if applicable)	1441242							
NAME OF COMMITTEE					NAME OF TREASURER					
Dr. Sharona Naza	rian for Beverly H	Hills City Cou	ncil 2022		Gary Crummitt					
					· · · · ·					
STREET ADDRESS (NO P.O	BOX)				249 E. Ocean Blvd.,	, #670	STATE	ZIP CODE	AREA CODE/PHONE	
249 E. Ocean Blv					Long Roach					
CITY		TE ZIP CODE	AREA CODE/PHONE		Long Beach NAME OF ASSISTANT TREASURER, H	FANY	CA	90802	(562)983-0815	
Long Beach		CA 908	02 (562)983-08	815	Sharona Nazarian					
FULL MAILING ADDRESS (	(IF DIFFERENT)				STREET ADDRESS (NO P.O. BOX)					
					249 E. Ocean Blvd.,	<b>#</b> 670				
E-MAIL ADDRESS (REQUI	RED) / FAX (OPTIONAL)				CITY		STATE	ZIP CODE	AREA CODE/PHONE	
gary@crummittand		TION WHERE COMMITTE			Long Beach		CA	90802	(562)983-0815	
			IC IS ACTIVE		VAME OF PRINCIPAL OFFICER(S)					
Los Angeles	Ве	verly Hills			TREET ADDRESS (NO P.O. BOX)					
Attach additional	information on anor	printoly laboled	continuation chants		СІТҮ		STATE	ZIP CODE	AREA CODE/PHONE	
Attach adaltional	information on appro	ipriately labeleo	commutation sneets.							
3. Verification I have used all repenalty of perjuin Executed on Executed on Executed on Executed on	easonable diligence in ry under the laws of 1 10113221 DATE DATE	h preparing this : the State of Calif By By By	SIGNATURE OPCONT	IGNATURE OF TH	Owledge the informatic Correct. ASURER OR ASSISTANT TREASURER HOLDER, CANDIDATE, OR STATE ME	R ASURE PROPONENT	ein is tru	e and complete	. I certify under	
Executed on		Ву								
	DATE		SIGNATURE OF CONT	TROLLING OFFICE	HOLDER, CANDIDATE, OR STATE ME	ASURE PROPONENT		 FPPC	Form 410 (August/2018)	
							FPPC Adv		c.ca.gov (866/275-3772)	

Statement of Organization Recipient Committee	CALIFORNIA FORM 410
INSTRUCTIONS ON REVERSE	Page 2 of 4
COMMITTEE NAME	LD. NUMBER
Dr. Sharona Nazarian for Beverly Hills City Council 2022	1441242

## • All committees must list the financial institution where the campaign bank account is located.

NAME OF FINANCIAL INSTITUTION	AREA CODE/PHONE	BANK ACCOUNT	NUMBER	an an an ann an an an an an an an an an
California Bank & Trust	(213)228-1700			
ADDRESS	CITY	STATE	ZIP CODE	
550 S. Hope St., #100	Los Angeles	CA	90071	
4. Type of Committee Complete the applicabl	e sections.			

## Controlled Committee

- List the name of each controlling officeholder, candidate, or state measure proponent. If candidate or officeholder controlled, also list the elective office sought or held, and district number, if any, and the year of the election.
- List the political party with which each officeholder or candidate is affiliated or check "nonpartisan." Stating "No party preference" is acceptable.
- If this committee acts jointly with another controlled committee, list the name and identification number of the other controlled committee.

ELECTIVE OFFICE SOUGHT OR HELD (INCLUDE DISTRICT NUMBER IF APPLICABLE)	YEAR OF ELECTION			
City Council Member Beverly Hills	2022	Nonpartisan X	Partisan	(list political party below)
		Nonpartisan	Partisan	(list political party below)
	(INCLUDE DISTRICT NUMBER IF APPLICABLE)	(INCLUDE DISTRICT NUMBER IF APPLICABLE) ELECTION	(INCLUDE DISTRICT NUMBER IF APPLICABLE) ELECTION CHECK City Council Member Beverly Hills 2022 X	(INCLUDE DISTRICT NUMBER IF APPLICABLE)         ELECTION         CHECK ONE           City Council Member Beverly Hills         2022         X         Partisan

## Primarily Formed Committee

Primarily formed to support or oppose specific candidates or measures in a single election. List below:

(INCLUDE DISTRICT NO., CITY OR COUNTY, AS APPLICABLE)	CHEC	KONE
	SUPPORT	OPPOSE
	SUPPORT	OPPOSE
	(INCLUDE DISTRICT NO., CITY OR COUNTY, AS APPLICABLE)	SUPPORT

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Statement of Organization Recipient Committee	on					CALIFORNIA FORM 410
COMMITTEE NAME			<u>na an a</u>			I.D. NUMBER
Dr. Sharona Nazarian for Beve						1441242
4. Type of Committee (C	continued)					
General Purpose Committee	Not formed to support or oppose :		didates or measures in a s NTY Committee	ingle election. Check	•	
PROVIDE BRIEF DESCRIPTION OF ACTIVITY					·	······
Sponsored Committee List a	dditional sponsors on an attachmer	ıt.				
NAME OF SPONSOR		IN	NDUSTRY GROUP OR AFFILIATION OF SPO	DNSOR		
STREET ADDRESS NO. AND STREE	т	CITY		STATE	ZIP CODE	AREA CODE/PHONE
Small Contributor Committee	Date qualified					
5. Termination Requirement	S By signing the verification, the treas	urer, assistant	treasurer and/or candidate, offic	eholder, or proponent certi	fy that all of the fo	llowing conditions have been met:
<ul> <li>This committee has ceased t</li> </ul>	to receive contributions and make e	xpenditures	s;			
<ul> <li>This committee does not and</li> </ul>	ticipate receiving contributions or n	aking expe	nditures in the future;			

- This committee has eliminated or has no intention or ability to discharge all debts, loans received, and other obligations;
- This committee has no surplus funds; and
- This committee has filed all campaign statements required by the Political Reform Act disclosing all reportable transactions.
  - -- There are restrictions on the disposition of surplus campaign funds held by elected officers who are leaving office and by defeated candidates. Refer to Government Code Section 89519.
  - -- Leftover funds of ballot measure committees may be used for political, legislative or governmental purposes under Government Code Sections 89511 89518, and are subject to Elections Code Section 18680 and FPPC Regulation 18521.5.

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Additional Comments For Form 410	ADDITIONAL COMMENTS CALIFORNIA FORM 410
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COMMITTEE NAME	I.D. NUMBER
Dr. Sharona Nazarian for Beverly Hills City Council 2022	1441242

Adding date qualified