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Image# 14978214173

FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An	Authorized Cor	nmittee			Office Use Only
NAME OF COMMITTEE (in	TYPE OR PRII		Example: If typin over the lines.	ig, type	12FE4M5	
Pablo Kleinma	n for Congress					
l						
	j 525 E. Seasi	de Way, #101-C				
ADDRESS (number ar						
Check if dif						
than previous reported. (A					CA S	00802
2. <b>FEC IDENTIFIC</b>	CATION NUMBER ▼	CITY ▲			STATE A	ZIP CODE
C C0055436	60	3. IS THIS REPORT	× NEW	OR	AMEND (A)	STATE ▼ DISTRICT  ED   CA   30
	PORT (Choose One)	(b) 12-Day <b>PR</b>	<b>E</b> -Election Repo	ort for the:		
(a) Quarterly R	eports:	П	Primary (12P	)	General (1	2G) Runoff (12R)
April 15	Quarterly Report (Q1)	l ï		_		
July 15	Quarterly Report (Q2)		Convention (	12C)	Special (12	28)
X Octobe	r 15 Quarterly Report (Q3)	Election or	n M M /	D D /	YYYY	in the State of
January	y 31 Year-End Report (YE)	(c) 30-Day <b>PO</b>	ST-Election Rep	port for the:		
			General (30G	G)	Runoff (30	R) Special (30S)
Termina	ation Report (TER)	Election of	n /	D D /	Y " Y " Y	in the State of
5. Covering Period	07 / 01 D	/ Y Y Y Y 2014	through	M M 09	30	2014
I certify that I have e	examined this Report and	to the best of my l	knowledge and	belief it is tr	ue, correct and	complete.
Type or Print Name	of Treasurer Gary Crumr	nitt				
Signature of Treasure	er Gary Crummitt		[Electronically I	Filed] [	Date 07	14 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of	false, erroneous, or incomp	olete information may	y subject the per	rson signing	this Report to th	ne penalties of 2 U.S.C. §437g.
Office						
Use Only						FEC FORM 3 (Revised 02/2003)

#### **SUMMARY PAGE**

of Receipts and Disbursements

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FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

### Pablo Kleinman for Congress

R	epor	t Covering the Period: From:	07 01 Y Y Y Y T	: 09 d d d d d d d d d d d d d d d d d d
			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))	600.00	79515.00
	(b)	Total Contribution Refunds (from Line 20(d))	0.00	0.00
	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	600.00	79515.00
7.	Net	Operating Expenditures		
	(a)	Total Operating Expenditures (from Line 17)	377.59	115848.32
	(b)	Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	377.59	115848.32
8.		sh on Hand at Close of porting Period (from Line 27)	3681.68	
9.	the	ots and Obligations Owed <b>TO</b> Committee (Itemize all on needule C and/or Schedule D)	0.00	
10.	the	ots and Obligations Owed BY Committee (Itemize all on needule C and/or Schedule D)	69533.72	

#### 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)

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Write or Type Committee Name

Pablo	Kleinman	for	Congress
-------	----------	-----	----------

Report Covering the Period: From: 07 01 2014 To: 09 30 2014

I. RECEIPT	rs	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
1. CONTRIBUTIONS (other	than loans) FROM:		
(a) Individuals/Persons (i) Political Committees (i) Itemized (use Sc		500.00	72800.00
(ii) Unitemized (iii) TOTAL of contrib		100.00	3715.00
from individuals		600.00	76515.00
(b) Political Party Comm (c) Other Political Comm		0.00	0.00
(such as PACs)		0.00	3000.00
(d) The Candidate  (e) TOTAL CONTRIBUTI (other than loans)		0.00	0.00
(add Lines 11(a)(iii),	b), (c), and (d))	600.00	79515.00
2. TRANSFERS FROM OTH AUTHORIZED COMMITTI		0.00	0.00
3. LOANS: (a) Made or Guaranteed	by the		
(a) Made or Guaranteed Candidate	· ·	0.00	0.00
(b) All Other Loans (c) TOTAL LOANS		0.00	88133.72
(c) TOTAL LOANS (add Lines 13(a) and	(b))	0.00	88133.72
4. OFFSETS TO OPERATING EXPENDITURES	G		
(Refunds, Rebates, etc.).		0.00	0.00
5. OTHER RECEIPTS (Dividends, Interest, etc.)		0.00	15.00
6. <b>TOTAL RECEIPTS</b> (add 11(e), 12, 13(c), 14, and (Carry Total to Line 24, p	15)	600.00	167663.72

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3 (Revised 02/2003)

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	377.59	115848.32
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19.	LOAN REPAYMENTS:		
	(a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
	(b) Of All Other Loans	0.00	30000.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	30000.00
20.	REFUNDS OF CONTRIBUTIONS TO:		
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
		200	0.00
	(c) Other Political Committees	0.00	0.00
	(such as PACs)	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21.	OTHER DISBURSEMENTS	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	377.59	145848.32
	III. CASH S	SUMMARY	
23.	CASH ON HAND AT BEGINNING OF REF	PORTING PERIOD	3459.27
24	TOTAL RECEIPTS THIS PERIOD (from Lir	ne 16, page 3)	600.00
25.	SUBTOTAL (add Line 23 and Line 24)		4059.27
26.	TOTAL DISBURSEMENTS THIS PERIOD (	(from Line 22)	377.59
	CASH ON HAND AT CLOSE OF REPORT		3681.68

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

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

FOR	R LINE	NU	MBER:	PAGE	:	5	OF	13
(che	eck only	or	ne)					
×	11a		11b	11c		11	d	_
	12		13a	13b		14	ļ	15

		Statements may not be sold or used by any pe e name and address of any political committee	
	NAME OF COMMITTEE (In Full)  Pablo Kleinman for Congress	Than and address of any political committee	to solicit contributions from such confinities.
Α.	Full Name (Last, First, Middle Initial) Samuel Freshman  Mailing Address 6151 W. Century Blvd. Ste. 3		Date of Receipt  08 11 2014
	City Los Angeles	State Zip Code CA 90045	Transaction ID : INCA203
	FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
	Name of Employer Standard Management  Receipt For: 2014  Primary General Other (specify)	Occupation Real Estate Investment  Election Cycle-to-Date  500.00	500.00
В.	Full Name (Last, First, Middle Initial)  Mailing Address		Date of Receipt
	City	State Zip Code	
	FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
	Receipt For: Primary General Other (specify)	Occupation  Election Cycle-to-Date	-
_	Full Name (Last, First, Middle Initial)		Date of Receipt
C.	Mailing Address  City	State Zip Code	M = M / D = D / Y = Y = Y
	FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
	Name of Employer	Occupation	
	Receipt For:  Primary General Other (specify)	Election Cycle-to-Date	
[	SUBTOTAL of Receipts This Page (optional)		500.00
Г	OTAL This Period (last page this line number		500.00

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: 97 A = G7 9 @ G B9 C I G H9 L H F 9 @ 5 H9 8 HC 5 F 9 D C F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: SA11AI Transaction ID: INCA203

Primary Debt Retirement

Form/Schedule: Transaction ID:

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

	FOR LINE	NUMBER	₹:	F	PAGE	7	OF	13
Use separate schedule(s)	(check onl							
for each category of the Detailed Summary Page	X	17 [		18		19a		] 19k
Detailed Suffillary Fage		20a		20b		20c		21
y not be sold or used by any person for the purpose of soliciting contributions								

	by information copied from such Reports and Statements may not be sold or used by a for commercial purposes, other than using the name and address of any political commercial purposes.		
	NAME OF COMMITTEE (In Full) Pablo Kleinman for Congress		
۹.	Full Name (Last, First, Middle Initial) Citi Cards		Date of Disbursement
	Mailing Address Processing Center		08 08 2014
	City State Zip Code Des Moines IA 50363-0005		Amount of Each Disbursement this Period
	Purpose of Disbursement Credit card payment  00	_	377.59  Transaction ID : EXPB202
	Candidate Name  Categ Typ  Office Sought: House Disbursement For: 2014		
	Office Sought:    House   Disbursement For: 2014		
	Full Name (Last, First, Middle Initial)		Polos ( Pick served
3.	Mailing Address		Date of Disbursement
	City State Zip Code		Amount of Each Disbursement this Period
	Purpose of Disbursement	$\neg$	, , , , , , , , , , , , , , , , , , , ,
	Candidate Name Categ		
	Office Sought:  House Senate President  Disbursement For: Primary Other (specify)  State:  District:		
	Full Name (Last, First, Middle Initial)		
Э.			Date of Disbursement
	Mailing Address		
	City State Zip Code		Amount of Each Disbursement this Period
	Purpose of Disbursement  Candidate Name  Category	2001	, ,
	Categ Typ  Office Sought: House Disbursement For:		
	Senate President Other (specify)  State: District:		
s	SUBTOTAL of Disbursements This Page (optional)		377.59
	OTAL This Period (last page this line number only)		377.59

### SCHEDULE C (FEC Form 3)

Use separate schedule(s)

FOR LINE NUMBER:

PAGE

	i
	13a
$\overline{}$	106

13

OANS			for each category of Detailed Summary Pa	
IAME OF COMMITTEE (In Ful	•		Transa	action ID : PAYC56
Pablo Kleinman for Co	ongress			
Pablo Kleinman	e (Last, First, Middle Initia	al)		Election: 2014  Primary  General
Mailing Address 3906 Murietta Ave.				Other (specify)
City	State	ZIP Code	)	
Sherman Oaks	CA	91423		
Original Amount of Loan	70000.00	ative Payment To D	ate Bal	lance Outstanding at Close of This Period
	70000.00		0000.00	1000.00
Date Incurre	d 2014 Y	Date Due	Interest Ra	0 % (apr)
List All Endorsers or Gua	rantors (if any) to Loan S	Source		Yes No
1. Full Name (Last, First, I	Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State ZIP C	ode	Amount Guaranteed Outstanding:	9 9 9
2. Full Name (Last, First, M	liddle Initial)		Name of Employer	
Mailing Address		(	Occupation	
City	State ZIP C	ode	Amount Guaranteed Outstanding:	9 9 9
3. Full Name (Last, First, M	liddle Initial)	1	Name of Employer	
Mailing Address		(	Occupation	
City	State ZIP C	ode	Amount Guaranteed Outstanding:	g
4. Full Name (Last, First, M	liddle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State ZIP C	ode	Amount Guaranteed Outstanding:	9 9 9
SUBTOTALS This Period This	Page (optional)			40000.00
TOTALS This Period (last pag	e in this line only)			
Carry outstanding balance or	ly to LINE 3, Schedule D,	for this line. If no	Schedule D, carry for	ward to appropriate line of Summary.

**1mage# 14978214181** PAGE 9 / 13

### : 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DCF HZ'G7 < 98 I @ 'CF' ± H9 A ± N5 H± C B

Form/Schedule: SC/10 Transaction ID: PAYC56

Loan From Personal Funds

Form/Schedule: Transaction ID:

### SCHEDULE C (FEC Form 3)

Use separate schedule(s) for each category of the

PAGE 10 FOR LINE NUMBER:

13

DANS			Detailed Sum		(check only or	ıe)	13a X 13b
AME OF COMMITTEE (In Full)				Transaction	n ID : PAYC178		· · ·
Pablo Kleinman for Congres	ss						
LOAN SOURCE Full Name (Last,	First, Middle Initia	al)		E	lection: 2014		
Pablo Kleinman					Primary		
Mailing Address					General		
3906 Murietta Ave.					Other (specify)		
City	State	ZIP Cod	e	I			
Sherman Oaks	CA	91423					
Original Amount of Loan	Cumul	ative Payment To [	Date	Balance	Outstanding at C	lose of Th	his Period
1813	3.72		0.00			18133	3.72
TERMS  Date Incurred		Date Due	Inte	erest Rate		Secured	:
M 05 / D 30 / Y 2014	Y M M /	D D / Y12/	31/2015 <sup>Y</sup>	0.00	0/ / >		X
	(if any) to I can				% (apr)	Yes	No
List All Endorsers or Guarantors  1. Full Name (Last, First, Middle I			Name of Employ	/er			
T. Tan Name (East, First, Middle )	ridaly			, 0.			
Mailing Address			Occupation				
		1	Amount				_
City	State ZIP C	,oue	Guaranteed Outstanding:	7	y	_	
2. Full Name (Last, First, Middle Ir	nitial)		Name of Employ	/er			
Mailing Address			Occupation				
			Amount				_
City	State ZIP C	,oue	Guaranteed Outstanding:		7		
3. Full Name (Last, First, Middle Ir	nitial)		Name of Employ	/er			
Mailing Address			Occupation				
			Amount				
City	State ZIP C	7000	Guaranteed Outstanding:		7		
4. Full Name (Last, First, Middle Ir	nitial)		Name of Employ	/er			
Mailing Address			Occupation				
			A				
City	State ZIP C	Code	Amount Guaranteed				
			Outstanding:				
SUBTOTALS This Period This Page (	optional)					18133	3.72
				-	7 7		
TOTALS This Period (last page in this	s line only)			·		58133	3.72
Carry outstanding balance only to LI	NE 3 Schedule D	for this line If n	o Schedule D	arry forward	to appropriate I	ine of Su	ımmarv

**1mage# 14978214183** PAGE 11 / 13

#### : 97 A = G7 9 @ G B9 C I G H9 L H F 9 @ 5 H9 8 HC 5 F 9 D C F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: SC/10 Transaction ID: PAYC178

LOAN FROM PERSONAL FUNDS

Form/Schedule: Transaction ID:

## SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 12 OF
FOR LINE NUMBER:
(check only one)

9 **X** 10

13

NAME OF COMMITTEE (In Full)	
Pablo Kleinman	for Congress

٢	abio Kieinman for Cong	gress		
T.	A. Full Name (Last, First, Middle Initial) of Debtor of	or Creditor		Nature of Debt (Purpose):
	CTM Consulting			Fundraising/Consultant
f	Mailing Address 7119 W. Sunset Blvd., #444			
t	City State	Zip Code		
	Los Angeles	CA	90046	
	Outstanding Balance Beginning This Period			Transaction ID : PAYD200
	6000.00			
	000.00			
	Amount Incurred This Period	Paym	ent This Period	Outstanding Balance at Close of This Period
	0.00		0.0	6000.00
ŀ	B. Full Name (Last, First, Middle Initial) of Debtor or	r Creditor		Nature of Debt (Purpose):
	Maureen Johnson			Volunteer Recruitment Consultant
Mailing Address 8828 Pershing Dr., #108				
f	City State	Zip Code		
L	Playa Del Rey	CA	90293	
	Outstanding Balance Beginning This Period 3000.00			Transaction ID : PAYD201
	Amount Incurred This Period	Paym	ent This Period	Outstanding Balance at Close of This Period
	0.00		0.0	0 3000.00
ŀ	C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
	Mara Kochba			Fundraising/Consultant
	Mailing Address 9301 Wilshire Blvd., #613			
t	City	State	Zip Code	
	Beverly Hills	CA	90210	
	Outstanding Balance Beginning This Period			Transaction ID : PAYD199
	1000.00			
		5		
	Amount Incurred This Period	Paym	ent This Period	Outstanding Balance at Close of This Period
	0.00		0.0	1000.00
1)	SUBTOTALS This Period This Page (optional)			10000.00
•,	The renew ring rage (optional)			
2)	TOTALS This Period (last page this line number or	nly)		. •
3)	TOTAL OUTSTANDING LOANS from Schedule C	(last page only	·)	<b>&gt;</b>
4)	ADD 2) and 3) and carry forward to appropriate lin	ne of Summary	Page (last page only	y) <b>&gt;</b>

### SCHEDULE D (FEC Form 3) **DEBTS AND OBLIGATIONS**

**Excluding Loans** 

(Use separate schedule(s) for each numbered line)

PAGE 13 OF FOF (che

R LINE NUMBER:		
eck only one)		9
	$\overline{\mathbf{v}}$	10

NAME OF COMMITTEE (In Full) Pablo Kleinman for Congress A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Field Strategy Consultant Darby Levin Mailing Address 13260 Moorpark, #1 Zip Code City Sherman Oaks CA 91423 **Transaction ID: PAYD158** Outstanding Balance Beginning This Period 1400.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 1400.00 0.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 1400.00 1) SUBTOTALS This Period This Page (optional)..... 11400.00 2) TOTALS This Period (last page this line number only)..... 58133.72 TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 69533.72 ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)