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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

| FORM 3 | For An A | Authorized Com | mittee | Offic | Office Use Only | | | | | |
|-----------------------------------|--|-----------------------|--------------------------------------|----------------------------|---------------------------------|--|--|--|--|--|
| 1. NAME OF COMMITTEE (in full) | TYPE OR PRIN | • | ample: If typing, type er the lines. | 12FE4M5 | | | | | | |
| Pablo Kleinman fo | r Congress | | | | 1 | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| ADDRESS (number and stre | eet) | e Way, #101-C | | | | | | | | |
| ▼ Check if different | . L | | | | | | | | | |
| than previously reported. (ACC) | Long Beach | | | CA 9080 |)2 | | | | | |
| . FEC IDENTIFICATION | ON NUMBER ▼ | CITY ▲ | | STATE A | ZIP CODE ▲ | | | | | |
| C C00554360 | | 3. IS THIS REPORT | NEW (N) OR | AMENDED (A) | STATE ▼ DISTRICT | | | | | |
| . TYPE OF REPOR | T (Choose One) | | | | | | | | | |
| (a) Quarterly Reports | | (b) 12-Day PRE | -Election Report for the | he: | | | | | | |
| | . | | Primary (12P) | General (12G) | Runoff (12R) | | | | | |
| April 15 Qual | rterly Report (Q1) | П | Convention (12C) | Special (12S) | | | | | | |
| July 15 Quar | terly Report (Q2) | _ | Convention (120) | E openia (120) | | | | | | |
| October 15 (| Quarterly Report (Q3) | Election on | M M / D D | / Y Y Y Y | in the State of | | | | | |
| January 31 Y | /ear-End Report (YE) | (c) 30-Day POS | T-Election Report for | the: | | | | | | |
| _ | | | General (30G) | Runoff (30R) | Special (30S) | | | | | |
| Termination F | Report (TER) | Election on | M M M / D D | / Y Y Y Y | in the State of | | | | | |
| i. Covering Period | M M / D D / | Y Y Y Y Y 2017 | through | 03 / D D / Y | y y y 2017 | | | | | |
| certify that I have examin | ned this Report and to Crummitt, Ga | | nowledge and belief it | is true, correct and cor | nplete. | | | | | |
| Type or Print Name of Tre | easurer | | | | | | | | | |
| Signature of Treasurer | Crummitt, Gary, , , | | [Electronically Filed] | Date 04 | 11 / Y Y Y Y Y Y 2017 | | | | | |
| NOTE: Submission of false, | erroneous, or incomple | ete information may | subject the person sigr | ning this Report to the pe | enalties of 52 U.S.C. §3010 | | | | | |
| Office | | | | | | | | | | |
| Use Only | | | | | FEC FORM 3 (Revised 05/2016) | | | | | |

SUMMARY PAGE

of Receipts and Disbursements

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
Pablo Kleinman for Congress

2017 2017 03 01 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 0.00 0.00 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 0.00 0.00 (subtract Line 6(b) from Line 6(a)) 7. Net Operating Expenditures (a) Total Operating Expenditures 0.00 0.00 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 0.00 0.00 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 7.00 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 66030.72 Schedule C and/or Schedule D).....

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 05/2016)

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Write or Type Committee Name

Pablo Kleinman for Congress

Report Covering the Period: From: 01 01 2017 To: 03 31 2017

| | I. RECEIPTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date | | | | | |
|------------|--|-------------------------------|------------------------------------|--|--|--|--|--|
| 1. CC | ONTRIBUTIONS (other than loans) FROM: | | | | | | | |
| (a) | Individuals/Persons Other Than Political Committees | | | | | | | |
| | (i) Itemized (use Schedule A) | 0.00 | 0.00 | | | | | |
| | (ii) Unitemized | 0.00 | 0.00 | | | | | |
| | (iii) TOTAL of contributions from individuals | 0.00 | 0.00 | | | | | |
| (b) | | 0.00 | 0.00 | | | | | |
| (c) | Other Political Committees (such as PACs) | 0.00 | 0.00 | | | | | |
| (d) (e) | The Candidate TOTAL CONTRIBUTIONS | 0.00 | 0.00 | | | | | |
| | (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)) | 0.00 | 0.00 | | | | | |
| | ANSFERS FROM OTHER ITHORIZED COMMITTEES | 0.00 | 0.00 | | | | | |
| 3. LC | | | | | | | | |
| (a) | Made or Guaranteed by the Candidate | 0.00 | 0.00 | | | | | |
| (b) | | 0.00 | 0.00 | | | | | |
| (c) | TOTAL LOANS (add Lines 13(a) and (b)) | 0.00 | 0.00 | | | | | |
| | FSETS TO OPERATING | | | | | | | |
| | PENDITURES efunds, Rebates, etc.) | 0.00 | 0.00 | | | | | |
| | THER RECEIPTS vidends, Interest, etc.) | 0.00 | 0.00 | | | | | |
| 11 | DTAL RECEIPTS (add Lines (e), 12, 13(c), 14, and 15) arry Total to Line 24, page 4) | 0.00 | 0.00 | | | | | |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 05/2016)

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| | | II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|-----|-----|--|-------------------------------|---------------------------------|
| 17. | OPI | ERATING EXPENDITURES | 0.00 | 0.00 |
| 18. | | ANSFERS TO OTHER THORIZED COMMITTEES | 0.00 | 0.00 |
| 19. | LO | AN REPAYMENTS: | | |
| | (a) | Of Loans Made or Guaranteed by the Candidate | 0.00 | , 0.00 |
| | (b) | Of All Other Loans | 0.00 | 0.00 |
| | (c) | TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)) | 0.00 | 0.00 |
| 20. | REF | FUNDS OF CONTRIBUTIONS TO: | | |
| | (a) | Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| | | | 200 | 200 |
| | (b) | Political Party Committees Other Political Committees | 0.00 | 0.00 |
| | (0) | (such as PACs) | 0.00 | 0.00 |
| | (d) | TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)) | 0.00 | 0.00 |
| 21. | ОТІ | HER DISBURSEMENTS | 0.00 | 0.00 |
| 22. | | TAL DISBURSEMENTS d Lines 17, 18, 19(c), 20(d), and 21) | 0.00 | 0.00 |
| | | III. CASH SU | MMARY | |
| 23. | CAS | SH ON HAND AT BEGINNING OF REPOR | RTING PERIOD | 7.00 |
| 24 | то | TAL RECEIPTS THIS PERIOD (from Line 1 | 16, page 3) | 0.00 |
| 25. | SUI | BTOTAL (add Line 23 and Line 24) | | 7.00 |
| 26. | TO | TAL DISBURSEMENTS THIS PERIOD (from | m Line 22) | 0.00 |
| 27. | | SH ON HAND AT CLOSE OF REPORTING | G PERIOD | 7.00 |

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

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

PAGE 5 OF FOR LINE NUMBER: (check only one) 13a

10

X 13b **Transaction ID: PAYC56** NAME OF COMMITTEE (In Full) Pablo Kleinman for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Kleinman, Pablo, , , General Mailing Address 3906 Murietta Ave. Other (specify) \blacktriangledown City State ZIP Code Personal Funds of the Candidate CA 91423 Sherman Oaks Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 30000.00 70000.00 40000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D31 D M 03M ž014 Y None x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 40000.00 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.

: 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: PAYC56

Loan From Personal Funds

Form/Schedule: Transaction ID:

SCHEDULE C (FEC Form 3) LOANS

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

PAGE 7 OF 10

FOR LINE NUMBER: (check only one) 13a

| | | | | | X | 130 | | | | |
|---------------------------------------|---------------------------------|------------------|-------------|--------------------------------|--|-------------|--|--|--|--|
| NAME OF COMMITT | ree (In Full) n for Congress | | | Tra | ransaction ID : PAYC178 | | | | | |
| | | | | | | | | | | |
| LOAN SOURCE | Full Name (Last, First, Mic | ddle Initial) | | ☐ Memo | | | | | | |
| Kleinman, Pablo, , , | | | | | Primary | | | | | |
| Mailing Address | Mailing Adduses | | | | General Other (appoint) | | | | | |
| Mailing Address 3906 Murietta Ave. | | | | | Other (specify) | | | | | |
| City | | State | ZIP Code | 9 | Personal Funds of the Car | ndidate | | | | |
| Sherman Oaks | | CA | 91423 | | reservant and or and our | | | | | |
| Original Amount | t of Loan | Cumulative Pay | yment To D | ate | Balance Outstanding at Close of This | Period | | | | |
| | 18133.72 | 9 | | 0.00 | 18133.72 | 2 | | | | |
| TERMS D | Date Incurred | C | Date Due | | st Rate Secured: e, enter 0) | | | | | |
| M ₀₅ M / D ₃ | 30 ^D / Y Ž014 Y | M M / D D | / Y12/3 | š1/2015 ^v | 0.00 % (apr) Yes | x No | | | | |
| List All Endorse | rs or Guarantors (if any) t | o Loan Source | | | | | | | | |
| | ast, First, Middle Initial) | <u> </u> | | Name of Employer | | | | | | |
| | · | | | | | | | | | |
| Mailing Addre | ess | | | Occupation | | | | | | |
| | | | | Amount | | | | | | |
| City | State | ZIP Code | | Guaranteed Outstanding: | 7 7 7 | | | | | |
| 2. Full Name (La | st, First, Middle Initial) | | | Name of Employer | | | | | | |
| Mailing Addres | ss | | | Occupation | | | | | | |
| | | | | Amount | | | | | | |
| City | State | ZIP Code | | Guaranteed | | | | | | |
| 3 Full Namo (La | st, First, Middle Initial) | | | Outstanding: Name of Employer | | | | | | |
| 5. I dii Name (La | ist, i list, ivildale lilitial) | | | Name of Employer | | | | | | |
| Mailing Addres | ss | | | Occupation | | | | | | |
| | | | | Amount | | | | | | |
| City | State | ZIP Code | I | Guaranteed Outstanding: | | | | | | |
| 4. Full Name (La | st, First, Middle Initial) | | | Name of Employer | | | | | | |
| Mailing Addre | SS | | | Occupation | | | | | | |
| | | | | Amount | | | | | | |
| City | State | ZIP Code | | Guaranteed Outstanding: | , , , , , , , | | | | | |
| | | | | - | | | | | | |
| SUBTOTALS This F | Period This Page (optional). | | | ······ | 18133.72 | , | | | | |
| | d (last page in this line only | | | | 58133.72 | Ħ | | | | |
| | | | | | , , , , , , , , | | | | | |
| Corme outstanding | halanca anly to LINE 2 Sal | adula D for this | c line If s | Sobodulo D. sorr | ry forward to appropriate line of from | | | | | |

: 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 9
FOR LINE NUMBER: (check only one)

9 **X** 10

10

OF

NAME OF COMMITTEE (In Full)

Pablo Kleinman for Congress

| H | 'ablo Kleinman for Co | ongre | SS | | | | | | | |
|----|---|---------------------------|---|---|--|--|--|--|--|--|
| | A. Full Name (Last, First, Middle Initial) of De | Nature of Debt (Purpose): | | | | | | | | |
| | CTM Consulting | | | Fundraising/Consultant | | | | | | |
| ŀ | Mailing Address 7119 W. Sunset Blvd., #444 | | | _ | | | | | | |
| | | | T=1 0 1 | | | | | | | |
| | City State Los Angeles CA | | Zip Code 90046 | | | | | | | |
| ŀ | Outstanding Balance Beginning This Period | 071 | 00010 | Transaction ID : PAYD200 | | | | | | |
| | | | | Transaction is . I ATS200 | | | | | | |
| | 4049.00 | | | | | | | | | |
| | Amount Incurred This Period | | Payment This Period | Outstanding Balance at Close of This Perio | | | | | | |
| | 0.00 | | 0.00 | 4049.00 | | | | | | |
| ŀ | B. Full Name (Last, First, Middle Initial) of Deb | otor or Credi | tor | | | | | | | |
| | Johnson, Maureen, , , | otor or orear | toi | Nature of Debt (Purpose): Volunteer Recruitment Consultant | | | | | | |
| | | | | | | | | | | |
| | Mailing Address 8828 Pershing Dr., #108 | | | | | | | | | |
| ŀ | City | State | Zip Code | _ | | | | | | |
| | Playa Del Rey | CA | 90293 | | | | | | | |
| | Outstanding Balance Beginning This Period | | | Transaction ID : PAYD201 | | | | | | |
| | 2220.00 | | | | | | | | | |
| | Amount Incurred This Period | | Payment This Period | Outstanding Balance at Close of This Period | | | | | | |
| | 0.00 | | 0.00 | 2220.00 | | | | | | |
| | y y y | | 7 | , | | | | | | |
| Ī | C. Full Name (Last, First, Middle Initial) of De | Nature of Debt (Purpose): | | | | | | | | |
| | Kochba, Mara, , , | | | Fundraising/Consultant | | | | | | |
| ŀ | Mailing Address 9301 Wilshire Blvd., #613 | | | _ | | | | | | |
| ļ | | 01-1- | 75. 0. 4 | | | | | | | |
| | City Beverly Hills | State CA | Zip Code 90210 | | | | | | | |
| ı | Outstanding Balance Beginning This Period | | 1 112.1 | Transaction ID : PAYD199 | | | | | | |
| | | | | Transaction is . LATE 133 | | | | | | |
| | 669.00 | | | | | | | | | |
| | Amount Incurred This Period | _ | Payment This Period | Outstanding Balance at Close of This Period | | | | | | |
| | 0.00 | | 0.00 | 669.00 | | | | | | |
| | | | | | | | | | | |
| 1) | SUBTOTALS This Period This Page (optional) |) | | 6938.00 | | | | | | |
| 2) | TOTALS This Period (last page this line numl | ber only) ····· | | | | | | | | |
| _ | | | | | | | | | | |
| 3) | TOTAL OUTSTANDING LOANS from Schedu | | | | | | | | | |
| 4) | ADD 2) and 3) and carry forward to appropri | | | | | | | | | |
| • | , , , , , , , , , , , , , , , , , , , | - | , | 7 | | | | | | |

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS

Excluding Loans

Mailing Address

Outstanding Balance Beginning This Period

Amount Incurred This Period

City

(Use separate schedule(s) for each numbered line) PAGE 10
FOR LINE NUMBER: (check only one)

9 **x** 10

10

OF

| Pablo Kleinman for (| Congre | ess | |
|--|---------------------------|---------------------|--|
| A. Full Name (Last, First, Middle Initial) of | Nature of Debt (Purpose): | | |
| Levin, Darby, , , | Field Strategy Consultant | | |
| Mailing Address 13260 Moorpark, #1 | | | |
| City | State | Zip Code | |
| Sherman Oaks | CA | 91423 | |
| Outstanding Balance Beginning This Perio | od | | Transaction ID : PAYD158 |
| 959.00 | | | |
| Amount Incurred This Period | | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | | 0.00 | 959.00 |
| D = N | | | |
| B. Full Name (Last, First, Middle Initial) of D | Debtor or Cred | litor | Nature of Debt (Purpose): |
| B. Full Name (Last, First, Middle Initial) of D. Mailing Address | Oebtor or Crec | litor | Nature of Debt (Purpose): |
| , , , | State | Zip Code | Nature of Debt (Purpose): |
| Mailing Address | State | | Nature of Debt (Purpose): |
| Mailing Address City | State | | Nature of Debt (Purpose): Outstanding Balance at Close of This Period |

| | | | | 7 | | 7 | | |
|----|--|--|---|---|---|---|---------|----|
| 1) | SUBTOTALS This Period This Page (optional) | | I | , | Ξ | 7 | 959.0 | 00 |
| 2) | TOTALS This Period (last page this line number only) | | | , | _ | , | 7897.0 | 00 |
| 3) | TOTAL OUTSTANDING LOANS from Schedule C (last page only) | | | , | | 7 | 58133.7 | 2 |
| 4) | ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | | Ξ | 7 | Ξ | 7 | 66030.7 | '2 |
| | | | | | | | | |

Zip Code

Payment This Period

State

Outstanding Balance at Close of This Period