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REPORT OF RECEIPTS **AND DISBURSEMENTS**

FOR An	Authorized Committee	Office	e Use Only
NAME OF TYPE OR PR COMMITTEE (in full)	Example: If typing, fover the lines.	type 12FE4M5	
Pablo Kleinman for Congress			1
ADDRESS (number and street)	ide Way, #101-C		
Charle if different			
Check if different than previously reported. (ACC)		CA 9080)2
2. FEC IDENTIFICATION NUMBER ▼	CITY ▲	STATE A	ZIP CODE ▲
C C00554360	3. IS THIS NEW (N)	OR AMENDED (A)	STATE ▼ DISTRICT
4. TYPE OF REPORT (Choose One)	(b) 12-Day PRE -Election Report	for the	
(a) Quarterly Reports:	(b) 12-bay Phe -Election heport	or trie.	
April 15 Quarterly Report (Q1)	Primary (12P)	General (12G)	Runoff (12R)
	Convention (120	Special (12S)	
July 15 Quarterly Report (Q2)	M " M / I	D D / Y Y Y Y	in the
October 15 Quarterly Report (Q3)			State of
January 31 Year-End Report (YE)	(c) 30-Day POST -Election Report	for the:	
	General (30G)	Runoff (30R)	Special (30S)
	General (30d)	nulion (50h)	Special (303)
Termination Report (TER)	Election on	7 Y Y Y Y Y	in the State of
5. Covering Period 04 01	/ Y Y Y Y Y Y through	M M / D D / Y 30	2018
I certify that I have examined this Report and Crummitt, Type or Print Name of Treasurer		ef it is true, correct and con	nplete.
Crummitt, Gary, , , Signature of Treasurer	[Electronically File	d] Date	12 / Y Y Y Y Y Y Y 2018
NOTE: Submission of false, erroneous, or incom	plete information may subject the person	signing this Report to the per	nalties of 52 U.S.C. §30109
Office			
Use Only			EC 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

2018 2018 06 30 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: Man / Dan / Yayayay To: Man / Dan / Yayayay To: Man / Dan / Yayayay

I. RECEIPTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date	
1. C	CONTRIBUTIONS (other than loans) FROM:			
(a	•			
	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	
(k	,	0.00	0.00	
(0	c) Other Political Committees (such as PACs)	0.00	0.00	
(c (€	TOTAL CONTRIBUTIONS	0.00	0.00	
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	0.00	
	RANSFERS FROM OTHER	0.00	0.00	
Α	UTHORIZED COMMITTEES	0.00	0.00	
	OANS: a) Made or Guaranteed by the			
(0	Candidate	0.00	0.00	
(k	,	0.00	0.00	
(0	c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	0.00	
	PFFSETS TO OPERATING			
	XPENDITURES Refunds, Rebates, etc.)	0.00	0.00	
	OTHER RECEIPTS Dividends, Interest, etc.)	0.00	0.00	
- 1	OTAL RECEIPTS (add Lines 1(e), 12, 13(c), 14, and 15) Carry 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		SBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date		
17.	OPERATII	NG EXPENDITURES	0.00	0.00		
18.		ERS TO OTHER IZED COMMITTEES	0.00	0.00		
19.	-	PAYMENTS: oans Made or Guaranteed				
	by th	ne Candidate	0.00	0.00		
	` '	II Other Loans	0.00	0.00		
		Lines 19(a) and (b))	0.00	0.00		
20.	_	S OF CONTRIBUTIONS TO: iduals/Persons Other				
	. ,	Political Committees	0.00	0.00		
	` '	ical Party Committees	0.00	0.00		
	` '	r Political Committees n as PACs)	0.00	0.00		
	` '	AL CONTRIBUTION REFUNDS Lines 20(a), (b), and (c))	0.00	0.00		
21.	OTHER D	DISBURSEMENTS	0.00	0.00		
22.		DISBURSEMENTS s 17, 18, 19(c), 20(d), and 21)	0.00	0.00		
		III. CASH SUI	MMARY			
23.	CASH ON	N HAND AT BEGINNING OF REPOR	TING PERIOD	7.00		
24	TOTAL R	ECEIPTS THIS PERIOD (from Line 10	6, page 3)	0.00		
25.	SUBTOTA	AL (add Line 23 and Line 24)		7.00		
26.	TOTAL D	ISBURSEMENTS THIS PERIOD (from	n Line 22)	0.00		
27.		N HAND AT CLOSE OF REPORTING Line 26 from Line 25)	PERIOD	7.00		

SCHEDULE C (FEC Form 3) LOANS

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

PAGE 5 OF 10

FOR LINE NUMBER: (check only one) 13a

					Detailed Guillinary	i age	x 13b
	ME OF COMMITTEE (In Full) ablo Kleinman for Congres	s			Tran	saction l	D:PAYC56
Щ	LOAN SOURCE Full Name (Lest	Circt Mic	ddla Initial\			Fla	-4:
	LOAN SOURCE Full Name (Last, First, Middle Initial) Kleinman, Pablo, , ,					em Elec	otion: 2014 Primary General
	Mailing Address 3906 Murietta Ave.						Other (specify) ▼
	City		State	ZIP Cod	e	Personal Funds of the Candidate	
	Sherman Oaks		CA	91423	T crashar r unus or the		
	Original Amount of Loan		Cumulative Pay	yment To [Balance (Outstanding at Close of This Period
	70000	.00	7	9	30000.00		40000.00
	TERMS Date Incurred		D	ate Due	Interest (If none, e		Secured:
	M03 ^M / D31 ^D / Y 2014	Υ	M M / D D	/ Y.	Y None	0.00	% (apr) Yes No
	List All Endorsers or Guarantors	(if any) t	o Loan Source				
	1. Full Name (Last, First, Middle In	nitial)			Name of Employer		
	Mailing Address				Occupation		
					Amount		
	City	State	ZIP Code		Guaranteed Outstanding:	7	
	Full Name (Last, First, Middle Initial) Mailing Address				Name of Employer Occupation		
					Amount		
	City	State	ZIP Code		Guaranteed Outstanding:	7	, ,
	3. Full Name (Last, First, Middle Initial)				Name of Employer		
	Mailing Address				Occupation		
					Amount		
	City	State	ZIP Code		Guaranteed Outstanding:	7	
	4. Full Name (Last, First, Middle In	itial)			Name of Employer		
	Mailing Address			Occupation			
				Amount			
	City	State	ZIP Code		Guaranteed Outstanding:	7	7
SI	SUBTOTALS This Period This Page (optional)						
-	OTALS This Period (last page in this						, , , , , ,
Ļ	arry outstanding balance only to LI	JE 2 Cal	andulo D. for this	lino If	Sobodule D. serre	formeral	to appropriate line of Summer.
· ·	any outstanding palance only to Lif	v⊑ J. JCI	iedule D. for this	s mie. II N	o ochedule D, carry	ioi ward	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 OF FOR LINE NUMBER: (check only one)

10

13a X 13b **Transaction ID: PAYC178** 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 18133.72 0.00 18133.72 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D30 D M 05M ž014 Y12/31/2015 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 State ZIP Code City 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)..... 18133.72 TOTALS This Period (last page in this line only)..... 58133.72 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'F9 @ 5 H98 'HC'5 'F9 DCF HZ'G7 < 98 I @ 'CF' ± H9 A ± N5 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 OF
FOR LINE NUMBER:
(check only one)

	9
X	10

10

NAME OF COMMITTEE (In Full)

Pablo Kleinman for Congress

Pablo Kleinman for C	ongreر	ess				
A. Full Name (Last, First, Middle Initial) of CTM Consulting	Nature of Debt (Purpose): Fundraising/Consultant					
Mailing Address 7119 W. Sunset Blvd., #444						
City Los Angeles	State CA	Zip Code 90046				
Outstanding Balance Beginning This Period	Outstanding Balance Beginning This Period					
4049.00						
Amount Incurred This Period 0.00		Payment This Period 0.00	Outstanding Balance at Close of This Period 4049.00			
B. Full Name (Last, First, Middle Initial) of E Johnson, Maureen, , ,	Nature of Debt (Purpose): Volunteer Recruitment Consultant					
Mailing Address 8828 Pershing Dr., #108						
City Playa Del Rey	State CA	Zip Code 90293				
Outstanding Balance Beginning This Period		Transaction ID : PAYD201				
Amount Incurred This Period 0.00		Payment This Period 0.00	Outstanding Balance at Close of This Period 2220.00			
C. Full Name (Last, First, Middle Initial) of Kochba, Mara, , ,	C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Kochba, Mara, , ,					
Mailing Address 9301 Wilshire Blvd., #613						
City Beverly Hills	State CA	Zip Code 90210				
Outstanding Balance Beginning This Period	od		Transaction ID : PAYD199			
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 (option	nal))	6938.00			
2) TOTALS This Period (last page this line nu	umber only) ····)				
3) TOTAL OUTSTANDING LOANS from Sche	edule C (last p	page only)·····				
4) ADD 2) and 3) and carry forward to appro	priate line of	Summary Page (last page only)				

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

Excluding Loans

(Use separate schedule(s) for each

PAGE 10 OF FΩ (che

R LINE NUMBER: eck only one)		9
,	×	10

numbered line) 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 Levin, Darby, , , Mailing Address 13260 Moorpark, #1 State Zip Code City CA 91423 Sherman Oaks Transaction ID: PAYD158 Outstanding Balance Beginning This Period 959.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 959.00 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 Payment This Period Amount Incurred 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 1) SUBTOTALS This Period This Page (optional) 959.00 2) TOTALS This Period (last page this line number only) 7897.00 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)-----58133.72

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

66030.72