

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines.

12FE4M5

Pablo Kleinman for Congress

ADDRESS (number and street) ▼

525 E. Seaside Way, #101-C

Check if different than previously reported. (ACC)

Long Beach

CA

90802

2. **FEC IDENTIFICATION NUMBER** ▼

C C00554360

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

CA

30

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

(c) 30-Day **POST**-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y
01 / 01 / 2014

through

M M / D D / Y Y Y Y
03 / 31 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Gary Crummitt

Signature of Treasurer Gary Crummitt

[Electronically Filed]

Date

M M / D D / Y Y Y Y
04 / 12 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 27

Write or Type Committee Name

Pablo Kleinman for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

	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))....	44044.00	44044.00
(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)).....	44044.00	44044.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	30381.76	30381.76
(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)).....	30381.76	30381.76
8. Cash on Hand at Close of Reporting Period (from Line 27).....	83662.24	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	92650.00	

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)

Write or Type Committee Name

Pablo Kleinman for Congress

Report Covering the Period: From: / / To: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	40800.00	40800.00
(ii) Unitemized.....	1244.00	1244.00
(iii) TOTAL of contributions from individuals ▶	42044.00	42044.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	2000.00	2000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	44044.00	44044.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	70000.00	70000.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	70000.00	70000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....		
	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	114044.00	114044.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	30381.76	30381.76
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	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (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) ►	30381.76	30381.76

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	114044.00
25. SUBTOTAL (add Line 23 and Line 24).....	114044.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	30381.76
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	83662.24

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Pablo Kleinman for Congress

A. Full Name (Last, First, Middle Initial)
Emiliano Calemzuk

Mailing Address 875 Comstock Ave. Unit 4D

City Los Angeles State CA Zip Code 90024

FEC ID number of contributing federal political committee. **C**

Name of Employer Emiliano Calemzuk Occupation Entertainment

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : INCA80

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Mark Cicirelli

Mailing Address 30 W. 61st St. Unit 6D

City New York State NY Zip Code 10023

FEC ID number of contributing federal political committee. **C**

Name of Employer Elliott Management Occupation Investment Banker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 14 / 2014

Transaction ID : INCA13

Amount of Each Receipt this Period
 2600.00

C. Full Name (Last, First, Middle Initial)
Cynthia Cohen

Mailing Address 2111 Coldwater Canyon

City Beverly Hills State CA Zip Code 90210

FEC ID number of contributing federal political committee. **C**

Name of Employer Cynthia Cohen Occupation Psychotherapist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : INCA78

Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Pablo Kleinman for Congress

A. Full Name (Last, First, Middle Initial)
Eytan Elbaz

Mailing Address 10750 Wilshire Blvd. Unit 602

City Los Angeles State CA Zip Code 90024

FEC ID number of contributing federal political committee. **C**

Name of Employer Scopely Occupation Founder

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 03 / 2014

Transaction ID : INCA7

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Gabriel L. Eshaghian

Mailing Address 7128 Woodrow Wilson Dr.

City Los Angeles State CA Zip Code 90068

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 29 / 2014

Transaction ID : INCA51

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Sabrina Eshaghian

Mailing Address 303 E. 43rd St. Unit 7A

City New York State NY Zip Code 10017

FEC ID number of contributing federal political committee. **C**

Name of Employer The Somerset Group Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 12 / 2014

Transaction ID : INCA11

Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Pablo Kleinman for Congress

A. Full Name (Last, First, Middle Initial)
Daniel Fujita

Mailing Address 1643 Brickell Ave. Unit 1902

City Miami State FL Zip Code 33129

FEC ID number of contributing federal political committee. **C**

Name of Employer Smile Market Inc. Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : INCA49

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Vivian Grafstein

Mailing Address 1157 Calle Vista Dr.

City Beverly Hills State CA Zip Code 90210

FEC ID number of contributing federal political committee. **C**

Name of Employer Vivian Grafstein Occupation Psychotherapist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 22 / 2014

Transaction ID : INCA43

Amount of Each Receipt this Period
 1800.00

C. Full Name (Last, First, Middle Initial)
Andres Kleinman

Mailing Address 1010 Harding Ave.

City Venice State CA Zip Code 90291

FEC ID number of contributing federal political committee. **C**

Name of Employer Scopely, Inc. Occupation Chief Business Officer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 23 / 2014

Transaction ID : INCA2

Amount of Each Receipt this Period
 2600.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Pablo Kleinman for Congress

A. Full Name (Last, First, Middle Initial)
Diana Kleinman

Mailing Address 624 Cambridge Terrace

City Weston State FL Zip Code 33326

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 31 / 2014

Transaction ID : INCA6

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
Horacio Kleinman

Mailing Address 525 E. Seaside Way Unit 101-C

City Long Beach State CA Zip Code 90802

FEC ID number of contributing federal political committee. **C**

Name of Employer Horacio Kleinman Occupation Entrepreneur

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 04 / 2014

Transaction ID : INCA30

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Luis I. Kleinman

Mailing Address 624 Cambridge Terrace

City Weston State FL Zip Code 33326

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 31 / 2014

Transaction ID : INCA5

Amount of Each Receipt this Period
 2600.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Pablo Kleinman for Congress

A. Full Name (Last, First, Middle Initial)
Pablo Kleinman

Mailing Address 3906 Murietta Ave.

City Sherman Oaks State CA Zip Code 91423

FEC ID number of contributing federal political committee. **C**

Name of Employer Urbita, Inc. Occupation Technology Entrepreneur

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
72600.00

Date of Receipt
 M M / D D / Y Y Y Y
01 / 23 / 2014

Transaction ID : INCA3

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Silvia Kleinman

Mailing Address 15 Via Bel Canto

City Henderson State NV Zip Code 89011

FEC ID number of contributing federal political committee. **C**

Name of Employer Bernards Bistro Occupation Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 28 / 2014

Transaction ID : INCA75

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Darren Lewin

Mailing Address 1832 Armacost Ave.

City Los Angeles State CA Zip Code 90025

FEC ID number of contributing federal political committee. **C**

Name of Employer Abacus Insurance Brokers, Inc. Occupation Insurance

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
01 / 21 / 2014

Transaction ID : INCA32

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Pablo Kleinman for Congress

A. Full Name (Last, First, Middle Initial)
Mark Mullen

Mailing Address 411 Lombard Ave.

City Pacific Palisades State CA Zip Code 90272

FEC ID number of contributing federal political committee. **C**

Name of Employer Double M Capital Occupation Investment Banker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 18 / 2014

Transaction ID : INCA41

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Cynthia Neiman

Mailing Address 17211 Rancho St.

City Encino State CA Zip Code 91316

FEC ID number of contributing federal political committee. **C**

Name of Employer Ergobaby Occupation Chief Marketing Officer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : INCA79

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Eliseo Neuman

Mailing Address 164 Banks St. Unit 10A

City New York State NY Zip Code 10014

FEC ID number of contributing federal political committee. **C**

Name of Employer American Jewish Committee Occupation Policy Analyst

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 17 / 2014

Transaction ID : INCA16

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Pablo Kleinman for Congress

A. Full Name (Last, First, Middle Initial)
Lisa Ann Niehoff-Cicirelli

Mailing Address 30 W. 61st St. Unit 6D

City State Zip Code
New York NY 10024

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
N/A Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
900.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 14 / 2014

Transaction ID : INCA14

Amount of Each Receipt this Period
900.00

B. Full Name (Last, First, Middle Initial)
Ber Oberfeld

Mailing Address 17 Beverly Ridge Ter.

City State Zip Code
Beverly Hills CA 90210

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Ber Oberfeld Real Estate Investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 01 / 2014

Transaction ID : INCA38

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Fabian Oberfeld

Mailing Address 26 Beverly Park Terrace

City State Zip Code
Beverly Hills CA 90210

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 29 / 2014

Transaction ID : INCA52

Amount of Each Receipt this Period
2600.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Pablo Kleinman for Congress

A. Full Name (Last, First, Middle Initial)
Mauricio Oberfeld

Mailing Address 9318 Nightingale Dr.

City	State	Zip Code
Los Angeles	CA	90069

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Dugally Oberfeld, Inc.	CEO/Developer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 23 / 2014

Transaction ID : INCA1

Amount of Each Receipt this Period

2600.00

B. Full Name (Last, First, Middle Initial)
Raquel Oberfeld

Mailing Address 17 Beverly Ridge Ter.

City	State	Zip Code
Beverly Hills	CA	90210

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
N/A	Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 01 / 2014

Transaction ID : INCA39

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
Luis Oganés

Mailing Address 99 Warren St. Unit 11J

City	State	Zip Code
New York	NY	10007

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
JP Morgan	Economist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2014

Transaction ID : INCA17

Amount of Each Receipt this Period

2600.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6200.00

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

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

FOR LINE NUMBER: PAGE 13 OF 27
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Pablo Kleinman for Congress

A. Full Name (Last, First, Middle Initial)
Luis Oganés

Mailing Address 99 Warren St. Unit 11J

City State Zip Code
New York NY 10007

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
JP Morgan Economist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 17 / 2014

Transaction ID : INCA18

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Izzy Rechtshaid

Mailing Address 7442 Amestoy Ave.

City State Zip Code
Lake Balboa CA 91406

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Izzy Rechtshaid Appliance

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 29 / 2014

Transaction ID : INCA76

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Hamid Towfigh

Mailing Address P.O.Box 94

City State Zip Code
Los Angeles CA 90406

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Hamid Towfigh Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : INCA58

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Pablo Kleinman for Congress

A. Full Name (Last, First, Middle Initial)
Gabriela Trench

Mailing Address 624 Cambridge Terrace

City Weston State FL Zip Code 33326

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : INCA57

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Nurten Goksu Yolac

Mailing Address 124 Hudson St. Unit 2A

City New York State NY Zip Code 10013

FEC ID number of contributing federal political committee. **C**

Name of Employer JP Morgan Chase Occupation Investmnt Banking

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2014

Transaction ID : INCA19

Amount of Each Receipt this Period
 2600.00

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3100.00

40800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 27
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Pablo Kleinman for Congress

A. Full Name (Last, First, Middle Initial)
Gallegly For Congress

Mailing Address P.O.Box 940001

City State Zip Code
Simi Valley CA 93094

FEC ID number of contributing federal political committee. **C** C00194803

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 19 / 2014

Transaction ID : INCA40

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 27
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Pablo Kleinman for Congress

A. Full Name (Last, First, Middle Initial)
Pablo Kleinman

Mailing Address 3906 Murietta Ave.

City Sherman Oaks State CA Zip Code 91423

FEC ID number of contributing federal political committee. **C**

Name of Employer Urbita, Inc. Occupation Technology Entrepreneur

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
72600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : PAYA56

Amount of Each Receipt this Period
70000.00

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

70000.00

70000.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA13B

Transaction ID : PAYA56

Loan From Personal Funds

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 27	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Pablo Kleinman for Congress

Full Name (Last, First, Middle Initial) A. Citi Cards		Date of Disbursement MM / DD / YYYY 02 / 14 / 2014
Mailing Address Processing Center		Amount of Each Disbursement this Period 3139.13
City Des Moines	State IA	
Zip Code 50363-0005	Purpose of Disbursement Credit Card Payment	Transaction ID : EXPB12
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Affinia Manhattan Hotel		Date of Disbursement MM / DD / YYYY 02 / 14 / 2014
Mailing Address 371 7th Ave.		Amount of Each Disbursement this Period 299.26
City New York	State NY	
Zip Code 10001	Purpose of Disbursement Travel for candidate and campaign manager	Transaction ID : EDTB1EXPB12
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. JW Marriott Washington DC		Date of Disbursement MM / DD / YYYY 02 / 14 / 2014
Mailing Address 1331 Pennsylvania Ave. NW		Amount of Each Disbursement this Period 710.76
City Washington	State DC	
Zip Code 20004	Purpose of Disbursement Travel for candidate and campaign manager	Transaction ID : EDTB2EXPB12
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3139.13
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 19 OF 27	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Pablo Kleinman for Congress

Full Name (Last, First, Middle Initial) A. Crummitt & Associates		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2014
Mailing Address 525 E. Seaside Way, #101-C		Amount of Each Disbursement this Period 2550.00 Transaction ID : EXPB22
City Long Beach	State CA	
Zip Code 90802	Purpose of Disbursement Treasurer Services	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. CTM Consulting		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2014
Mailing Address 7119 W. Sunset Blvd., #444		Amount of Each Disbursement this Period 3000.00 Transaction ID : EXPB4
City Los Angeles	State CA	
Zip Code 90046	Purpose of Disbursement Fundraising Consultant	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. CTM Consulting		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2014
Mailing Address 7119 W. Sunset Blvd., #444		Amount of Each Disbursement this Period 3000.00 Transaction ID : EXPB21
City Los Angeles	State CA	
Zip Code 90046	Purpose of Disbursement Fundraising Consultant	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	8550.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 27	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Pablo Kleinman for Congress

Full Name (Last, First, Middle Initial) A. Mara Kochba & Associates			Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014	
Mailing Address 9301 Wilshire Blvd., #613			Amount of Each Disbursement this Period 3500.00	
City Beverly Hills	State CA	Zip Code 90210	Transaction ID : EXPB34	
Purpose of Disbursement Fundraising Consultant		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. NationBuilder			Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014	
Mailing Address 448 S. Hill St., #200			Amount of Each Disbursement this Period 39.06	
City Los Angeles	State CA	Zip Code 90013	Transaction ID : EXPB25	
Purpose of Disbursement Credit card processing fee		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. NationBuilder			Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2014	
Mailing Address 448 S. Hill St., #200			Amount of Each Disbursement this Period 41.85	
City Los Angeles	State CA	Zip Code 90013	Transaction ID : EXPB26	
Purpose of Disbursement Credit card processing fee		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	3580.91
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 27			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Pablo Kleinman for Congress

Full Name (Last, First, Middle Initial) A. NationBuilder			Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2014	
Mailing Address 448 S. Hill St., #200			Amount of Each Disbursement this Period 18.95	
City Los Angeles	State CA	Zip Code 90013	Transaction ID : EXPB28	
Purpose of Disbursement Credit card processing fee		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. NationBuilder			Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014	
Mailing Address 448 S. Hill St., #200			Amount of Each Disbursement this Period 314.32	
City Los Angeles	State CA	Zip Code 90013	Transaction ID : EXPB29	
Purpose of Disbursement Credit card processing fee		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. NationBuilder			Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014	
Mailing Address 448 S. Hill St., #200			Amount of Each Disbursement this Period 97.69	
City Los Angeles	State CA	Zip Code 90013	Transaction ID : EXPB95	
Purpose of Disbursement Credit card processing fee		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	430.96
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 27	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Pablo Kleinman for Congress

Full Name (Last, First, Middle Initial) A. Probolsky Research		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014
Mailing Address 3990 Westerly Pl., #185		Amount of Each Disbursement this Period 5000.00 Transaction ID : EXPB35
City Newport Beach State CA Zip Code 92660	Purpose of Disbursement Research Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) B. Secretary of State		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2014
Mailing Address 1500 11th St.		Amount of Each Disbursement this Period 1740.00 Transaction ID : EXPB20
City Sacramento State CA Zip Code 95814	Purpose of Disbursement Filing Fee Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) c. Anthony Trejo		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2014
Mailing Address 16731 Addison St.		Amount of Each Disbursement this Period 5000.00 Transaction ID : EXPB9
City Encino State CA Zip Code 91436	Purpose of Disbursement Campaign Management Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	11740.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 27			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Pablo Kleinman for Congress

Full Name (Last, First, Middle Initial) A. Anthony Trejo		Date of Disbursement MM / DD / YYYY 03 / 08 / 2014
Mailing Address 16731 Addison St.		Amount of Each Disbursement this Period 2500.00 Transaction ID : EXPB36
City Encino State CA Zip Code 91436	Purpose of Disbursement Campaign Management Candidate Name Category/Type 001	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Anthony Trejo		Date of Disbursement MM / DD / YYYY 03 / 08 / 2014
Mailing Address 16731 Addison St.		Amount of Each Disbursement this Period 425.76 Transaction ID : EXPB37
City Encino State CA Zip Code 91436	Purpose of Disbursement Expense Reimbursement Candidate Name Category/Type 001	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Candidate Name Category/Type	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2925.76
TOTAL This Period (last page this line number only).....	30366.76

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Pablo Kleinman for Congress** Transaction ID : **PAYC56**

LOAN SOURCE Full Name (Last, First, Middle Initial) Pablo Kleinman	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 3906 Murietta Ave.	

City	State	ZIP Code
Sherman Oaks	CA	91423

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
70000.00	0.00	70000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
03 / 31 / 2014	None	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	70000.00
TOTALS This Period (last page in this line only).....	70000.00

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-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SC/10

Transaction ID : PAYC56

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 26 OF 27
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

Pablo Kleinman for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Crummitt & Associates	Nature of Debt (Purpose): Treasurer Services
Mailing Address 525 E. Seaside Way, #101-C	
City State Zip Code Long Beach CA 90802	

Outstanding Balance Beginning This Period 0.00	Transaction ID : PAYD89	
Amount Incurred This Period 2050.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2050.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Crummitt & Associates	Nature of Debt (Purpose): Treasurer Services
Mailing Address 525 E. Seaside Way, #101-C	
City State Zip Code Long Beach CA 90802	

Outstanding Balance Beginning This Period 0.00	Transaction ID : PAYD90	
Amount Incurred This Period 2050.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2050.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Probolsky Research	Nature of Debt (Purpose): Poll/Survey
Mailing Address 3990 Westerly Pl., #185	
City State Zip Code Newport Beach CA 92660	

Outstanding Balance Beginning This Period 0.00	Transaction ID : PAYD63	
Amount Incurred This Period 14400.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 14400.00

1) SUBTOTALS This Period This Page (optional)	18500.00
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	0.00

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Pablo Kleinman for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Anthony Trejo

Nature of Debt (Purpose):
Campaign Management

Mailing Address 16731 Addison St.

City State Zip Code
Encino CA 91436

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD59

Amount Incurred This Period

2500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Tim Wayne

Nature of Debt (Purpose):
Website Maintenance

Mailing Address 32 Belvedere St.

City State Zip Code
San Francisco CA 94117

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD67

Amount Incurred This Period

1650.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1650.00

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) ▶
- 2) **TOTALS** This Period (last page this line number only) ▶
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶
- 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

4150.00

22650.00

70000.00

92650.00