

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Kim Dolbow Vann for Congress

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

	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))....	765.41	2265.41
(b) Total Contribution Refunds (from Line 20(d))	0	0
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	765.41	2265.41
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	8877.26	73403.22
(b) Total Offsets to Operating Expenditures (from Line 14).....	0	0
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	8877.26	73403.22
8. Cash on Hand at Close of Reporting Period (from Line 27).....	10501.61	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	8533.66	

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

Kim Dolbow Vann for Congress

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2013 To: M M / D D / Y Y Y Y 03 / 31 / 2013

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).....	765.41	2265.41
(ii) Unitemized.....	0	0
(iii) TOTAL of contributions from individuals ▶	765.41	2265.41
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) The Candidate.....	0	0
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	765.41	2265.41
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0	0
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0	0
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0	0
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0	0
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	232.04	596.05
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	997.45	2861.46

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	8877.26	73403.22
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0	0
21. OTHER DISBURSEMENTS	0	0
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	8877.26	73403.22

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	18381.42
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	997.45
25. SUBTOTAL (add Line 23 and Line 24).....	19378.87
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	8877.26
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	10501.61

**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 11
	<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)
Kim Dolbow Vann for Congress

A. Full Name (Last, First, Middle Initial)
Douglas Ose

Mailing Address **PO Box 255628**

City **Sacramento** State **CA** Zip Code **95865-5628**

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

Name of Employer **Self-Employed** Occupation **Developer**

Receipt For: 2012
 Primary General
 Other (specify) **General 2012**

Election Cycle-to-Date
3265.41

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2013

Transaction ID : A-I1745

Amount of Each Receipt this Period
765.41

Inkind: **Fundraiser Catering**

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 M / D 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 M / D 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).....

765.41

765.41

**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 11
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Kim Dolbow Vann for Congress

A. Full Name (Last, First, Middle Initial)
Sutter County Clerk

Mailing Address 433 2nd Street

City Yuba City State CA Zip Code 95991-5504

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify) General 2012

Election Cycle-to-Date
444.37

Date of Receipt
 M M / D D / Y Y Y Y
01 / 17 / 2013

Transaction ID : A-M1734

Amount of Each Receipt this Period
232.04

Refund of Statement Fees

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

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

Amount of Each Receipt this Period

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

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

232.04

232.04

**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 7 OF 11			
	<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)
Kim Dolbow Vann for Congress

Full Name (Last, First, Middle Initial) A. Aristotle International, Inc.		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2013
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 825 Transaction ID : B-E-1736
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Software Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2012	
State: District:		

Full Name (Last, First, Middle Initial) B. State Fund		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2013
Mailing Address 900 Corporate Center Drive		Amount of Each Disbursement this Period 476.81 Transaction ID : B-E-1735
City Monterey Park State CA Zip Code 91754-7618	Purpose of Disbursement Insurance 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) C. AT&T		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2013
Mailing Address PO Box 5025		Amount of Each Disbursement this Period 80.65 Transaction ID : B-E-1737
City Carol Stream State IL Zip Code 60197-5025	Purpose of Disbursement Telephone 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:		

SUBTOTAL of Disbursements This Page (optional).....	1382.46
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 8 OF 11	
	<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)
Kim Dolbow Vann for Congress

Full Name (Last, First, Middle Initial) A. Bell McAndrews & Hiltachk, LLP		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2013
Mailing Address 455 Capitol Mall Suite 600		Amount of Each Disbursement this Period 142.8 Transaction ID : B-E-1738
City Sacramento	State CA Zip Code 95814-4439	
Purpose of Disbursement Professional Legal 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. Stutzman Public Affairs		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2013
Mailing Address 1415 L Street Suite 430		Amount of Each Disbursement this Period 6000 Transaction ID : B-E-1423
City Sacramento	State CA Zip Code 95814-3963	
Purpose of Disbursement Strategic Consulting	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2012	
State: District:		

Full Name (Last, First, Middle Initial) c. The KAL Group		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2013
Mailing Address PO Box 984		Amount of Each Disbursement this Period 586.59 Transaction ID : B-E-1739
City Willows	State CA Zip Code 95988-0984	
Purpose of Disbursement Bookkeeping	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2012	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6729.39
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 9 OF 11	
	<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)
Kim Dolbow Vann for Congress

Full Name (Last, First, Middle Initial) A. Douglas Ose		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2013
Mailing Address PO Box 255628		Amount of Each Disbursement this Period 765.41
City Sacramento	State CA Zip Code 95865-5628	
Purpose of Disbursement Inkind: Fundraiser Catering		Transaction ID : B-I-1745
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2012	
State: _____ District: _____		

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

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

SUBTOTAL of Disbursements This Page (optional).....	765.41
TOTAL This Period (last page this line number only).....	8877.26

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

Kim Dolbow Vann for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Stutzman Public Affairs		Nature of Debt (Purpose): Campaign Strategy Consulting
Mailing Address 1415 L Street Suite 430		
City State	Zip Code	
Sacramento CA	95814-3963	

Outstanding Balance Beginning This Period	Transaction ID : SD10-DEBT1724	
<input type="text" value="13000"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0"/>	<input type="text" value="6000"/>	<input type="text" value="7000"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Theodore Company, LLC		Nature of Debt (Purpose): Fundraising Commission
Mailing Address PO Box 320412		
City State	Zip Code	
Alexandria VA	22320-4412	

Outstanding Balance Beginning This Period	Transaction ID : SD10-DEBT1632	
<input type="text" value="1000"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="1000"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Sutter Club		Nature of Debt (Purpose): Bill Paid by Inkind See Sch A
Mailing Address 1220 9th Street		
City State	Zip Code	
Sacramento CA	95814-4805	

Outstanding Balance Beginning This Period	Transaction ID : SD10-DEBT1744	
<input type="text" value="765.41"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="-765.41"/>	<input type="text" value="0"/>	<input type="text" value="0"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="8000.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

Kim Dolbow Vann for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor United States Treasury		Nature of Debt (Purpose): Payroll Taxes
Mailing Address PO Box 105083		
City State Zip Code Atlanta GA 30348-5083		

Outstanding Balance Beginning This Period <input type="text" value="533.66"/>		Transaction ID : SD10-DEBT1728	
Amount Incurred This Period <input type="text" value="0"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="533.66"/>	

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 <input type="text"/>		Outstanding Balance at Close of This Period <input type="text"/>	
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>		

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 <input type="text"/>		Outstanding Balance at Close of This Period <input type="text"/>	
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>		

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="533.66"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="8533.66"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="8533.66"/>