Image#	20161	017903	2887683
mayor	20101	017303	2001000

I

10/17/2016 14 : 41

PAGE 1 / 10

FFC I	REPORT AND DIS	-	MENTS			Office Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT	•	Example: If typing over the lines.	g, type	12FE4M5	
Pablo Kleinman for C	ongress	<u> </u>				
ADDRESS (number and street)	525 E. Seaside V	Vay, #101-C				
Check if different than previously reported. (ACC)	Long Beach					90802
2. FEC IDENTIFICATION N	NUMBER 🔻	CITY 🔺			STATE A	ZIP CODE
C C00554360		3. IS THIS REPORT	X NEW (N)	OR	AMENDI (A)	ED STATE ▼ DISTRICT
4. TYPE OF REPORT (C (a) Quarterly Reports: April 15 Quarterly July 15 Quarterly	Report (Q1)	(b) 12-Day PF	RE-Election Report Primary (12P) Convention (1		General (12 Special (12	
Cctober 15 Quart	erly Report (Q3)	Election of	on			State of
January 31 Year-t	End Report (YE)	(c) 30-Day P(DST -Election Rep			
Termination Repo	rt (TER)	Election of	General (30G)	D D /	Runoff (30F	R) Special (30S) in the State of
5. Covering Period	07 / D D /	Y Y Y Y 2016	through	M N 09	1 / D D / 30	Y Y Y Y 2016
I certify that I have examined Type or Print Name of Treasur	Crummitt, Gary,		knowledge and b	elief it is t	rue, correct and	complete.
	ummitt, Gary, , ,		[Electronically F	iled]	Date	/ D D / Y Y Y Y 15 2016
NOTE: Submission of false, erro	neous, or incomplete	information ma	y subject the pers	on signing	this Report to the	e penalties of 52 U.S.C. §3010
Office Use Only						FEC FORM 3 (Revised 05/2016)

SUMMARY PAGE of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 2 / 10

Write or Type Committee Name Pablo Kleinman for Congress

R	epor	t Covering the Period: From:	M / D D / Y Y Y Y 01 / 2016 To:	M 09 / D D / Y Y Y 30 / 2016
			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))	0.00	0.00
	(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))	0.00	0.00
7.	Net	Operating Expenditures		
	(a)	Total Operating Expenditures (from Line 17)	0.00	3674.68
	(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))	0.00	3674.68
8.		sh on Hand at Close of porting Period (from Line 27)	7.00	
9.	the	ots and Obligations Owed TO Committee (Itemize all on nedule C and/or Schedule D)	0.00	
10.	the	ots and Obligations Owed BY Committee (Itemize all on nedule C and/or Schedule D)	66030.72	

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

Γ	FEC Form 3 (Revised 05/2016)	TAILED SUMMARY PAGE of Receipts	PAGE 3 / 10
W	rite or Type Committee Name		
F	Pablo Kleinman for Congress		
R	eport Covering the Period: From: 07	/ D D / Y Y Y Y 01 / 2016 To	. 09 30 / Y Y Y Y 2016
	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)	0.00	0.00
	· · · · · · · · · · · · · · · · · · ·	7 7 7	0.00
	(ii) Unitemized	0.00	7 7
	from individuals	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
		0.00	0.00
	(d) The Candidate (e) TOTAL CONTRIBUTIONS		
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	0.00
12.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13	LOANS:	, , ,	, ,
10.	(a) Made or Guaranteed by the	0.00	
	Candidate	7 7 7	0.00
	(b) All Other Loans(c) TOTAL LOANS	0.00	0.00
	(c) TOTAL LOANS (add Lines 13(a) and (b))	, , 0.00	0.00
14.	OFFSETS TO OPERATING		
	EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15.	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	7.00
16.	TOTAL RECEIPTS (add Lines	· · · · · · · · · · · · ·	······································
	11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	0.00	7.00

Image# 201610179032887685

of Disbursements PAGE 4 / 10 FEC Form 3 (Revised 05/2016) COLUMN A COLUMN B **II. DISBURSEMENTS Total This Period Election Cycle-to-Date** 0.00 3674.68 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0.00 0.00 AUTHORIZED COMMITTEES 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 0.00 0.00 by the Candidate..... 0.00 0.00 (b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS 0.00 0.00 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other (a) 0.00 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees..... Other Political Committees (c) 0.00 0.00 (such as PACs) (d) TOTAL CONTRIBUTION REFUNDS 0.00 0.00 (add Lines 20(a), (b), and (c))..... 0.00 7.00 21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS

DETAILED SUMMARY PAGE

(add Lines 17, 18, 19(c), 20(d), and 21)

Image# 201610179032887686

III. CASH SUMMARY

23.	CASH ON HAND AT BEGINNING OF REPORTING PERIOD		9	_	9	_	_	7.00
24	TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)		9	_	9	_		0.00
25.	SUBTOTAL (add Line 23 and Line 24)		7	_	,	_	-	7.00
26.	TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)		7	_	7	_	-	0.00
27.	CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)		9		7		-	7.00

0.00

3681.68

age# 201010113032001001						
CHEDULE C (FEC Form 3) DANS			Use separate schedule(s) for each category of the Detailed Summary Page			
ME OF COMMITTEE (In Full) ablo Kleinman for Congress			Transac	tion ID : PAYC56		
LOAN SOURCE Full Name (Last, First, Mi	ddle Initial)		Memo Item	Election: 2014		
Kleinman, Pablo, , ,				Y Primary General		
Mailing Address 3906 Murietta Ave.				Other (specify) ▼		
City	State	ZIP Code)			
Sherman Oaks	СА	91423		Personal Funds of the Candidate		
Original Amount of Loan	Cumulative Pa	ayment To D	ate Bala	nce Outstanding at Close of This Perio		
70000.00			30000.00	40000.00		
TERMS Date Incurred	I	Date Due	Interest Rate (If none, enter			
M03 ^M / D31 ^D / Y Ž014 Y	M M / D C	D / Y Y		00 % (apr) Yes ✗ №		
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:	y y		
2. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address			Occupation			
-			Amount			
City State	ZIP Code		Guaranteed Outstanding: 7 7			
3. Full Name (Last, First, Middle Initial)		1	Name of Employer			
Mailing Address			Occupation			
			Amount			
City State	ZIP Code		Guaranteed Outstanding:	g		
4. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address			Occupation			
City State	ZIP Code		Amount Guaranteed Outstanding:	y y		
UBTOTALS This Period This Page (optional). OTALS This Period (last page in this line onl				40000.00		

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

Form/Schedule: SC/10 Transaction ID : PAYC56

Loan From Personal Funds

Form/Schedule: Transaction ID:

HEDULE C (FEC	Form 3)		Use separate schedule(s) for each category of the Detailed Summary Page					
ME OF COMMITTEE (In Fu ablo Kleinman for C	•			Transac	tion ID : PAYC178			
LOAN SOURCE Full Nan Kleinman, Pablo, , ,		dle Initial)		🗌 Memo Item	Election: 2014 X Primary General			
Mailing Address 3906 Murietta Ave.					Other (specify)			
City Sherman Oaks		State CA	ZIP Code 91423)	Personal Funds of the Candidat			
Original Amount of Loan	18133.72	Cumulative Pa	yment To D	ate Bala	nce Outstanding at Close of This Peri 18133.72			
TERMS Date Incurr M05 ^M / D30 ^D /	ed Y 2014 Y		Date Due	Interest Rate (If none, enter \$1/2015 ^Y 0.	0)			
List All Endorsers or Gua 1. Full Name (Last, First,		o Loan Source		Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code	(Amount Guaranteed Outstanding:				
2. Full Name (Last, First, I	Middle Initial)	ł		Name of Employer				
Mailing Address				Occupation Amount				
City	State	ZIP Code		Guaranteed Outstanding:				
3. Full Name (Last, First, I	Middle Initial)			Name of Employer				
Mailing Address				Occupation Amount				
City	State	ZIP Code		Guaranteed Outstanding:	y			
4. Full Name (Last, First, I	Middle Initial)		I	Name of Employer				
Mailing Address			(Occupation				
City	State	ZIP Code	(Amount Guaranteed Outstanding:	y y			
UBTOTALS This Period Thi	s Page (optional)			······ []	18133.72			
OTALS This Period (last page	ae in this line only)			58133.72			

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

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 NAME OF COMMITTEE (In Full)	(Use separate schedule(s) for each numbered line)	PAGE 9 OF 10 FOR LINE NUMBER: (check only one) 9 X 10			
A. Full Name (Last, First, Middle Initial) of CTM Consulting	<u> </u>			ebt (Purpose): g/Consultant	
Mailing Address 7119 W. Sunset Blvd., #44	4				
City Los Angeles	State CA	Zip Code 90046			
Outstanding Balance Beginning This Perio	od		Transacti	on ID : PAYD200	
4049.00 Amount Incurred This Period 0.00]] [Payment This Period	Outstandi	ng Balance at Close of This Period	
		-77		4049.00	
B. Full Name (Last, First, Middle Initial) of E Johnson, Maureen, , ,	B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Johnson, Maureen, , ,				
Mailing Address 8828 Pershing Dr., #108					
City Playa Del Rey	State CA	Zip Code 90293			
Outstanding Balance Beginning This Perio 2220.00 Amount Incurred This Period 0.00	bd	Payment This Period 0.		on ID : PAYD201 ng Balance at Close of This Period 2220.00	
	Debter or Cro	ditox		-y	
C. Full Name (Last, First, Middle Initial) of Kochba, Mara, , ,				ebt (Purpose): g/Consultant	
Mailing Address 9301 Wilshire Blvd., #613					
City Beverly Hills	State CA	Zip Code 90210			
Outstanding Balance Beginning This Perio 669.00 Amount Incurred This Period 0.00	bd	Payment This Period 0.		ion ID : PAYD199 ng Balance at Close of This Period 669.00	
		, , ,			
1) SUBTOTALS This Period This Page (option	·		···· • •	6938.00	
2) TOTALS This Period (last page this line nu				7	
 3) TOTAL OUTSTANDING LOANS from Sche 4) ADD 2) and 3) and carry forward to appro 			nly) 🕨		
				7 7	

FEC	Schedule	D	(Form	3)	(Revised	05/2016)

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS Excluding Loans NAME OF COMMITTEE (In Full)			(Use separate schedule(s) for each numbered line)	PAGE 10 OF 10 FOR LINE NUMBER: (check only one) 9 X 10
A. Full Name (Last, First, Middle Initial) of De Levin, Darby, , ,				ebt (Purpose): egy Consultant
Mailing Address 13260 Moorpark, #1				
City Sherman Oaks	State CA	Zip Code 91423		
Outstanding Balance Beginning This Period 959.00	1		Transactio	on ID : PAYD158
Amount Incurred This Period		Payment This Period		ng Balance at Close of This Period
0.00		0.0	00	959.00
B. Full Name (Last, First, Middle Initial) of Del	otor or Crec	ditor	Nature of D	ebt (Purpose):
Mailing Address				
City	State	Zip Code		
Outstanding Balance Beginning This Period Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period
C. Full Name (Last, First, Middle Initial) of De	btor or Cre	editor	Nature of D	ebt (Purpose):
Mailing Address				
City	State	Zip Code		
Outstanding Balance Beginning This Period		Payment This Period	Outstandi	ng Balance at Close of This Period
1) SUBTOTALS This Period This Page (optional)			959.00
2) TOTALS This Period (last page this line num	ber only)			7897.00
3) TOTAL OUTSTANDING LOANS from Schedu	ule C (last p	bage only)		58133.72
4) ADD 2) and 3) and carry forward to appropr	iate line of	Summary Page (last page or	nly) 🕨	66030.72

FEC Schedule D (Form 3) (Revised 05/2016)