10/05/2017 20 : 55

PAGE 1 / 10

FEC FORM 3	AND DI		ECEIPTS EMENTS ommittee	Offic	ce Use Only
1. NAME OF COMMITTEE (in ful		NT 🔻	Example: If typing, type over the lines.	12FE4M5	
Pablo Kleinman f	for Congress				
ADDRESS (number and s		de Way, #101-C			
Check if different than previously reported. (ACC	Long Beach			CA 908	02
2. FEC IDENTIFICAT	ION NUMBER V	CITY		STATE 🔺	ZIP CODE
C C00554360		3. IS THIS REPORT	NEW (N) OR	AMENDED (A)	STATE ▼ DISTRICT
July 15 Qu	orts: uarterly Report (Q1) narterly Report (Q2) 5 Quarterly Report (Q3)	Election		General (12G) Special (12S)	In the State of
January 31	Year-End Report (YE)	(c) 30-Day F	POST -Election Report for		
Termination	n Report (TER)	Election	on General (30G)	Runoff (30R)	in the State of
5. Covering Period	07 / 01	/ Y Y Y Y 2017	through	09 / D D / Y	Y Y Y 2017
I certify that I have exar Type or Print Name of T	Crummitt, C		y knowledge and belief it	is true, correct and co	mplete.
Signature of Treasurer	Crummitt, Gary, , ,		[Electronically Filed]	Date	05 / Y Y Y Y 2017
NOTE: Submission of fals	e, erroneous, or incomp	lete information m	nay subject the person sigr	ning this Report to the pe	enalties of 52 U.S.C. §3010
Office Use Only				F	FEC FORM 3 (Revised 05/2016)

SUMMARY PAGE of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name Pablo Kleinman for Congress

			COLUMN A	COLUMN B
6.	Net	Contributions (other than loans)	This Period	Election Cycle-to-Date
	(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	0.00
	(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	0.00
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 ledule C and/or Schedule D)	0.00	
10.	the	ots and Obligations Owed BY Committee (Itemize all on ledule 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

FEC Form 3 (Revised 05.		ED SUMMARY PAGE of Receipts	PAGE 3 / 10
Write or Type Committee Name			
Pablo Kleinman for Co			
Report Covering the Period:	From: 07	01 / Y Y Y Y 2017	To:
I. RECEIPTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than	loans) FROM:		
(a) Individuals/Persons Othe	r Than		
Political Committees		0.00	
(i) Itemized (use Schedu	ıle A)	0.00	0.00
(ii) Unitemized		0.00	0.00
(iii) TOTAL of contribution	ns		, , , , , , , , , , , , , , , , , , , ,
from individuals		0.00	0.00
(b) Political Party Committee	əs	0.00	0.00
(c) Other Political Committee	es	0.00	0.00
(such as PACs)	·····		0.00
(d) The Candidate		0.00	0.00
(e) TOTAL CONTRIBUTIONS	3		
(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	0.00
		7 7 7 7	
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		0.00	0.00
		-y - y	
13. LOANS:			
(a) Made or Guaranteed by Candidate		0.00	0.00
Canadato		· · · · · · · · · · · ·	
(b) All Other 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
		7	
15. OTHER RECEIPTS (Dividends, Interest, etc.)		0.00	0.00
		9 9 9	· · · · · · · · ·
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15)		0.00	0.00
(Carry Total to Line 24, page	4)	0.00	0.00

Image# 201710059075579793

DETAILED SUMMARY PAGE of Disbursements FEC Form 3 (Revised 05/2016) COLUMN A **II. DISBURSEMENTS Total This Period** 17. OPERATING EXPENDITURES.....

- 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES
- 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate.....
 - (b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....

20. REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other (a)

- Than Political Committees
- (b) Political Party Committees..... Other Political Committees (c)
- (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....

(such as PACs)

21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS

- (add Lines 17, 18, 19(c), 20(d), and 21)
 - **III. CASH SUMMARY**

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

0.00

0.00

0.00

COLUMN B

Election Cycle-to-Date

0.00	0.00
	, , , , , , , , , , , , , , , , , , , ,
0.00	0.00
7 7	
0.00	0.00
7 7 7 7	
0.00	0.00
0.00	0.00
	0.00
0.00	0.00
7 7 *	
0.00	0.00
0.00	0.00

0.00

0.00

0.00

CHEDULE C (FEC Form 3) OANS			Use separate schedule(s) for each category of the Detailed Summary Page			
AME OF COMMITTEE (In Full) Pablo Kleinman for Congress			Transac	tion ID : PAYC56		
LOAN SOURCE Full Name (Last, First, M Kleinman, Pablo, , ,	liddle Initial)		🗌 Memo Item	Election: 2014 X Primary General		
Mailing Address 3906 Murietta Ave.				Other (specify)		
City Sherman Oaks	State CA	ZIP Code 91423	e	Personal Funds of the Candidat		
Original Amount of Loan 70000.00	Cumulative Pa	ayment To D	Date Bala 30000.00	nce Outstanding at Close of This Perio 40000.00		
TERMS Date Incurred M03 ^M / D31 ^D / Y Z014	[M * M / D * D	Date Due	Interest Rate (If none, enter None Y 0.0	0)		
List All Endorsers or Guarantors (if any) 1. Full Name (Last, First, Middle Initial)	to Loan Source		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:	9 1 9 1 7 1		
UBTOTALS This Period This Page (optional))			y 40000.00		
OTALS This Period (last page in this line or Carry outstanding balance only to LINE 3, So				y y y y y		

: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) ANS		Use separate sched for each category o Detailed Summary F	f the (check only one) 13a		
ME OF COMMITTEE (In Full) ablo Kleinman for Congress		Trans	saction ID : PAYC178		
LOAN SOURCE Full Name (Last, First, M Kleinman, Pablo, , ,	Middle Initial)	Memo Ite	m Election: 2014		
Mailing Address 3906 Murietta Ave.			Other (specify)		
City Sherman Oaks	State CA	ZIP Code 91423	Personal Funds of the Candidat		
Original Amount of Loan	Cumulative Pa	vment To Date B	alance Outstanding at Close of This Perio		
18133.72	,	0.00	18133.72		
TERMS Date Incurred	I	Pate Due Interest R (If none, er			
M05M / D30D / Y Ž014 Y	M M / D C	[/] ^Y 12/31/2015 ^Y	0.00 % (apr) Yes X N		
List All Endorsers or Guarantors (if any) to Loan Source	Name of Employer			
1. Full Name (Last, First, Middle Initial)		Name of Employer	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:	Guaranteed		
3. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:	Guaranteed		
4. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · · · · ·		
UBTOTALS This Period This Page (optiona OTALS This Period (last page in this line o			18133.72 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) Dable Kleinman for C	(Use separate schedule(s) for each numbered line)	schedule(s)FOR LINE NUMBER:for each(check only one)9			
A. Full Name (Last, First, Middle Initial) of De CTM Consulting				ebt (Purpose): g/Consultant	
Mailing Address 7119 W. Sunset Blvd., #444					
City Los Angeles	State CA	Zip Code 90046			
Outstanding Balance Beginning This Period			Transactio	on ID : PAYD200	
4049.00					
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period	
0.00		0.0	00	4049.00	
B. Full Name (Last, First, Middle Initial) of Det	otor or Cred	itor			
Johnson, Maureen, , ,				ebt (Purpose): Recruitment Consultant	
Mailing Address 8828 Pershing Dr., #108					
City Playa Del Rey	State CA	Zip Code 90293			
Outstanding Balance Beginning This Period	I		Transactio	on ID : PAYD201	
2220.00				Outstanding Balance at Close of This Period	
Amount Incurred This Period		Payment This Period	Outstandi		
0.00		7 7 7	00	2220.00	
C. Full Name (Last, First, Middle Initial) of De Kochba, Mara, , ,	btor or Cre	ditor		Nature of Debt (Purpose): Fundraising/Consultant	
Mailing Address 9301 Wilshire Blvd., #613					
City	State	Zip Code			
Beverly Hills	CA	90210			
Outstanding Balance Beginning This Period			Transact	ion ID : PAYD199	
669.00					
Amount Incurred This Period Payment This Period				ng Balance at Close of This Period	
0.00			00	669.00	
1) SUBTOTALS This Period This Page (optional)		··· •	6938.00	
2) TOTALS This Period (last page this line num	ber only) ·····				
3) TOTAL OUTSTANDING LOANS from Schedu	ule C (last p	age only)			
4) ADD 2) and 3) and carry forward to appropr	ate line of S	Summary Page (last page o		7 7 7	

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

DEBTS AND OBLIGATIONS			(Use separate	PAGE 10 OF 10		
			schedule(s) for each	FOR LINE NUMBER: (check only one) 9		
			numbered line)			
NAME OF COMMITTEE (In Full)						
Pablo Kleinman for C	ongres	SS				
A. Full Name (Last, First, Middle Initial) of De	ebtor or Credit	or		ebt (Purpose):		
Levin, Darby, , ,			Field Strate	egy Consultant		
Mailing Address 13260 Moorpark, #1						
City	State	Zip Code				
Sherman Oaks	CA	91423				
Outstanding Balance Beginning This Period			Transacti	on ID : PAYD158		
959.00						
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period		
0.00		0.0	00	959.00		
7 7 7		, , ,		7 7 -		
B. Full Name (Last, First, Middle Initial) of De	btor or Credito	or	Nature of D	ebt (Purpose):		
Mailing Address						
City	State	Zip Code				
Outstanding Balance Beginning This Period						
Outstanding Balance Beginning This Fellod						
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period		
y y y		7 7 7		y		
C. Full Name (Last, First, Middle Initial) of De	ebtor or Credit	tor	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		
		9 9 9 9		-yy		
1) SUBTOTALS This Period This Page (optiona	l)			959.00		
2) TOTALS This Period (last page this line num	ber only)			7897.00		
				3 3 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				58133.72		
4) ADD 2) and 3) and carry forward to appropr	iate line of Su	mmary Page (last page of	nly) 🕨	66030.72		

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