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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	ANL		thorized Com)		Office Use Only
NAME OF COMMITTEE (in		OR PRINT	·	kample: If typing	g, type	12FE4M5	
Pablo Kleinma	n for Congre	SS		1 1 1 1			
ADDRESS (number an		E. Seaside W	/ay, #101-C				
Check if dif than previous reported. (A	usly _I Lor	ng Beach				CA S	90802
2. FEC IDENTIFIC	CATION NUMBE	R▼	CITY A			STATE A	ZIP CODE
C C0055436	50		3. IS THIS REPORT	NEW (N)	OR	X AMEND (A)	STATE ▼ DISTRICT CA 30
(a) Quarterly Re	Quarterly Report	(Q1)	b) 12-Day PRE	E-Election Repo Primary (12P) Convention (1	[General (1	
	Quarterly Report		Election on	M M /	D D /	YYYY	in the State of
January	31 Year-End Rep	ort (YE) (c) 30-Day PO \$	ST-Election Rep	ort for the:	_	
Termina	tion Report (TER)		Election on	General (30G)	D D /	Runoff (30	in the State of
5. Covering Period	M M M /	01 /	Y Y Y Y 2015	through	м м	/ 30 /	2015
I certify that I have e			ne best of my k	nowledge and b	pelief it is tr	rue, correct and	d complete.
Type or Print Name o	or rreasurer <u>Ga</u>	ary Crummitt				M M	/ D D / Y Y Y
Signature of Treasure	er Gary Crumi	nitt		[Electronically F	iled] [Date 10	15 / 2015
	false, erroneous, o	or incomplete	information may	subject the pers	son signing	this Report to th	ne penalties of 2 U.S.C. §437g.
Office Use Only							FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

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Write or Type Committee Name

Pablo Kleinman for Congress

_				1
			COLUMN A This Period	COLUMN B Election Cycle-to-Date
6.	Net C	ontributions (other than loans)		
	. ,	otal Contributions other than loans) (from Line 11(e))	0.00	0.00
	` '	otal Contribution Refunds rom Line 20(d))	0.00	0.00
		let Contributions (other than loans) subtract Line 6(b) from Line 6(a))	0.00	0.00
7.	Net O	perating Expenditures		
		otal Operating Expenditures	0.00	0.00
		otal Offsets to Operating xpenditures (from Line 14)	0.00	0.00
	. ,	let Operating Expenditures subtract Line 7(b) from Line 7(a))	0.00	0.00
8.		on Hand at Close of ting Period (from Line 27)	3681.68	
9.	the Co	and Obligations Owed TO committee (Itemize all on Itemize all on Itemize C and/or Schedule D)	0.00	
10.	the Co	and Obligations Owed BY committee (Itemize all on Itemize all on Itemize and Itemize D)	69533.72	

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)

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Write or Type Committee Name

Pahlo	Kleinman	for	Congress
i abio	Mellinan	101	Congress

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
1. (CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than 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
(1	b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
`	d) The Candidatee) TOTAL CONTRIBUTIONS	0.00	0.00
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	0.00
	TRANSFERS FROM OTHER	0.00	0.00
		9	, ,
	.OANS: a) Made or Guaranteed by the		
	Candidate	0.00	0.00
(b) All Other Loans	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	0.00
	DFFSETS TO OPERATING		
	EXPENDITURES Refunds, Rebates, etc.)	0.00	0.00
	OTHER RECEIPTS Dividends, Interest, etc.)	0.00	0.00
1	TOTAL 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 02/2003)

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	0.00	0.00
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)	0.00	0.00
	III. CASH S	SUMMARY	
23.	CASH ON HAND AT BEGINNING OF REP	ORTING PERIOD	3681.68
24	TOTAL RECEIPTS THIS PERIOD (from Lin	e 16, page 3)	0.00
25.	SUBTOTAL (add Line 23 and Line 24)		3681.68
26.	TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	0.00
27.	CASH ON HAND AT CLOSE OF REPORTION (subtract Line 26 from Line 25)	ING PERIOD	3681.68

: 97 'A = G7 9 @ 5 B9 CI G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCFHŽG7 < 98 I @ 'CF' ± H9 A = N5 H± CB

Form/Schedule: F3A Transaction ID:

Amending Column B Election Cycle to Date

Form/Schedule: Transaction ID:

SCHEDULE C (FEC Form 3)

Use separate schedule(s)

FOR LINE NUMBER:

PAGE

	13a
×	13b

OANS			for each category of Detailed Summary Pa	
IAME OF COMMITTEE (In Ful	•		Transa	action ID : PAYC56
Pablo Kleinman for Co	ongress			
Pablo Kleinman	e (Last, First, Middle Initia	al)		Election: 2014 Primary General
Mailing Address 3906 Murietta Ave.				Other (specify)
City	State	ZIP Code)	
Sherman Oaks	CA	91423		
Original Amount of Loan	70000.00	ative Payment To D	ate Bal	lance Outstanding at Close of This Period
	70000.00		0000.00	1000.00
Date Incurre	d 2014 Y	Date Due	Interest Ra	0 % (apr)
List All Endorsers or Gua	rantors (if any) to Loan S	Source		Yes No
1. Full Name (Last, First, I	Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State ZIP C	ode	Amount Guaranteed Outstanding:	9 9 9
2. Full Name (Last, First, M	liddle Initial)		Name of Employer	
Mailing Address		(Occupation	
City	State ZIP C	ode	Amount Guaranteed Outstanding:	9 9 9
3. Full Name (Last, First, M	liddle Initial)	1	Name of Employer	
Mailing Address		(Occupation	
City	State ZIP C	ode	Amount Guaranteed Outstanding:	g
4. Full Name (Last, First, M	liddle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State ZIP C	ode	Amount Guaranteed Outstanding:	9 9 9
SUBTOTALS This Period This	Page (optional)			40000.00
TOTALS This Period (last pag	e in this line only)			
Carry outstanding balance or	ly to LINE 3, Schedule D,	for this line. If no	Schedule D, carry for	ward 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: PAYC56

Loan From Personal Funds

Form/Schedule: Transaction ID:

SCHEDULE C (FEC Form 3)

Use separate schedule(s)

FOR LINE NUMBER:

PAGE

DANS			Detailed Summary F		(check only on	ie)	_	13a 13b
AME OF COMMITTEE (In Full)			Trans	saction l	ID : PAYC178			
Pablo Kleinman for Congre	SS							
LOAN SOURCE Full Name (Last Pablo Kleinman	, First, Middle Ir	nitial)			ction: 2014 Primary General			
Mailing Address 3906 Murietta Ave.					Other (specify)	▼		
City	State	e ZIP Cod	de					
Sherman Oaks	CA	91423						
Original Amount of Loan	Cur	mulative Payment To	Date B	alance (Outstanding at C	lose of Th	is P	eriod
1813	33.72		0.00		, , ,	18133	.72	
Date Incurred M 05 / D 30 / Y 2014	M M	Date Due	Interest R /31/2015 0	ate	% (apr)	Secured:	×	No
List All Endorsers or Guarantors		n Source						
1. Full Name (Last, First, Middle	Initial)		Name of Employer					
Mailing Address			Occupation					
City	State ZIF	² Code	Amount Guaranteed Outstanding:	7]	
2. Full Name (Last, First, Middle I	nitial)		Name of Employer					
Mailing Address			Occupation					
City	State ZIF	² Code	Amount Guaranteed Outstanding:	7]	
3. Full Name (Last, First, Middle I	nitial)		Name of Employer					
Mailing Address			Occupation					
City	State ZIF	P Code	Amount Guaranteed Outstanding:	,]	
4. Full Name (Last, First, Middle I	nitial)		Name of Employer					
Mailing Address			Occupation					
City	State ZIF	² Code	Amount Guaranteed Outstanding:	7	7	-]	
SUBTOTALS This Period This Page	(optional)					18133	.72	
FOTALS This Period (last page in th	is line only)				, , ,	58133	.72	
Carry outstanding balance only to L	INE 3. Schedule	D. for this line. If a	no Schedule D. carry fo	orward	to appropriate l	ine of Su	mm:	arv.

: 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: 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 10 OF FOR LINE NUMBER: (check only one)

	9
X	10

11

NAME OF COMMITTEE (In Full)

P	ablo Kleinman for Con	gress			
_	A. Full Name (Last, First, Middle Initial) of Debtor CTM Consulting				Nature of Debt (Purpose): Fundraising/Consultant
Ī	Mailing Address 7119 W. Sunset Blvd., #444				
- 1	City State Los Angeles	Zip Code CA	90046		
	Outstanding Balance Beginning This Period 6000.00				Transaction ID : PAYD200
	Amount Incurred This Period 0.00	Pay	ment This Period	0.00	Outstanding Balance at Close of This Period 6000.00
	B. Full Name (Last, First, Middle Initial) of Debtor of Maureen Johnson	or Creditor			Nature of Debt (Purpose): Volunteer Recruitment Consultant
L	Mailing Address 8828 Pershing Dr., #108 City State	Zip Code			
L	Playa Del Rey	CA	90293		
	Outstanding Balance Beginning This Period 3000.00				Transaction ID : PAYD201
	Amount Incurred This Period 0.00	Pay		0.00	Outstanding Balance at Close of This Period 3000.00
(C. Full Name (Last, First, Middle Initial) of Debtor Mara Kochba	or Creditor			Nature of Debt (Purpose): Fundraising/Consultant
Ī	Mailing Address 9301 Wilshire Blvd., #613				
	City Beverly Hills	State CA	Zip Code 90210		
	Outstanding Balance Beginning This Period 1000.00				Transaction ID : PAYD199
	Amount Incurred This Period 0.00	Pay	ment This Period	0.00	Outstanding Balance at Close of This Period 1000.00
1)	SUBTOTALS This Period This Page (optional)			>	10000.00
2)	TOTALS This Period (last page this line number of	only)		>	
_	TOTAL OUTSTANDING LOANS from Schedule C				
1)	ADD 2) and 3) and carry forward to appropriate li	ine of Summa	ary Page (last page	only)	

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

Excluding Loans NAME OF COMMITTEE (In Full)

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

PAGE 11 OF FOR LINE NUMBER: (check only one)

	9
X	10

Pablo Kleinman for Congres

Pablo Kleinman for Cor	ngress	
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Darby Levin		Nature of Debt (Purpose): Field Strategy Consultant
Mailing Address 13260 Moorpark, #1		
City State Sherman Oaks	Zip Code CA 91423	
Outstanding Balance Beginning This Period 1400.00	<u> </u>	Transaction ID : PAYD158
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	1400.00
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		
Amount Incurred This Period	Payment 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
	7 7 7	
1) SUBTOTALS This Period This Page (optional)		1400.00
2) TOTALS This Period (last page this line number only)		11400.00
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) • 69533.72		