

# 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

Kim Dolbow Vann for Congress

ADDRESS (number and street)

PO Box 984

Check if different than previously reported. (ACC)

Willows

CA

95988-0984

2. FEC IDENTIFICATION NUMBER ▼

C C00500900

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

CA

03

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

through

M M /

D D /

Y Y Y Y

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 Kelly Lawler

Signature of Treasurer Kelly Lawler

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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

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
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)) ....	0	1500
(b) Total Contribution Refunds (from Line 20(d)) .....	0	0
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	0	1500
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	12493.3	64525.96
(b) Total Offsets to Operating Expenditures (from Line 14) .....	0	0
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	12493.3	64525.96
<b>8. Cash on Hand at Close of Reporting Period (from Line 27) .....</b>	<b>18381.42</b>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	<b>0</b>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	<b>15299.07</b>	

**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:  /  /  To:  /  /

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0	1500
(ii) Unitemized.....	0	0
(iii) TOTAL of contributions from individuals ▶	0	1500
(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))..	0	1500
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0	0
<b>13. LOANS:</b>		
(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
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0	0
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	364.01	364.01
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	364.01	1864.01

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	12493.3	64525.96
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. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	12493.3	64525.96

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	30510.71
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	364.01
25. SUBTOTAL (add Line 23 and Line 24).....	30874.72
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	12493.3
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	18381.42

**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 13
	<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	

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)  
**Lake County Clerk**

Mailing Address **255 N Forbes Street**  
**Room 223**

City **Lakeport** State **CA** Zip Code **95453-4759**

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**876.02**

Date of Receipt  
 /  /   
**12 / 31 / 2012**

**Transaction ID : A-M1733**

Amount of Each Receipt this Period  
**364.01**

Refund on Candidate Statement

**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  
 /  /

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  
 /  /

Amount of Each Receipt this Period

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

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

**364.01**

**364.01**

**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 6 OF 13	
	<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) <b>A. Aristotle International, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2012
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 235 <b>Transaction ID : B-E-1717</b>
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Credit Card Processing 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>B. Employment Development Department</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2012
Mailing Address PO Box 826805		Amount of Each Disbursement this Period 889.74 <b>Transaction ID : B-E-1711</b>
City Sacramento State CA Zip Code 94205-0001	Purpose of Disbursement Payroll Taxes 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>c. United States Treasury</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2012
Mailing Address PO Box 105083		Amount of Each Disbursement this Period 3854.84 <b>Transaction ID : B-E-1709</b>
City Atlanta State GA Zip Code 30348-5083	Purpose of Disbursement Payroll Taxes 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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4979.58
<b>TOTAL</b> 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 7 OF 13	
	<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) <b>A. United States Treasury</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2012
Mailing Address PO Box 105083			Amount of Each Disbursement this Period 23.13 <b>Transaction ID : B-E-1710</b>
City Atlanta	State GA	Zip Code 30348-5083	
Purpose of Disbursement Payroll Taxes		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>B. Aristotle International, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012
Mailing Address 205 Pennsylvania Avenue SE			Amount of Each Disbursement this Period 377 <b>Transaction ID : B-E-1719</b>
City Washington	State DC	Zip Code 20003-1164	
Purpose of Disbursement Credit card processing fees		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>c. John Decker Photography</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address 2939 27th Street			Amount of Each Disbursement this Period 1989.32 <b>Transaction ID : B-E-1725</b>
City Sacramento	State CA	Zip Code 95818-3513	
Purpose of Disbursement Photography		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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2389.45
<b>TOTAL</b> 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 13			
	<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) <b>A. Aristotle International, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2012
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 875 <b>Transaction ID : B-E-1727</b>
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Credit card processing fees 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>B. Aristotle International, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2012
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 825 <b>Transaction ID : B-E-1657</b>
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Software 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>C. Aristotle International, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2012
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 825 <b>Transaction ID : B-E-1721</b>
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Software 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1725.00
<b>TOTAL</b> 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 13
	<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) <b>A. PG&amp;E</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2012
Mailing Address PO Box 997300		Amount of Each Disbursement this Period 207.07 <b>Transaction ID : B-E-1730</b>
City Sacramento	State CA	
Zip Code 95899-7300	Purpose of Disbursement Utilities	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>B. Tahoe Joe's</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2012
Mailing Address 1040 Helen Power Drive		Amount of Each Disbursement this Period 295.15 <b>Transaction ID : B-E-1729</b>
City Vacaville	State CA	
Zip Code 95687-3504	Purpose of Disbursement Fundraiser Catering	Category/ Type 003
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>c. The KAL Group</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2012
Mailing Address PO Box 984		Amount of Each Disbursement this Period 1666.26 <b>Transaction ID : B-E-1704</b>
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: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2168.48
<b>TOTAL</b> 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 10 OF 13	
	<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) <b>A. Thinking Chair</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2012
Mailing Address PO Box 6771		Amount of Each Disbursement this Period 536.88 <b>Transaction ID : B-E-1712</b>
City Vacaville	State CA	
Zip Code 95696-6771	Purpose of Disbursement Design Consulting	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>B. Angela Thompson</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2012
Mailing Address PO Box 577		Amount of Each Disbursement this Period 360 <b>Transaction ID : B-E-1720</b>
City Biggs	State CA	
Zip Code 95917-0577	Purpose of Disbursement Payroll Service	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>C.</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	Category/ Type
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	896.88
<b>TOTAL</b> This Period (last page this line number only).....	12159.39

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 11 OF 13
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

**Kim Dolbow Vann for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Aristotle International, Inc.</b>	Nature of Debt (Purpose): Software
Mailing Address 205 Pennsylvania Avenue SE	
City State Zip Code Washington DC 20003-1164	

Outstanding Balance Beginning This Period 825	<b>Transaction ID : SD10-DEBT1657</b>	
Amount Incurred This Period 0	Payment This Period 825	Outstanding Balance at Close of This Period 0

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>The KAL Group</b>	Nature of Debt (Purpose): Bookkeeping
Mailing Address PO Box 984	
City State Zip Code Willows CA 95988-0984	

Outstanding Balance Beginning This Period 1666.26	<b>Transaction ID : SD10-DEBT1704</b>	
Amount Incurred This Period 0	Payment This Period 1666.26	Outstanding Balance at Close of This Period 0

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Stutzman Public Affairs</b>	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 13000	<b>Transaction ID : SD10-DEBT1724</b>	
Amount Incurred This Period 0	Payment This Period 0	Outstanding Balance at Close of This Period 13000

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	13000.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**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 <b>The Theodore Company, LLC</b>		Nature of Debt (Purpose): Fundraising Commission
Mailing Address PO Box 320412		
City	State	Zip Code
Alexandria	VA	22320-4412

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10-DEBT1632</b>	
<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"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>The Sutter Club</b>		Nature of Debt (Purpose): Fundraiser Catering
Mailing Address 1220 9th Street		
City	State	Zip Code
Sacramento	CA	95814-4805

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10-DEBT1527</b>	
<input type="text" value="765.41"/>		
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="765.41"/>

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

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

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="2299.07"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> 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 <b>Thinking Chair</b>		Nature of Debt (Purpose): Design Consulting
Mailing Address PO Box 6771		
City	State	Zip Code
Vacaville	CA	95696-6771

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10-DEBT1712</b>	
<input type="text" value="536.88"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0"/>	<input type="text" value="536.88"/>	<input type="text" value="0"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>John Decker Photography</b>		Nature of Debt (Purpose): Photography
Mailing Address 2939 27th Street		
City	State	Zip Code
Sacramento	CA	95818-3513

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10-DEBT1725</b>	
<input type="text" value="1989.32"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0"/>	<input type="text" value="1989.32"/>	<input type="text" value="0"/>

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

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="0.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text" value="15299.07"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="15299.07"/>