

# 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  
**Gallardo for Congress**

ADDRESS (number and street) 6751 W. Indian School Road 2139  
 Check if different than previously reported. (ACC) Phoenix AZ 85033

2. **FEC IDENTIFICATION NUMBER** ▼ C C00559088 3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)  
CITY ▲ STATE ▲ ZIP CODE ▲ STATE ▼ DISTRICT  
AZ 07

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  
04 / 01 / 2016 through 06 / 30 / 2016

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 Steve M. Gallardo  
Signature of Treasurer Steve M. Gallardo *[Electronically Filed]* Date M M / D D / Y Y Y Y  
07 / 15 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name  
**Gallardo 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))....	5060.00	11906.97
(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)).....	5060.00	11906.97
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	5042.00	11887.75
(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)).....	5042.00	11887.75
8. Cash on Hand at Close of Reporting Period (from Line 27).....	7.57	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	13365.00	

**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

**Gallardo for Congress**

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

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
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL of contributions 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
(d) The Candidate.....	5060.00	11906.97
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	5060.00	11906.97
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....		
	0.00	0.00
13. LOANS:		
(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
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....		
	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	5060.00	11906.97

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	5042.00	11887.75
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. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	5042.00	11887.75

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	-10.43
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	5060.00
25. SUBTOTAL (add Line 23 and Line 24).....	5049.57
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	5042.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	7.57

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 5 OF 9  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     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)  
**Gallardo for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Steve Gallardo**

Mailing Address 3636 North 81st Avenue

City State Zip Code  
Phoenix AZ 85033

FEC ID number of contributing federal political committee. **C** C00559088

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
9406.97

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 25 / 2016

**Transaction ID : 11d-01-00151-00160**

Amount of Each Receipt this Period  
2560.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Steve Gallardo**

Mailing Address 3636 North 81st Avenue

City State Zip Code  
Phoenix AZ 85033

FEC ID number of contributing federal political committee. **C** C00559088

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
11906.97

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 31 / 2016

**Transaction ID : 11d-01-00154-00163**

Amount of Each Receipt this Period  
2500.00

Memo Item

**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 Y Y

Amount of Each Receipt this Period

Memo Item

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

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

5060.00

5060.00

**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 9			
	<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)  
**Gallardo for Congress**

Full Name (Last, First, Middle Initial) <b>A. FTC &amp; Associates, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2016
Mailing Address 2118 Tall Oak Dr.		Amount of Each Disbursement this Period 25.00
City Winter Garden	State FL	
Zip Code 34787	Purpose of Disbursement	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : 17-01-00153-00162</b>
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) <b>B. FTC &amp; Associates, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2016
Mailing Address 2118 Tall Oak Dr.		Amount of Each Disbursement this Period 1500.00
City Winter Garden	State FL	
Zip Code 34787	Purpose of Disbursement	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : 17-01-00157-00166</b>
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) <b>C. FTC &amp; Associates, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2016
Mailing Address 2118 Tall Oak Dr.		Amount of Each Disbursement this Period 975.00
City Winter Garden	State FL	
Zip Code 34787	Purpose of Disbursement	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : 17-01-00157-00168</b>
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).....	2500.00
<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 7 OF 9			
	<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)  
**Gallardo for Congress**

Full Name (Last, First, Middle Initial) <b>A. Wells Fargo</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2016		
Mailing Address 420 Montgomery Street			Amount of Each Disbursement this Period 14.00		
City San Francisco	State CA	Zip Code 94104	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Bank Fee		Category/ Type			
Candidate Name		Transaction ID : 17-01-00152-00161			
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) <b>B. FTC &amp; Associates, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2016		
Mailing Address 2118 Tall Oak Dr.			Amount of Each Disbursement this Period 2500.00		
City Winter Garden	State FL	Zip Code 34787	Memo Item <input type="checkbox"/>		
Purpose of Disbursement		Category/ Type			
Candidate Name		Transaction ID : 17-01-00158-00167			
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) <b>c. Wells Fargo</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2016		
Mailing Address 420 Montgomery Street			Amount of Each Disbursement this Period 14.00		
City San Francisco	State CA	Zip Code 94104	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Bank Fee		Category/ Type			
Candidate Name		Transaction ID : 17-01-00155-00164			
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) .....	2528.00
<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 8 OF 9
	<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)  
**Gallardo for Congress**

Full Name (Last, First, Middle Initial) <b>A. Wells Fargo</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2016
Mailing Address 420 Montgomery Street		Amount of Each Disbursement this Period 14.00
City San Francisco	State CA	
Zip Code 94104	Purpose of Disbursement Bank Fee	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : 17-01-00156-00165</b>
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) <b>B.</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	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	
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) <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	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	
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).....	14.00
<b>TOTAL</b> This Period (last page this line number only).....	5042.00



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

NAME OF COMMITTEE (In Full)

**Gallardo for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>FTC &amp; Associates, Inc.</b>		Nature of Debt (Purpose): Campaign Consulting
Mailing Address 2118 Tall Oak Dr.		
City State	Zip Code	
Winter Garden FL	34787	

Outstanding Balance Beginning This Period	<b>Transaction ID : 10-000002</b>	
1000.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	1000.00	0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>FTC &amp; Associates, Inc.</b>		Nature of Debt (Purpose): Campaign Consulting
Mailing Address 2118 Tall Oak Dr.		
City State	Zip Code	
Winter Garden FL	34787	

Outstanding Balance Beginning This Period	<b>Transaction ID : 10-000003</b>	
7000.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	4000.00	3000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>SKD Knickerbocker</b>		Nature of Debt (Purpose): Printing Design Video Production
Mailing Address 1150 18th Street NW, 800		
City State	Zip Code	
Washington DC	20036	

Outstanding Balance Beginning This Period	<b>Transaction ID : 10-000001</b>	
10365.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	10365.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	13365.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	13365.00
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	13365.00