

SUMMARY PAGE
of Receipts and Disbursements

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))....	6046.97	6046.97
(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)).....	6046.97	6046.97
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	4048.00	4048.00
(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)).....	4048.00	4048.00
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1987.32	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	20865.00	

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.....	6046.97	6046.97
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	6046.97	6046.97
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)..... ▶	6046.97	6046.97

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	4048.00	4048.00
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) ►	4048.00	4048.00

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	-11.65
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	6046.97
25. SUBTOTAL (add Line 23 and Line 24).....	6035.32
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	4048.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1987.32

**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 9
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input 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)
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
3.97

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2015

Transaction ID : 11d-02-00018-00018

Amount of Each Receipt this Period
3.97

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
9.97

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2015

Transaction ID : 11d-02-00019-00019

Amount of Each Receipt this Period
6.00

C. 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
21.97

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2015

Transaction ID : 11d-01-00118-00127

Amount of Each Receipt this Period
12.00

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

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

21.97

**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 6 OF 9
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gallardo for Congress

Full Name (Last, First, Middle Initial) Steve Gallardo		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 02 / 2015
Mailing Address 3636 North 81st Avenue		Transaction ID : 11d-01-00117-00126
City Phoenix	State AZ	
FEC ID number of contributing federal political committee. C C00559088		Amount of Each Receipt this Period 2010.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2031.97	

Full Name (Last, First, Middle Initial) Steve Gallardo		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 27 / 2015
Mailing Address 3636 North 81st Avenue		Transaction ID : 11d-01-00122-00131
City Phoenix	State AZ	
FEC ID number of contributing federal political committee. C C00559088		Amount of Each Receipt this Period 4015.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 6046.97	

Full Name (Last, First, Middle Initial)		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	6025.00
TOTAL This Period (last page this line number only).....	6046.97

**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) A. FTC & Associates, Inc.		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2015
Mailing Address 2118 Tall Oak Dr.		Amount of Each Disbursement this Period 2000.00
City Winter Garden	State FL	
Zip Code 34787	Purpose of Disbursement Campaign Consulting	Transaction ID : 17-01-00114-00123
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. FTC & Associates, Inc.		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2015
Mailing Address 2118 Tall Oak Dr.		Amount of Each Disbursement this Period 2000.00
City Winter Garden	State FL	
Zip Code 34787	Purpose of Disbursement Campaign Consulting	Transaction ID : 17-01-00115-00124
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) C.		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	
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:		

SUBTOTAL of Disbursements This Page (optional).....	4000.00
TOTAL This Period (last page this line number only).....	4000.00

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

Gallardo for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
FTC & Associates, Inc.

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

7000.00

Transaction ID : 10-000002

Amount Incurred This Period

0.00

Payment This Period

4000.00

Outstanding Balance at Close of This Period

3000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
FTC & Associates, Inc.

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

7000.00

Transaction ID : 10-000003

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Patton Data Processing

Nature of Debt (Purpose):
Compliance Consulting

Mailing Address PO Box 9

City State Zip Code
Lexington KY 40588

Outstanding Balance Beginning This Period

500.00

Transaction ID : 10-000004

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

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

10500.00

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 SKD Knickerbocker		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		Transaction ID : 10-000001	
10365.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	10365.00	

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	

1) SUBTOTALS This Period This Page (optional)	▶	10365.00
2) TOTALS This Period (last page this line number only)	▶	20865.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶		20865.00