

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 Ron Barber for Congress

ADDRESS (number and street) PO Box 57715 Tucson AZ 85732 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00512129 3. IS THIS REPORT NEW (N) OR AMENDED (A) CITY STATE ZIP CODE STATE DISTRICT AZ 02

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 10 / 01 / 2015 through M M / D D / Y Y Y Y 12 / 31 / 2015

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 Laura T Almquist

Signature of Treasurer Laura T Almquist [Electronically Filed] Date M M / D D / Y Y Y Y 01 / 25 / 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
Ron Barber 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))....	0.00	9433.68
(b) Total Contribution Refunds (from Line 20(d))	0.00	3974.76
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	0.00	5458.92
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	367.69	57207.68
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	3340.20
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	367.69	53867.48
8. Cash on Hand at Close of Reporting Period (from Line 27).....	21378.17	
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).....	0.00	

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

Ron Barber 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	495.00
(ii) Unitemized.....	0.00	8938.68
(iii) TOTAL of contributions from individuals ▶	0.00	9433.68
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	9433.68
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	132.62
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	3340.20
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	421858.55
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	0.00	434765.05

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	367.69	57207.68
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	3974.76
(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	3974.76
21. OTHER DISBURSEMENTS	25000.00	561428.65
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	25367.69	622611.09

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	46745.86
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	0.00
25. SUBTOTAL (add Line 23 and Line 24).....	46745.86
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	25367.69
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	21378.17

**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 5 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)
Ron Barber for Congress

Full Name (Last, First, Middle Initial)
A. Blue State Digital

Mailing Address 406 7th St NW

City Washington State DC Zip Code 20004-2261

Purpose of Disbursement
Licensing fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
10 / 14 / 2015

Amount of Each Disbursement this Period
157.26

Transaction ID : VNNTW9S4WZ4

Category/Type

Full Name (Last, First, Middle Initial)
B. Wells Fargo

Mailing Address 4669 E Broadway Blvd

City Tucson State AZ Zip Code 85711-3511

Purpose of Disbursement
Bank fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
10 / 13 / 2015

Amount of Each Disbursement this Period
40.87

Transaction ID : VNNTW9SHYA7

Category/Type

Full Name (Last, First, Middle Initial)
c. Wells Fargo

Mailing Address 4669 E Broadway Blvd

City Tucson State AZ Zip Code 85711-3511

Purpose of Disbursement
Bank fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
11 / 12 / 2015

Amount of Each Disbursement this Period
40.88

Transaction ID : VNNTW9SHYB5

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 239.01

TOTAL 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 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)
Ron Barber for Congress

Full Name (Last, First, Middle Initial) A. Wells Fargo		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2015
Mailing Address 4669 E Broadway Blvd		Amount of Each Disbursement this Period 40.38
City Tucson State AZ Zip Code 85711-3511	Category/Type	
Purpose of Disbursement Bank fee	Candidate Name	Transaction ID : VNTTW9SHY57
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Category/Type	
Purpose of Disbursement	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:		

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	Category/Type	
Purpose of Disbursement	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:		

SUBTOTAL of Disbursements This Page (optional).....	40.38
TOTAL This Period (last page this line number only).....	279.39

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 type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Ron Barber for Congress

Full Name (Last, First, Middle Initial) A. Committee to Re-Elect Barbara LaWall		Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2015
Mailing Address PO Box 35674		Amount of Each Disbursement this Period 1000.00 Transaction ID : VNTTW9SHZ26
City Tucson	State AZ	
Zip Code 85740-5674	Purpose of Disbursement Non-Federal Contribution	Category/ Type
Candidate Name Committee to Re-Elect Barbara LaWall	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. Death Penalty Alternatives for Arizona		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015
Mailing Address PO Box 77312		Amount of Each Disbursement this Period 2000.00 Transaction ID : VNTTW9S68Y0
City Tucson	State AZ	
Zip Code 85703-7312	Purpose of Disbursement Donation	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:	

Full Name (Last, First, Middle Initial) C. HILLARY FOR AMERICA		Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2015
Mailing Address PO Box 5256		Amount of Each Disbursement this Period 2000.00 Transaction ID : VNTTW9SHZ84
City New York	State NY	
Zip Code 10185-5256	Purpose of Disbursement Contribution	Category/ Type
Candidate Name HILLARY RODHAM CLINTON	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: 00 District: 00	

SUBTOTAL of Disbursements This Page (optional).....	5000.00
TOTAL 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 type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Ron Barber for Congress

A. Intercultural Center for the Study of Deserts and Oceans

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 44208

City Tucson State AZ Zip Code 85733-4208

Purpose of Disbursement Donation

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 19 / 2015

Amount of Each Disbursement this Period: 2000.00

Transaction ID : VNTTW9S68Z7

B. KIRKPATRICK FOR SENATE

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 34421

City Phoenix State AZ Zip Code 85067-4421

Purpose of Disbursement Contribution

Candidate Name ANN LEILA KIRKPATRICK

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: AZ District: 00

Date of Disbursement: 11 / 09 / 2015

Amount of Each Disbursement this Period: 2000.00

Transaction ID : VNTTW9SHYT3

C. NCPSSM Foundation

Full Name (Last, First, Middle Initial)
Mailing Address 10 G St NE Ste 600

City Washington State DC Zip Code 20002-4253

Purpose of Disbursement Donation

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 23 / 2015

Amount of Each Disbursement this Period: 5000.00

Transaction ID : VNTTW9SHYX7

SUBTOTAL of Disbursements This Page (optional) 9000.00

TOTAL 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 9
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Ron Barber for Congress

Full Name (Last, First, Middle Initial) A. The Fox Tucson Theatre Foundation		Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2015
Mailing Address PO Box 1008		Amount of Each Disbursement this Period 4000.00
City Tucson	State AZ Zip Code 85702-1008	
Purpose of Disbursement Donation	Candidate Name	Transaction ID : VN TTW9SHYJ0
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. The Loft Cinema		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015
Mailing Address 3233 E Speedway Blvd		Amount of Each Disbursement this Period 5000.00
City Tucson	State AZ Zip Code 85716-3933	
Purpose of Disbursement Donation	Candidate Name	Transaction ID : VN TTW9S68X2
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. TOM O'HALLERAN FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015
Mailing Address 75 TURKEY CREEK TRAIL		Amount of Each Disbursement this Period 2000.00
City Sedona	State AZ Zip Code 86351	
Purpose of Disbursement Contribution	Candidate Name TOM O'HALLERAN	Transaction ID : VN TTW9SHYZ3
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: AZ District: 01	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	11000.00
TOTAL This Period (last page this line number only).....	25000.00