

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)	4336.60	56839.99
(b) Total Offsets to Operating Expenditures (from Line 14).....	23.30	3340.20
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	4313.30	53499.79
8. Cash on Hand at Close of Reporting Period (from Line 27).....	46745.86	
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: M M / D D / Y Y Y Y 07 / 01 / 2015 To: M M / D D / Y Y Y Y 09 / 30 / 2015

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.)	23.30	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)..... ▶	23.30	434765.05

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	4336.60	56839.99
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	2825.00	536428.65
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	7161.60	597243.40

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	53884.16
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	23.30
25. SUBTOTAL (add Line 23 and Line 24).....	53907.46
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	7161.60
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	46745.86

**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	

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)
Ron Barber for Congress

Full Name (Last, First, Middle Initial) A. Blue State Digital		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2015
Mailing Address 406 7th St NW		Amount of Each Disbursement this Period 650.00 Transaction ID : VNTTW9RW8P8
City Washington State DC Zip Code 20004-2261	Purpose of Disbursement Licensing fees Candidate Name Category/Type	
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. Blue State Digital		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2015
Mailing Address 406 7th St NW		Amount of Each Disbursement this Period 650.00 Transaction ID : VNTTW9S1KS6
City Washington State DC Zip Code 20004-2261	Purpose of Disbursement Licensing fees Candidate Name Category/Type	
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) C. NGP VAN, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2015
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 825.00 Transaction ID : VNTTW9RW8K5
City Washington State DC Zip Code 20005-5006	Purpose of Disbursement Database software & support Candidate Name Category/Type	
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:	

SUBTOTAL of Disbursements This Page (optional)	2125.00
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 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. Oldmixon Hill		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2015
Mailing Address 1201 1st Ave S Ste 325		Amount of Each Disbursement this Period 250.00
City Seattle	State WA	
Zip Code 98134-1234	Purpose of Disbursement Media strategy services	Transaction ID : VN TTW9S04H2
Candidate Name	Category/ Type	
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. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2015
Mailing Address PO Box 9622		Amount of Each Disbursement this Period 382.70
City Mission Hills	State CA	
Zip Code 91346-9622	Purpose of Disbursement Telephone expense	Transaction ID : VN TTW9R7Y6
Candidate Name	Category/ Type	
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) C. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2015
Mailing Address PO Box 9622		Amount of Each Disbursement this Period 948.38
City Mission Hills	State CA	
Zip Code 91346-9622	Purpose of Disbursement Final telephone payment	Transaction ID : VN TTW9S0X35
Candidate Name	Category/ Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....	1581.08
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 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)
Ron Barber for Congress

Full Name (Last, First, Middle Initial) A. Wells Fargo		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2015
Mailing Address 4669 E Broadway Blvd		Amount of Each Disbursement this Period 41.70
City Tucson	State AZ	
Zip Code 85711-3511	Purpose of Disbursement Service fee	Transaction ID : VN TTW9R7X8
Candidate Name	Category/ Type	
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. Wells Fargo		Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2015
Mailing Address 4669 E Broadway Blvd		Amount of Each Disbursement this Period 41.16
City Tucson	State AZ	
Zip Code 85711-3511	Purpose of Disbursement Service fee	Transaction ID : VN TTW9S2098
Candidate Name	Category/ Type	
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) c. Wells Fargo		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2015
Mailing Address 4669 E Broadway Blvd		Amount of Each Disbursement this Period 40.52
City Tucson	State AZ	
Zip Code 85711-3511	Purpose of Disbursement Service fee	Transaction ID : VN TTW9S2Z10
Candidate Name	Category/ Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....	123.38
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 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. Winpisinger & Associates, Inc.		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2015
Mailing Address 315 Inspiration Ln		Amount of Each Disbursement this Period 487.06
City Gaithersburg	State MD Zip Code 20878-5808	
Purpose of Disbursement Administrative services/Compliance	Candidate Name	Transaction ID : VNTTW9RXRH2
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.		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	
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.		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	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	487.06
TOTAL This Period (last page this line number only).....	4316.52

**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. NGP VAN, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2015
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 825.00
City Washington	State DC	
Zip Code 20005-5006		Transaction ID : VNTTW9RW8M3
Purpose of Disbursement Database software & support	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Recount	
State: District:		

Full Name (Last, First, Middle Initial) B. SCHNEIDER FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015
Mailing Address PO Box 1318		Amount of Each Disbursement this Period 2000.00
City Deerfield	State IL	
Zip Code 60015-6005		Transaction ID : VNTTW9S2GN6
Purpose of Disbursement Contribution	Category/Type	
Candidate Name BRADLEY SCOTT SCHNEIDER		
Office Sought: <input checked="" 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: IL District: 10		

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	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:		

SUBTOTAL of Disbursements This Page (optional).....	825.00
TOTAL This Period (last page this line number only).....	825.00