

**UNITED STATES HOUSE OF REPRESENTATIVES  
CALENDAR YEAR 2012 FINANCIAL DISCLOSURE STATEMENT**

Form A  
For use by Members, officers, and employees

**HAND  
DELIVERED**

Name: Ron Barber

Daytime Telephone: \_\_\_\_\_

2013 MAY 15 AM 11:54

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U.S. HOUSE OF REPRESENTATIVES  
(Office Use Only)

<b>Filer Status</b>	<input checked="" type="checkbox"/> Member of the U.S. House of Representatives	State: _____ District: <u>05</u>	<input type="checkbox"/> Officer or Employee	Employing Office: _____
<b>Report Type</b>	<input checked="" type="checkbox"/> Annual (May 15, 2013)	<input type="checkbox"/> Amendment	<input type="checkbox"/> Termination	Termination Date: _____

**A \$200 penalty shall be assessed against anyone who files more than 30 days late.**

**PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS**

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? <b>If yes, complete and attach Schedule I.</b>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$350 and not otherwise exempt)? <b>If yes, complete and attach Schedule VI.</b>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? <b>If yes, complete and attach Schedule II.</b>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$350 from one source)? <b>If yes, complete and attach Schedule VII.</b>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? <b>If yes, complete and attach Schedule III.</b>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? <b>If yes, complete and attach Schedule VIII.</b>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
IV. Did you, your spouse, or a dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? <b>If yes, complete and attach Schedule IV.</b>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	IX. Did you have any reportable agreement or arrangement with an outside entity? <b>If yes, complete and attach Schedule IX.</b>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? <b>If yes, complete and attach Schedule V.</b>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	<b>Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.</b>	

**EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS**

IPO—Did you purchase any shares that were allocated as a part of an Initial Public Offering?

Yes  No

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?

Yes  No

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.

Yes  No







**SCHEDULE III—ASSETS AND "UNEARNED" INCOME**  
Continuation Sheet (if needed)

Name **Ron Barber**

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BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset													BLOCK C Type of Income							BLOCK D Amount of Income												BLOCK E Transaction
	A	B	C	D	E	F	G	H	I	J	K	L	M	NONE	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED/BLIND TRUST	TAX-DEFERRED	Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	
SP JT DC JT	None																																
SP JT DC JT	\$1 - \$1,000																																
SP JT DC JT	\$1,001 - \$15,000																																
SP JT DC JT	\$15,001 - \$50,000																																
SP JT DC JT	\$50,001 - \$100,000																																
SP JT DC JT	\$100,001 - \$250,000																																
SP JT DC JT	\$250,001 - \$500,000																																
SP JT DC JT	\$500,001 - \$1,000,000																																
SP JT DC JT	\$1,000,001 - \$5,000,000																																
SP JT DC JT	\$5,000,001 - \$25,000,000																																
SP JT DC JT	\$25,000,001 - \$50,000,000																																
SP JT DC JT	Over \$50,000,000																																
SP JT DC JT	Spouse/DC Asset over \$1,000,000*																																
JT Southwest Gas Corp Stock	X													X							X												
JT Vodafone Stock	X													X							X												
JT P2 State Transit Board Grant Municipal Bond	X													X							X												
JT Glendale P2 Union High School District Municipal Bond	X													X							X												
JT MS Global Fixed Income Opportunity A MF	X													X							X												
JT American Balanced C MF	X													X							X												
JT American Capital World Growth & Income C MF	X													X							X												
JT American Income Fund DE AMERICA A MF	X													X							X												



**SCHEDULE III — ASSETS AND "UNEARNED" INCOME**

Continuation Sheet (if needed)

Name

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BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset													BLOCK C Type of Income							BLOCK D Amount of Income												BLOCK E Transaction		
	A	B	C	D	E	F	G	H	I	J	K	L	M	NONE	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED/BLIND TRUST	TAX-DEFERRED	Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	I	II	III	IV	V	VI	VII	VIII	IX	X	XI		XII	
SP Bank Deposit Program Money Market Cash (Savings)																																			
SP Charles Schwab Stock																																			
SP Capital Palmdale Stock																																			
SP Delta Airlines Stock																																			
SP Packard Collins Stock																																			
SP Time Warner Inc. New Stock																																			
SP Franklin Gold + Precious Metals C MF																																			
JT Manicopa United School District Bond																																			S

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**SCHEDULE III — ASSETS AND "UNEARNED" INCOME**

Continuation Sheet (if needed)

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BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset													BLOCK C Type of Income							BLOCK D Amount of Income												BLOCK E Transaction
	A	B	C	D	E	F	G	H	I	J	K	L	M	NONE	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED/BLIND TRUST	TAX-DEFERRED	Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	
SP JT	None																				None												P S E
	\$1 - \$1,000																				\$1 - \$200												
	\$1,001 - \$15,000																				\$201 - \$1,000												P
SP	SP Rmbs Total Return CMF													X							X												
	Residential Rental Property-Tucson, AZ													X							X												P
SP	College America S29 College 2024 A MF (Virginia S29)													X							X												
SP	College America S29 College 2024 A MF (Virginia S29)													X							X												P
SP	College America S29 College 2024 A MF (Virginia S29)													X							X												
SP	College America S29 College 2024 A MF (Virginia S29)													X							X												P
	State of AZ Retired System Defined Benefit System													X							X												

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**SCHEDULE IV— TRANSACTIONS**

Name

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Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real property held for investment that exceeded \$1,000. Include transactions that resulted in a capital loss. Provide a brief description of any exchange transaction. Exclude transactions between you, your spouse or dependent children, or the purchase or sale of your personal residence, unless it generates rental income. **If only a portion of an asset is sold, please so indicate (i.e., "partial sale").** See example below.

**Capital Gains** — If a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on Schedule III.

\* This column is for assets solely held by your spouse or dependent child.

SP, DC, JT	Asset	Type of Transaction			Check Box if Capital Gain Exceeded \$200	Date (MO/DA/YR) or Quarterly, Monthly, or Bi-weekly, if applicable	Amount of Transaction											
		PURCHASE	SALE	EXCHANGE			A \$1,001-\$15,000	B \$15,001-\$50,000	C \$50,001-\$100,000	D \$100,001-\$250,000	E \$250,001-\$500,000	F \$500,001-\$1,000,000	G \$1,000,001-\$5,000,000	H \$5,000,001-\$25,000,000	I \$25,000,001-\$50,000,000	J Over \$50,000,000	K Over \$1,000,000* (Spouse/DC Asset)	
SP	Example: Mega Corporation Common Stock (partial sale)		X			10-12-12		X										
SP	Energy Select Sector SPDR ETF		X			06/29/12	X											
SP	ISHARES MSCI Malaysia Free Ind. ETF		X			12/17/12	X											
SP	Salt River Project Bond		X			01/03/12	X											
SP	American Income Fund of America SP9a MF (Virginia SP9)		X			09/28/12	X											
SP	American Capital World Growth + Income SP9a MF (Virginia SP9)		X			09/28/12	X											
SP	American Growth Fund SP9a MF (Virginia SP9)		X			09/28/12	X											

# SCHEDULE IV — TRANSACTIONS

Name

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SP, DC, JT SP	Asset	Type of Transaction			Check Box if Capital Gain Exceeded \$200	Date (MO/DAY/YR) or Quarterly, Monthly, or Bi-weekly, if applicable	Amount of Transaction											
		PURCHASE	SALE	EXCHANGE			A \$1,001- \$15,000	B \$15,001- \$50,000	C \$50,001- \$100,000	D \$100,001- \$250,000	E \$250,001- \$500,000	F \$500,001- \$1,000,000	G \$1,000,001- \$5,000,000	H \$5,000,001- \$25,000,000	I \$25,000,001- \$50,000,000	J Over \$50,000,000	K Over \$1,000,000* (Spouse/DC Asset)	
SP	Example: Mega Corporation Common Stock (partial sale)		X			10-12-12		X										
SP	American Bond Fund SP9a MF (Virginia S29)			X														
SP	College 2024a MF (Virginia S29)		X															
SP	American Income Fund of America SP9a MF (Virginia S29)			X														
SP	American Capital World Growth + Income SP9a MF (Virginia S29)			X														
SP	American Growth Fund SP9a MF (Virginia S29)			X														
SP	American Bond Fund SP9a MF (Virginia S29)			X														

**SCHEDULE IV— TRANSACTIONS**

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Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real property held for investment that exceeded \$1,000. Include transactions that resulted in a capital loss. Provide a brief description of any exchange transaction. Exclude transactions between you, your spouse or dependent children, or the purchase or sale of your personal residence, unless it generates rental income. **If only a portion of an asset is sold, please so indicate (i.e., "partial sale").** See example below.

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SP, DC, JT SP	Asset	Type of Transaction			Check Box if Capital Gain Exceeded \$200	Date (MO/DAY/YR) or Quarterly, Monthly, or Bi-weekly, if applicable	Amount of Transaction														
		PURCHASE	SALE	EXCHANGE			A \$1,001- \$15,000	B \$15,001- \$50,000	C \$50,001- \$100,000	D \$100,001- \$250,000	E \$250,001- \$500,000	F \$500,001- \$1,000,000	G \$1,000,001- \$5,000,000	H \$5,000,001- \$25,000,000	I \$25,000,001- \$50,000,000	J Over \$50,000,000	K Over \$1,000,000* (Spouse/DC Asset)				
SP	Example: Mega Corporation Common Stock (partial sale)		X			10-12-12		X													
SP	College 2027 a MF (Virginia S29)	X				09/28/12	X														
SP	American Income Fund of America S29 a MF (Virginia S29)		X			09/28/12	X														
SP	American Bond Fund S29a (Virginia S29) MF		X			09/28/12	X														
SP	American Capital World Growth Income S29a (Virginia S29) MF		X			09/28/12	X														
SP	College 2021 a MF (Virginia S29)	X				09/28/12	X														
SP	American Income Fund of America S29 a MF (Virginia S29)			X		09/28/12	X														

**SCHEDULE IV— TRANSACTIONS**

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Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real property held for investment that exceeded \$1,000. Include transactions that resulted in a capital loss. Provide a brief description of any exchange transaction. Exclude transactions between you, your spouse or dependent children, or the purchase or sale of your personal residence, unless it generates rental income. **If only a portion of an asset is sold, please so indicate (i.e., "partial sale").** See example below.

**Capital Gains** — if a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on Schedule III.

\* This column is for assets solely held by your spouse or dependent child.

SP, DC, JT	Asset	Type of Transaction			Check Box if Capital Gain Exceeded \$200	Date (MO/DA/YR) or Quarterly, Monthly, or Bi-weekly, if applicable	Amount of Transaction																
		PURCHASE	SALE	EXCHANGE			A	B	C	D	E	F	G	H	I	J	K						
SP	Example: Mega Corporation Common Stock (partial sale)		X			10-12-12		X															
SP	American Capital World Growth																						
	Income SP9a (Virginia SP9) MF		X			09/28/12	X																
SP	American Growth Fund SP9a																						
	(Virginia SP9) MF		X			09/28/12	X																
SP	American Bond Fund SP9a																						
	(Virginia SP9) MF		X			09/28/12	X																
SP	College 2027a MF (Virginia SP9)		X			09/28/12	X																

# SCHEDULE V— LIABILITIES

Name

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Report liabilities of over \$10,000 owed to any one creditor **at any time** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Members:** Members are required to report all liabilities secured by real property including mortgages on their personal residence. **Exclude:** Any mortgage on your personal residence (unless it is rented out or you are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report **revolving charge accounts** (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000. \*This column is for liabilities held solely by your spouse or dependent child.

SP, DC, JT	Creditor	Date Liability Incurred Mo/Year	Type of Liability	Amount of Liability											
				A \$10,001-\$15,000	B \$15,001-\$50,000	C \$50,001-\$100,000	D \$100,001-\$250,000	E \$250,001-\$500,000	F \$500,001-\$1,000,000	G \$1,000,001-\$5,000,000	H \$5,000,001-\$25,000,000	I \$25,000,001-\$50,000,000	J Over \$50,000,000	K Spouse/DC Liability Over \$1,000,000*	
Example:	First Bank of Wilmington, DE	May 1998	Mortgage on 123 Main St., Dover, DE				X								
	PNC	Oct 2010	Mortgage on Residential Rental Property - Tucson, AZ				X								

# SCHEDULE VI— GIFTS

Report the source, a brief description, and the value of all gifts totaling more than \$350 received by you, your spouse, or a dependent child from any source during the year. **Exclude:** Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$140 or less need not be added towards the \$350 disclosure threshold. **Note:** The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Ethics)	\$375
N/A		



**SCHEDULE VIII—POSITIONS**

Name

*Ron Barber*

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Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

**Exclude:** Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature.

Position	Name of Organization
<i>Exec Committee</i>	<i>Fund for Civility, Respect and Understanding</i>
<i>Advisory Committee</i>	<i>Fund for Civility, Respect and Understanding</i>

**SCHEDULE IX—AGREEMENTS**

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
<i>Jan 2016</i>	<i>State of Arizona Retirement System</i>	<i>Fired Retirement Benefit</i>