

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
WEBER FOR CONGRESS

ADDRESS (number and street) 1701 Bending Stream
 Check if different than previously reported. (ACC) Friendswood TX 77546

2. **FEC IDENTIFICATION NUMBER** ▼ C C00502229 CITY ▲ STATE ▲ ZIP CODE ▲
3. IS THIS REPORT NEW (N) OR AMENDED (A) STATE ▼ DISTRICT
TX 14

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 03 / 01 / 2016 in the State of TX
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period 01 / 01 / 2016 through 02 / 10 / 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 Robert Nolen
Signature of Treasurer Robert Nolen [Electronically Filed] Date 02 / 18 / 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

Write or Type Committee Name
WEBER 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)).... | 36600.00 | 336398.09 |
| (b) Total Contribution Refunds (from Line 20(d)) | 0.00 | 500.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))..... | 36600.00 | 335898.09 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 17806.03 | 202168.26 |
| (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))..... | 17806.03 | 202168.26 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 284918.33 | |
| 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)..... | 146500.00 | |

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

WEBER 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)..... | 13250.00 | 249099.35 |
| (ii) Unitemized..... | 100.00 | 13698.74 |
| (iii) TOTAL of contributions from individuals ▶ | 13350.00 | 262798.09 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 23250.00 | 73600.00 |
| (d) The Candidate..... | 0.00 | 0.00 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)).. | 36600.00 | 336398.09 |
| 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 | 28.39 |
| 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶ | 36600.00 | 336426.48 |

DETAILED SUMMARY PAGE
of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 17806.03 | 202168.26 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate..... | 0.00 | 80000.00 |
| (b) Of All Other Loans | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... | 0.00 | 80000.00 |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 500.00 |
| (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 | 500.00 |
| 21. OTHER DISBURSEMENTS | 2300.00 | 91593.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ► | 20106.03 | 374261.26 |

III. CASH SUMMARY

| | |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 268424.36 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 36600.00 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 305024.36 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 20106.03 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 284918.33 |

**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 29 | | | |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| | 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
WEBER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Max Blankfeld

Mailing Address 8902 Limerick Ln

| | | |
|-----------------|-------------|-------------------|
| City Houston | State TX | Zip Code 77024 |
|-----------------|-------------|-------------------|

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

| | |
|--|---|
| Name of Employer Gene by Gene, Ltd. | Occupation VP Operations and Marketing |
|--|---|

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | | 02 | | 2016 |

Transaction ID : SA11AI.12655

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. Rachel Delgado

Mailing Address 1403 19th Ave N

| | | |
|--------------------|-------------|-------------------|
| City Texas City | State TX | Zip Code 77590 |
|--------------------|-------------|-------------------|

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

| | |
|--------------------------|------------------------------------|
| Name of Employer Self | Occupation Real Estate Investor |
|--------------------------|------------------------------------|

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | | 05 | | 2016 |

Transaction ID : SA11AI.12656

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Joseph F. Domino

Mailing Address 890 Brandywine St

| | | |
|------------------|-------------|-------------------|
| City Beaumont | State TX | Zip Code 77706 |
|------------------|-------------|-------------------|

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

| | |
|---------------------------------------|--|
| Name of Employer ITC Holdings Corp | Occupation Chief Intergration Officer |
|---------------------------------------|--|

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01 | | 31 | | 2016 |

Transaction ID : SA11AI.12658

Amount of Each Receipt this Period
250.00

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

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

1250.00

**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 29 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
WEBER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Melvin A. Dow

Mailing Address 11107 Hedwig Ln

City Houston State TX Zip Code 77024

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

Name of Employer Haynes and Boone Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 29 / 2016

Transaction ID : SA11AI.12659

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Mr. Martin Fein

Mailing Address 1400 Post Oak Blvd Ste 500

City Houston State TX Zip Code 77056

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

Name of Employer Martin Fein Interests Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 29 / 2016

Transaction ID : SA11AI.12660

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Steven J. Finkelman

Mailing Address 5303 Braesheather Dr

City Houston State TX Zip Code 77096

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

Name of Employer Scope Imports Occupation C.F.O.

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2016

Transaction ID : SA11AI.12661

Amount of Each Receipt this Period
 500.00

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

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

2000.00

**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 7 OF 29 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
WEBER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Roger Greenberg

Mailing Address 909 Fannin St Ste 2700
Two Houston Center

City Houston State TX Zip Code 77010

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

Name of Employer Greenberg, Schwartz, Junell, Greenberg Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 29 / 2016

Transaction ID : SA11AI.12662

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Bennett Greenspan

Mailing Address 5207 Braeburn Dr

City Bellaire State TX Zip Code 77401

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

Name of Employer Family Tree DNA Occupation President/CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2016

Transaction ID : SA11AI.12663

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Mr. Steven M. Lee

Mailing Address 5823 Gulf Fwy Ste 300

City Houston State TX Zip Code 77023

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

Name of Employer Steven M. Lee, PC Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2016

Transaction ID : SA11AI.12664

Amount of Each Receipt this Period
 1500.00

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

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

3000.00

**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 8 OF 29 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
WEBER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ms. Debra Levine

Mailing Address 1 Sugar Creek Center Blvd Ste 550

| | | |
|--------------------|-------------|-------------------|
| City Sugar Land | State TX | Zip Code 77478 |
|--------------------|-------------|-------------------|

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

| | |
|-------------------------------|-------------------------|
| Name of Employer Homemaker | Occupation Homemaker |
|-------------------------------|-------------------------|

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2016

Transaction ID : SA11AI.12665

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. John G. Meador Jr.

Mailing Address 24 N Creekside Ct

| | | |
|-----------------|-------------|-------------------|
| City Houston | State TX | Zip Code 77055 |
|-----------------|-------------|-------------------|

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

| | |
|--|-------------------------------------|
| Name of Employer Pinnacle Alliance Fund | Occupation Real Estate Developer |
|--|-------------------------------------|

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2016

Transaction ID : SA11AI.12667

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
Mr. Max Reichenthal

Mailing Address 865 Lockwood Dr

| | | |
|-----------------|-------------|-------------------|
| City Houston | State TX | Zip Code 77020 |
|-----------------|-------------|-------------------|

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

| | |
|--|-------------------------|
| Name of Employer Texas Iron & Metal | Occupation President |
|--|-------------------------|

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2016

Transaction ID : SA11AI.12668

Amount of Each Receipt this Period
1000.00

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

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

4000.00

**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 9 OF 29 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
WEBER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Joseph A. Rizzo

Mailing Address 2717 Aspen Ln

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Pearland | TX | 77584 |

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

| | |
|------------------|------------|
| Name of Employer | Occupation |
| Cherry Companies | Salesman |

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01 | | 20 | | 2016 |

Transaction ID : SA11AI.12669

Amount of Each Receipt this Period

| |
|--------|
| 250.00 |
|--------|

B. Full Name (Last, First, Middle Initial)
Mr. Lee Schwartz

Mailing Address 3626 Timberside Circle Dr

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Houston | TX | 77025 |

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

| | |
|------------------------|------------|
| Name of Employer | Occupation |
| The Methodist Hospital | Attorney |

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02 | | 02 | | 2016 |

Transaction ID : SA11AI.12671

Amount of Each Receipt this Period

| |
|---------|
| 1000.00 |
|---------|

C. Full Name (Last, First, Middle Initial)
Mr. Roger S. Sofer

Mailing Address 3236 Bammel Ln

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Houston | TX | 77098 |

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

| | |
|-------------------------------|-----------------|
| Name of Employer | Occupation |
| Sofer, Steiner and Associates | Insurance Agent |

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01 | | 29 | | 2016 |

Transaction ID : SA11AI.12672

Amount of Each Receipt this Period

| |
|--------|
| 500.00 |
|--------|

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

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

| |
|---------|
| 1750.00 |
|---------|

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

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

FOR LINE NUMBER: PAGE 10 OF 29
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
WEBER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ms. Robin Stein

Mailing Address 7204 Avenue B

City State Zip Code
Bellaire TX 77401

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 29 / 2016

Transaction ID : SA11AI.12673

Amount of Each Receipt this Period
 1000.00

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
The Medicine Shoppe

Mailing Address 2301 E Mulberry St

City State Zip Code
Angleton TX 77515

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 29 / 2016

Transaction ID : SA11AI.12674

Amount of Each Receipt this Period
 250.00

Amount of Each Receipt this Period
 250.00

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

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

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

1250.00

13250.00

**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 11 OF 29 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
WEBER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
American Air Liquide Holdings, Inc. PAC

Mailing Address 2700 Post Oak Blvd Ste 1800

City Houston State TX Zip Code 77056

FEC ID number of contributing federal political committee. **C C00314054**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 09 / 2016

Transaction ID : SA11C.12676

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
AMERICAN CHEMISTRY COUNCIL PAC

Mailing Address 700 2ND STREET, NE
ATTN: ALLISON STARMANN

City WASHINGTON State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C C00252338**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 03 / 2016

Transaction ID : SA11C.12677

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
CONAWAY FOR CONGRESS

Mailing Address PO BOX 51272

City MIDLAND State TX Zip Code 79710

FEC ID number of contributing federal political committee. **C C00383828**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11C.12678

Amount of Each Receipt this Period
 2000.00

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

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

4000.00

**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 12 OF 29 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
WEBER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
EASTMANPAC - POLITICAL ACTION COMMITTEE OF EASTMAN CHEMICAL COMPANY

Mailing Address PO BOX 431

City Kingsport State TN Zip Code 37662

FEC ID number of contributing federal political committee. **C** C00113159

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 03 / 2016

Transaction ID : SA11C.12680

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE

Mailing Address 101 CONSTITUTION AVE. NW
SUITE 500 WEST

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 09 / 2016

Transaction ID : SA11C.12682

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Ingersoll-Rand Company PAC

Mailing Address 600 13Th St NW Ste 340

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00492314

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 05 / 2016

Transaction ID : SA11C.12683

Amount of Each Receipt this Period
 1000.00

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

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

3000.00

**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 13 OF 29 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
WEBER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)

Mailing Address 600 14TH STREET, NW
SUITE 800

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 03 / 2016

Transaction ID : SA11C.12685

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address 2121 CRYSTAL DRIVE
SUITE 100

City ARLINGTON State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 09 / 2016

Transaction ID : SA11C.12686

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Marathon Oil Company Employees PAC

Mailing Address 5555 San Felipe St Ste 4148

City Houston State TX Zip Code 77056

FEC ID number of contributing federal political committee. **C** C00040568

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 09 / 2016

Transaction ID : SA11C.12687

Amount of Each Receipt this Period
5000.00

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

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

7000.00

**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 14 OF 29 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
WEBER FOR CONGRESS

A. National Beer Wholesalers Association PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1101 King St Ste 600

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 09 / 2016

Transaction ID : SA11C.12688

Amount of Each Receipt this Period
 2500.00

B. RITE AID CORPORATION PAC

Full Name (Last, First, Middle Initial)
Mailing Address 30 HUNTER LANE

City CAMP HILL State PA Zip Code 17011

FEC ID number of contributing federal political committee. **C** C00104083

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 05 / 2016

Transaction ID : SA11C.12690

Amount of Each Receipt this Period
 500.00

C. Texas and Southwestern Cattle Raisers Association PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1005 Congress Ave Ste 1050

City Austin State TX Zip Code 78701

FEC ID number of contributing federal political committee. **C** C00211524

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 20 / 2016

Transaction ID : SA11C.12691

Amount of Each Receipt this Period
 2500.00

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

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

5500.00

**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 15 OF 29 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
WEBER FOR CONGRESS

A. THE BOEING COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 1200 WILSON BLVD

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C C00142711**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 03 / 2016

Transaction ID : SA11C.12693

Amount of Each Receipt this Period
 1000.00

B. The Dow Chemical Company Employees PAC (DowPAC)

Full Name (Last, First, Middle Initial)
Mailing Address 604 W 14th St

City Austin State TX Zip Code 78701

FEC ID number of contributing federal political committee. **C C00074096**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 03 / 2016

Transaction ID : SA11C.12694

Amount of Each Receipt this Period
 2500.00

C. Voter Education

Full Name (Last, First, Middle Initial)
Mailing Address 1201 N Orange St Ste 700 # 7427

City Wilmington State DE Zip Code 19801

FEC ID number of contributing federal political committee. **C C00574681**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 03 / 2016

Transaction ID : SA11C.12696

Amount of Each Receipt this Period
 250.00

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

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

3750.00

23250.00

**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 16 OF 29 | | | |
| | <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)
WEBER FOR CONGRESS

| | | | |
|---|--|-------------------|---|
| Full Name (Last, First, Middle Initial) A. Beaumont Enterprise | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2016 |
| Mailing Address PO Box 2991 | | | Amount of Each Disbursement this Period 107.12 Transaction ID : SB17.12715 |
| City Beaumont | State TX | Zip Code 77704 | |
| Purpose of Disbursement subscription | | 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) B. Capitol Hill Club | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2016 |
| Mailing Address 300 First St., SE | | | Amount of Each Disbursement this Period 412.00 Transaction ID : SB17.12716 |
| City Washington | State DC | Zip Code 20003 | |
| Purpose of Disbursement fundraising expense | | 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. Capitol Hill Club | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2016 |
| Mailing Address 300 First St., SE | | | Amount of Each Disbursement this Period 29.58 Transaction ID : SB17.12752 |
| City Washington | State DC | Zip Code 20003 | |
| Purpose of Disbursement fundraising expense | | 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) | 548.70 |
| 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 17 OF 29 | |
| | <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)
WEBER FOR CONGRESS

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. DeLullo & Associates | | Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2016 |
| Mailing Address 815 King Street Ste 308 | | Amount of Each Disbursement this Period 4750.00 Transaction ID : SB17.12707 |
| City Alexandria | State VA Zip Code 22314 | |
| Purpose of Disbursement Fundraising consulting-4th Qtr commission | | 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) B. DeLullo & Associates | | Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2016 |
| Mailing Address 815 King Street Ste 308 | | Amount of Each Disbursement this Period 1562.80 Transaction ID : SB17.12769 |
| City Alexandria | State VA Zip Code 22314 | |
| Purpose of Disbursement monthly fee | | 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. Fry's Electronics | | Date of Disbursement M M / D D / Y Y Y Y 02 / 08 / 2016 |
| Mailing Address 21300 Gulf fwy | | Amount of Each Disbursement this Period 1611.82 Transaction ID : SB17.12775 |
| City Webster | State TX Zip Code 77598 | |
| Purpose of Disbursement campaign computer | | 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)..... | 7924.62 |
| 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 18 OF 29 | | | |
| | <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)
WEBER FOR CONGRESS

| | | | | |
|---|-----------|--|--|--|
| Full Name (Last, First, Middle Initial) A. Galveston Daily News | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2016 | |
| Mailing Address 8522 Teichman Rd | | | Amount of Each Disbursement this Period 9999.99 9999.99 9999.99 9999.99 9999.99 195.00 | |
| City Galveston | State TX | Zip Code 77553 | Transaction ID : SB17.12709 | |
| Purpose of Disbursement subscription | | 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) B. Home Depot | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2016 | |
| Mailing Address 3200 South Gulf Fwy | | | Amount of Each Disbursement this Period 9999.99 9999.99 9999.99 9999.99 9999.99 350.75 | |
| City League City | State TX | Zip Code 77573 | Transaction ID : SB17.12739 | |
| Purpose of Disbursement T post concrete block for sign trailer | | 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. Lilly & Company | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2016 | |
| Mailing Address 1005 Congress Avenue Suite 910 | | | Amount of Each Disbursement this Period 9999.99 9999.99 9999.99 9999.99 9999.99 4506.92 | |
| City Austin | State TX | Zip Code 78701 | Transaction ID : SB17.12751 | |
| Purpose of Disbursement Fundraising consulting | | 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)..... | 9999.99 9999.99 9999.99 9999.99 9999.99 5052.67 |
| TOTAL This Period (last page this line number only)..... | 9999.99 9999.99 9999.99 9999.99 9999.99 |

**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 19 OF 29 | | | |
| | <input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a | <input type="checkbox"/> 18 <input type="checkbox"/> 20b | <input type="checkbox"/> 19a <input type="checkbox"/> 20c | <input type="checkbox"/> 19b <input type="checkbox"/> 21 | |

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NAME OF COMMITTEE (In Full)
WEBER FOR CONGRESS

| | | | | |
|---|--|-------------------|---|--|
| Full Name (Last, First, Middle Initial) A. MyCampaignStore | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2016 | |
| Mailing Address 304 Whittington PKW | | | Amount of Each Disbursement this Period 322.35 | |
| City Louisville | State KY | Zip Code 40222 | Transaction ID : SB17.12746 | |
| Purpose of Disbursement bumper stickers | | 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) B. Nandos Peri Peri | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2016 | |
| Mailing Address 300 Tingey St SE Suite 150 | | | Amount of Each Disbursement this Period 509.19 | |
| City Washington | State DC | Zip Code 20003 | Transaction ID : SB17.12766 | |
| Purpose of Disbursement Food expense Republican Chief of Staff luncheon | | 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. Office Depot | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2016 | |
| Mailing Address 6211 N Kings Hwy | | | Amount of Each Disbursement this Period 303.15 | |
| City Alexandria | State VA | Zip Code 22303 | Transaction ID : SB17.12705 | |
| Purpose of Disbursement Printer & ink | | 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)..... | 1134.69 |
| 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 20 OF 29 | | | |
| | <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)
WEBER FOR CONGRESS

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Office Depot | | Date of Disbursement MM / DD / YYYY 02 / 04 / 2016 |
| Mailing Address 6211 N Kings Hwy | | Amount of Each Disbursement this Period 116.60 |
| City Alexandria | State VA | |
| Zip Code 22303 | Purpose of Disbursement exchange on printer | Transaction ID : SB17.12764 |
| 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. Omni Dallas | | Date of Disbursement MM / DD / YYYY 02 / 04 / 2016 |
| Mailing Address 555 S Lamar | | Amount of Each Disbursement this Period 212.08 |
| City Dallas | State TX | |
| Zip Code 75202 | Purpose of Disbursement Campaign travel to Texas State GOP convention | Transaction ID : SB17.12768 |
| 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. Pappadeaux Seafood | | Date of Disbursement MM / DD / YYYY 01 / 03 / 2016 |
| Mailing Address 4040 I-10 | | Amount of Each Disbursement this Period 400.00 |
| City Beaumont | State TX | |
| Zip Code 77705 | Purpose of Disbursement Food expense-campaign outreach dinner | Transaction ID : SB17.12698 |
| 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)..... | 728.68 |
| 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 21 OF 29 | | | |
| | <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)
WEBER FOR CONGRESS

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Peterson CPA firm | | Date of Disbursement MM / DD / YYYY 02 / 05 / 2016 |
| Mailing Address 333 E. Parkway Dr | | Amount of Each Disbursement this Period 1100.00 Transaction ID : SB17.12771 |
| City Friendswood State TX Zip Code 77546 | Purpose of Disbursement campaign accounting services | |
| 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. Piryx | | Date of Disbursement MM / DD / YYYY 02 / 02 / 2016 |
| Mailing Address 144 2nd St, 1st Floor | | Amount of Each Disbursement this Period 42.50 Transaction ID : SB17.12753 |
| City San Francisco State CA Zip Code 94105 | Purpose of Disbursement online contribution transaction fee | |
| 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. Piryx | | Date of Disbursement MM / DD / YYYY 02 / 02 / 2016 |
| Mailing Address 144 2nd St, 1st Floor | | Amount of Each Disbursement this Period 21.25 Transaction ID : SB17.12754 |
| City San Francisco State CA Zip Code 94105 | Purpose of Disbursement online contribution transaction fee | |
| 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)..... | 1163.75 |
| 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 22 OF 29 | | | |
| | <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)
WEBER FOR CONGRESS

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Piryx | | Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2016 |
| Mailing Address 144 2nd St, 1st Floor | | Amount of Each Disbursement this Period 42.50 |
| City San Francisco | State CA | |
| Zip Code 94105 | Purpose of Disbursement online contribution transaction fee | Transaction ID : SB17.12755 |
| 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. Piryx | | Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2016 |
| Mailing Address 144 2nd St, 1st Floor | | Amount of Each Disbursement this Period 21.25 |
| City San Francisco | State CA | |
| Zip Code 94105 | Purpose of Disbursement online contribution transaction fee | Transaction ID : SB17.12756 |
| 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. Piryx | | Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2016 |
| Mailing Address 144 2nd St, 1st Floor | | Amount of Each Disbursement this Period 21.25 |
| City San Francisco | State CA | |
| Zip Code 94105 | Purpose of Disbursement online contribution transaction fee | Transaction ID : SB17.12757 |
| 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)..... | 85.00 |
| 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 23 OF 29 | | | |
| | <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)
WEBER FOR CONGRESS

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. Piryx | | Date of Disbursement MM / DD / YYYY 02 / 02 / 2016 |
| Mailing Address 144 2nd St, 1st Floor | | Amount of Each Disbursement this Period 63.75 Transaction ID : SB17.12758 |
| City San Francisco | State CA | |
| Zip Code 94105 | Purpose of Disbursement online contribution transaction fee | 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) B. Piryx | | Date of Disbursement MM / DD / YYYY 02 / 02 / 2016 |
| Mailing Address 144 2nd St, 1st Floor | | Amount of Each Disbursement this Period 21.25 Transaction ID : SB17.12759 |
| City San Francisco | State CA | |
| Zip Code 94105 | Purpose of Disbursement online contribution transaction fee | 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. Storage Choice | | Date of Disbursement MM / DD / YYYY 01 / 25 / 2016 |
| Mailing Address 141 Maple Leaf St | | Amount of Each Disbursement this Period 151.00 Transaction ID : SB17.12737 |
| City League City | State TX | |
| Zip Code 77573 | Purpose of Disbursement campaign storage unit | 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)..... | 236.00 |
| 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 24 OF 29 | |
| | <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)
WEBER FOR CONGRESS

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Wall Street Journal | | Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2016 |
| Mailing Address 200 Liberty St | | Amount of Each Disbursement this Period 30.79 |
| City New York | State NY | |
| Zip Code 10281 | Purpose of Disbursement subscription | Transaction ID : SB17.12708 |
| 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. | | 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: | | |

| | | |
|---|--|---|
| 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)..... | 30.79 |
| TOTAL This Period (last page this line number only)..... | 16904.90 |

**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 25 OF 29 |
| | <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)
WEBER FOR CONGRESS

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. Brazoria County Republican Party | | Date of Disbursement MM / DD / YYYY 02 / 09 / 2016 |
| Mailing Address 135 Spanish Oak Circle | | Amount of Each Disbursement this Period 500.00 Transaction ID : SB21.12779 |
| City Lake Jackson | State TX | |
| Zip Code 77566 | Purpose of Disbursement Lincoln Day sponsorship | 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) B. Center for Pregnancy | | Date of Disbursement MM / DD / YYYY 01 / 20 / 2016 |
| Mailing Address 347 B East Parkwood | | Amount of Each Disbursement this Period 300.00 Transaction ID : SB21.12724 |
| City Friendswood | State TX | |
| Zip Code 77546 | Purpose of Disbursement Golf Marathon/ Bob Wirt | 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. Economic Alliance of Brazoria County | | Date of Disbursement MM / DD / YYYY 01 / 23 / 2016 |
| Mailing Address 4005 Technology Dr Suite 1010 | | Amount of Each Disbursement this Period 215.00 Transaction ID : SB21.12732 |
| City Angleton | State TX | |
| Zip Code 77515 | Purpose of Disbursement annual membership | 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)..... | 1015.00 |
| 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 26 OF 29 | |
| | <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)
WEBER FOR CONGRESS

| | | | |
|---|--|-------------------|---|
| Full Name (Last, First, Middle Initial) A. Friendswood Chamber of Commerce | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2016 |
| Mailing Address 1100 S. Friendswood Dr | | | Amount of Each Disbursement this Period 170.00 Transaction ID : SB21.12719 |
| City Friendswood | State TX | Zip Code 77546 | |
| Purpose of Disbursement annual dues | | 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) B. Galveston Krewe | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2016 |
| Mailing Address | | | Amount of Each Disbursement this Period 400.00 Transaction ID : SB21.12741 |
| City | State | Zip Code | |
| Purpose of Disbursement Tickets to Mardi Gras community event | | 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. Save Our Children | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2016 |
| Mailing Address | | | Amount of Each Disbursement this Period 500.00 Transaction ID : SB21.12726 |
| City Beaumont | State TX | Zip Code 77546 | |
| Purpose of Disbursement charitable contribution | | 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)..... | 1070.00 |
| TOTAL This Period (last page this line number only)..... | 2085.00 |

**SCHEDULE C (FEC Form 3)
LOANS**

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4842**
WEBER FOR CONGRESS

| | | |
|--|-------------------------|---|
| LOAN SOURCE Full Name (Last, First, Middle Initial) RANDY WEBER | [PERSONAL FUNDS] | Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Mailing Address PO BOX 1327 | | |

| | | |
|-------------|-------|----------|
| City | State | ZIP Code |
| FRIENDSWOOD | TX | 77549 |

| | | |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 100000.00 | 11000.00 | 89000.00 |

TERMS

| | | | |
|----------------------|--------------------|---------------|---|
| Date Incurred | Date Due | Interest Rate | Secured: |
| M 12 / D 30 / Y 2011 | M M / D D / Y None | 0.00 % (apr) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

List All Endorsers or Guarantors (if any) to Loan Source

| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
|--|--|
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/> |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/> |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/> |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/> |

| | |
|--|--|
| SUBTOTALS This Period This Page (optional)..... | <input style="width: 100%;" type="text" value="89000.00"/> |
| TOTALS This Period (last page in this line only)..... | <input style="width: 100%;" type="text"/> |

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5921

WEBER FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

RANDY WEBER

Primary

General

Other (specify) ▼

Runoff

Mailing Address
PO BOX 1327

City State ZIP Code
FRIENDSWOOD TX 77549

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
100000.00 67500.00 32500.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
06 / 25 / 2012

M M / D D / Y Y Y Y
None

M M / D D / Y Y Y Y
None

M M / D D / Y Y Y Y
None

M M / D D / Y Y Y Y
None

M M / D D / Y Y Y Y
None

M M / D D / Y Y Y Y
None

M M / D D / Y Y Y Y
None

M M / D D / Y Y Y Y
None

M M / D D / Y Y Y Y
None

M M / D D / Y Y Y Y
None

M M / D D / Y Y Y Y
None

M M / D D / Y Y Y Y
None

0.00 % (apr)

Yes

No

List All Endorsers or Guarantors (if any) to Loan Source

| | |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |

SUBTOTALS This Period This Page (optional)..... ▶ 32500.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)
LOANS**

NAME OF COMMITTEE (In Full) **WEBER FOR CONGRESS** Transaction ID : **SC/10.7910**

| | | |
|--|-------------------------|---|
| LOAN SOURCE Full Name (Last, First, Middle Initial) RANDY WEBER | [PERSONAL FUNDS] | Election: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Mailing Address PO BOX 1327 | | |

| | | |
|-------------|-------|----------|
| City | State | ZIP Code |
| FRIENDSWOOD | TX | 77549 |

| | | |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 25000.00 | 0.00 | 25000.00 |

TERMS

| | | | |
|----------------------|--------------------|---------------|---|
| Date Incurred | Date Due | Interest Rate | Secured: |
| M 11 / D 03 / Y 2012 | M M / D D / Y None | 0.00 % (apr) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

List All Endorsers or Guarantors (if any) to Loan Source

| | |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |

| | |
|--|-----------|
| SUBTOTALS This Period This Page (optional)..... | 25000.00 |
| TOTALS This Period (last page in this line only)..... | 146500.00 |

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.