

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** **C00502229** CITY STATE ZIP CODE STATE DISTRICT
TX 14
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

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

5. Covering Period **MM/DD/YYYY** through **MM/DD/YYYY**
02/11/2016 through **03/31/2016**

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 **MM/DD/YYYY**
07/15/2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name
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))....	40770.53	377168.62
(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)).....	40770.53	376668.62
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	57801.82	259970.08
(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)).....	57801.82	259970.08
8. Cash on Hand at Close of Reporting Period (from Line 27).....	334384.20	
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: M M / D D / Y Y Y Y 02 / 11 / 2016 To: M M / D D / Y Y Y Y 03 / 31 / 2016

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).....	3800.00	253099.35
(ii) Unitemized.....	470.53	13969.27
(iii) TOTAL of contributions from individuals ▶	4270.53	267068.62
(b) Political Party Committees.....	9000.00	9000.00
(c) Other Political Committees (such as PACs).....	27500.00	101100.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	40770.53	377168.62
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)..... ▶		
	40770.53	377197.01

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	57801.82	259970.08
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	0.00	91593.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	57801.82	432063.08

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	351415.49
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	40770.53
25. SUBTOTAL (add Line 23 and Line 24).....	392186.02
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	57801.82
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	334384.20

**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 30
	<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	

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)
WEBER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Doornbos Brothers LP

Mailing Address 1148 Helena Ave

City: Nederland State: TX Zip Code: 77627

FEC ID number of contributing federal political committee: C

Name of Employer: Doornbos Brothers LP Occupation: Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 03 / 31 / 2016

Transaction ID : SA11AI.12924

Amount of Each Receipt this Period: 300.00

Memo Item

B. Full Name (Last, First, Middle Initial)
The Honora Jack M. Fields Jr.

Mailing Address 8 Deer Ridge Estates Blvd

City: Kingwood State: TX Zip Code: 77339

FEC ID number of contributing federal political committee: C

Name of Employer: Texana Global, Inc./ 21st Century Grou Occupation: President & CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 02 / 26 / 2016

Transaction ID : SA11AI.12889

Amount of Each Receipt this Period: 1000.00

Memo Item

C. 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: 5000.00

Date of Receipt: 02 / 16 / 2016

Transaction ID : SA11AI.12935

Amount of Each Receipt this Period: 2500.00

Memo Item

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

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

3800.00

3800.00

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

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

FOR LINE NUMBER: PAGE 6 OF 30
(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)
AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE

Mailing Address **520 N. NORTHWEST HIGHWAY**

City **PARK RIDGE** State **IL** Zip Code **60068**

FEC ID number of contributing federal political committee. **C C00255752**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **4000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 29 2016

Transaction ID : SA11B.12937

Amount of Each Receipt this Period
4000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MAJORITY COMMITTEE PAC--MC PAC

Mailing Address **P.O. BOX 10134**

City **BAKERSFIELD** State **CA** Zip Code **93389**

FEC ID number of contributing federal political committee. **C C00428052**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 31 2016

Transaction ID : SA11B.12931

Amount of Each Receipt this Period
5000.00

Memo Item

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 M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

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

9000.00

9000.00

**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 30
	<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. Beef PAC

Full Name (Last, First, Middle Initial)
Mailing Address 5501 I-40 W

City Amarillo State TX Zip Code 79106

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

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
 02 / 20 / 2016

Transaction ID : SA11C.12785

Amount of Each Receipt this Period
1000.00

Memo Item
Federal funds

B. Build PAC of the National Association of Home Builders

Full Name (Last, First, Middle Initial)
Mailing Address 1201 15th St NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00000901

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
 02 / 26 / 2016

Transaction ID : SA11C.12797

Amount of Each Receipt this Period
1000.00

Memo Item

C. EMMER FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 998

City ANOKA State MN Zip Code 55303

FEC ID number of contributing federal political committee. **C** C00545749

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
 02 / 24 / 2016

Transaction ID : SA11C.12791

Amount of Each Receipt this Period
1000.00

Memo Item

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 30
	<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)
EXXON MOBIL CORPORATION POLITICAL ACTION COMMITTEE (EXXONMOBIL PAC)

Mailing Address PO BOX 20503

City INDIANAPOLIS State IN Zip Code 46220

FEC ID number of contributing federal political committee. **C** C00121368

Name of Employer Occupation

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 / 26 / 2016

Transaction ID : SA11C.12798

Amount of Each Receipt this Period
 2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
General Electric PAC

Mailing Address 1299 Pennsylvania Ave NW

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 27 / 2016

Transaction ID : SA11C.12896

Amount of Each Receipt this Period
 1500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Gulf States Toyota, Inc. Federal PAC

Mailing Address 1375 Enclave Parkway

City Houston State TX Zip Code 77077

FEC ID number of contributing federal political committee. **C** C00349373

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 23 / 2016

Transaction ID : SA11C.12897

Amount of Each Receipt this Period
 3000.00

Memo Item

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 9 OF 30
	<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)
IBAT FEDPAC

Mailing Address 1700 Rio Grande St Ste 100

City Austin State TX Zip Code 78701

FEC ID number of contributing federal political committee. **C C00332841**

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
 02 / 24 / 2016

Transaction ID : SA11C.12899

Amount of Each Receipt this Period
900.00

Memo Item

B. Full Name (Last, First, Middle Initial)
New Cuba PAC

Mailing Address 700 13Th St NW Ste 600

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00572628**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2016

Transaction ID : SA11C.12901

Amount of Each Receipt this Period
5000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
NFIB PAC

Mailing Address 1201 F St NW Ste 200

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C90013509**

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
 02 / 25 / 2016

Transaction ID : SA11C.12903

Amount of Each Receipt this Period
2000.00

Memo Item

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

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

7900.00

**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 10 OF 30
	<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)
PETE SESSIONS FOR CONGRESS

Mailing Address PO BOX 823047

City State Zip Code
DALLAS TX 75382

FEC ID number of contributing federal political committee. **C** C00303305

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
03 / 03 / 2016

Transaction ID : SA11C.12904

Amount of Each Receipt this Period
2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Raytheon Political Action Committee

Mailing Address 1100 Wilson Blvd Ste 1500

City State Zip Code
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00097568

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
03 / 17 / 2016

Transaction ID : SA11C.12905

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Texas Farm Bureau AGFUND PAC

Mailing Address PO Box 2689

City State Zip Code
Waco TX 76702

FEC ID number of contributing federal political committee. **C** C00214981

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 18 / 2016

Transaction ID : SA11C.12782

Amount of Each Receipt this Period
2500.00

Memo Item

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 11 OF 30
	<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 WILLIAMS COMPANIES, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address ONE WILLIAMS CENTER 47TH FLOOR

City TULSA State OK Zip Code 74172

FEC ID number of contributing federal political committee. **C** C00040394

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
 02 / 24 / 2016

Transaction ID : SA11C.12789

Amount of Each Receipt this Period
 2000.00

Memo Item

B. Union Pacific Corporation Fund for Effective Government

Full Name (Last, First, Middle Initial)
Mailing Address 24125 Aldine Westfield Road

City Spring State TX Zip Code 77373

FEC ID number of contributing federal political committee. **C** C00010470

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
 02 / 20 / 2016

Transaction ID : SA11C.12907

Amount of Each Receipt this Period
 1000.00

Memo Item

C. US Rice Producers PAC

Full Name (Last, First, Middle Initial)
Mailing Address 2825 Wilcrest Dr Suite 218

City Houston State TX Zip Code 77042

FEC ID number of contributing federal political committee. **C** C00383661

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
 02 / 11 / 2016

Transaction ID : SA11C.12650

Amount of Each Receipt this Period
 1000.00

Memo Item

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

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

4000.00

27400.00

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 30	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
WEBER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RANDY WEBER

Mailing Address **PO BOX 1327**

City **FRIENDSWOOD** State **TX** Zip Code **77549**

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

Name of Employer **US House of Representatives** Occupation **Member**

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 / 17 / 2016

Transaction ID : SA11D.12912

Amount of Each Receipt this Period
70.00

Memo Item
advance to be repaid for Propellor Club event tickets:

B. 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

Memo Item

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

Memo Item

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

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

0.00

0.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11D

Transaction ID : SA11D.12912

Propeller club Dinner to be reimbursed

Form/Schedule:

Transaction ID:

**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 14 OF 30			
	<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. AIPAC		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2016
Mailing Address 8 Greenway Plaza STE 1590		Amount of Each Disbursement this Period 1800.00 <input type="checkbox"/> Memo Item
City Houston	State TX Zip Code 77046	
Purpose of Disbursement annual membership, 2016 - acct: A00775687.		Transaction ID : SB17.12836
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Beaumont Chamber Commerce		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2016
Mailing Address PO Box 3150		Amount of Each Disbursement this Period 325.00 <input type="checkbox"/> Memo Item
City Beaumont	State TX Zip Code 77704-3150	
Purpose of Disbursement Annual Membership 2016		Transaction ID : SB17.12802
Candidate Name		
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. Best Buy		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2016
Mailing Address 19425 Gulf Fwy		Amount of Each Disbursement this Period 911.41 <input type="checkbox"/> Memo Item
City Webster	State TX Zip Code 77598	
Purpose of Disbursement campaign computer		Transaction ID : SB17.12812
Candidate Name		
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).....	3036.41
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 15 OF 30			
	<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. Best Buy		Date of Disbursement MM / DD / YYYY 02 / 15 / 2016
Mailing Address 19425 Gulf Fwy		Amount of Each Disbursement this Period 119.07
City Webster	State TX	
Zip Code 77598	Purpose of Disbursement campaign computer upgrade	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17.12813
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. Brazoria County Republican Party		Date of Disbursement MM / DD / YYYY 02 / 13 / 2016
Mailing Address 303 Jasmine		Amount of Each Disbursement this Period 300.00
City Lake Jackson	State TX	
Zip Code 77566	Purpose of Disbursement Lincoln-Reagan Day Dinner table	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 003	Transaction ID : SB17.12840
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. Capitol Hill Club		Date of Disbursement MM / DD / YYYY 02 / 18 / 2016
Mailing Address 300 First St., SE		Amount of Each Disbursement this Period 29.58
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement recurring payment	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 004	Transaction ID : SB17.12845
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).....	448.65
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 16 OF 30	
	<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. Capitol Hill Club			Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2016
Mailing Address 300 First St., SE			Amount of Each Disbursement this Period 180.38
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement recurring payment		Category/ Type 007	<input type="checkbox"/> Memo Item
Candidate Name			Transaction ID : SB17.12857
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) B. Chase Card (was Quicken til Nov 2015)			Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2016
Mailing Address PO Box 94014			Amount of Each Disbursement this Period 388.37
City Palatine	State IL	Zip Code 60094-4014	
Purpose of Disbursement Acct: 4118202004099555, DC ofc supplies		Category/ Type 001	<input type="checkbox"/> Memo Item
Candidate Name			Transaction ID : SB17.12810
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) C. Congressional Liquor			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2016
Mailing Address 404 1st St SE			Amount of Each Disbursement this Period 75.70
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement drinks for election night party		Category/ Type 001	<input checked="" type="checkbox"/> Memo Item
Candidate Name			Transaction ID : SB17.12922
Office Sought:	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).....	568.75
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.12922

Chase Card (was Quicken til Nov 2015)

Form/Schedule:

Transaction ID:

**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 30	
	<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 MM / DD / YYYY 02 / 25 / 2016
Mailing Address 815 King Street Ste 308		Amount of Each Disbursement this Period 1524.00 <input type="checkbox"/> Memo Item
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Fundraising costs Feb stmt...rw (handwritten by BW)	Transaction ID : SB17.12837
Candidate Name	Category/Type 001	
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. Friendswood Chamber of Commerce		Date of Disbursement MM / DD / YYYY 03 / 03 / 2016
Mailing Address 1100 S. Friendswood Dr		Amount of Each Disbursement this Period 25.00 <input type="checkbox"/> Memo Item
City Friendswood	State TX	
Zip Code 77546	Purpose of Disbursement state of the city luncheon	Transaction ID : SB17.12841
Candidate Name	Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Jimmy Fullen		Date of Disbursement MM / DD / YYYY 03 / 20 / 2016
Mailing Address P.O. Box 152		Amount of Each Disbursement this Period 200.00 <input type="checkbox"/> Memo Item
City Santa Fe	State TX	
Zip Code 77510	Purpose of Disbursement Galveston County Fair Event Sponsorship	Transaction ID : SB17.12842
Candidate Name	Category/Type 012	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1749.00
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 19 OF 30	
	<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. Harris Teerer #383			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2016	
Mailing Address 401m Street SE			Amount of Each Disbursement this Period 75.70	
City Washington	State DC	Zip Code 20003	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.12915	
Purpose of Disbursement food and drinks for election night celebration		Category/ Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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. Hill Country BBQ DC			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2016	
Mailing Address 410 7th NW			Amount of Each Disbursement this Period 240.00	
City Washington	State DC	Zip Code 20004	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.12920	
Purpose of Disbursement Food for Election night Rally		Category/ Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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. Justice Guzman Campaign			Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2016	
Mailing Address 815 A Brazos PMB 279			Amount of Each Disbursement this Period 1000.00	
City Austin	State TX	Zip Code 78701	<input type="checkbox"/> Memo Item Transaction ID : SB17.12832	
Purpose of Disbursement campaign contrib		Category/ Type 011		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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).....	1000.00
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.12915

Chase Card (was Quicken til Nov 2015)

Form/Schedule: SB17

Transaction ID: SB17.12920

Chase Card (was Quicken til Nov 2015)

**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 30	
	<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. Lilly & Company		Date of Disbursement MM / DD / YYYY 02 / 20 / 2016
Mailing Address 1005 Congress Avenue Suite 910		Amount of Each Disbursement this Period 9560.06
City Austin State TX Zip Code 78701	Purpose of Disbursement contribution compliance for Feb fee, inv 2769 Category/Type 001	
Candidate Name	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)	<input type="checkbox"/> Memo Item Transaction ID : SB17.12859
State: District:		

Full Name (Last, First, Middle Initial) B. Lilly & Company		Date of Disbursement MM / DD / YYYY 03 / 20 / 2016
Mailing Address 1005 Congress Avenue Suite 910		Amount of Each Disbursement this Period 4436.84
City Austin State TX Zip Code 78701	Purpose of Disbursement March fee, inv 2811 Category/Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item Transaction ID : SB17.12860
State: District:		

Full Name (Last, First, Middle Initial) c. Mailchimp.com		Date of Disbursement MM / DD / YYYY 03 / 21 / 2016
Mailing Address 675 Ponce de Leon Ave NE Suite 5000		Amount of Each Disbursement this Period 75.00
City Atlanta State GA Zip Code 30308	Purpose of Disbursement Postage and mailer services Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item Transaction ID : SB17.12862
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	9560.06
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 30	
	<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. Najvar Law Firm			Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2016	
Mailing Address 4151 Southwest Freeway Suite 625			Amount of Each Disbursement this Period 4000.00	
City Houston	State TX	Zip Code 77027	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Legal Fees		Category/Type 001		
Candidate Name			Transaction ID : SB17.12863	
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. NRCC			Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2016	
Mailing Address 320 1st St, SE			Amount of Each Disbursement this Period 35000.00	
City Washington	State DC	Zip Code 20003	<input type="checkbox"/> Memo Item	
Purpose of Disbursement dues		Category/Type 011		
Candidate Name			Transaction ID : SB17.12865	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" 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 / 28 / 2016	
Mailing Address 144 2nd St, 1st Floor			Amount of Each Disbursement this Period 4.25	
City San Francisco	State CA	Zip Code 94105	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Credit card processing fee for Lee, Samuel J		Category/Type 003		
Candidate Name			Transaction ID : SB17.12873	
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).....	39004.25
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 30	
	<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 03 / 16 / 2016
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 4.25
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Credit card processing fee for Overman, Ronnie		<input type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.12874
State: District:	Category/Type 003	

Full Name (Last, First, Middle Initial) B. Piryx		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2016
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 1.06
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Credit card processing fee for Robert Glen Smith		<input type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.12875
State: District:	Category/Type 003	

Full Name (Last, First, Middle Initial) c. Propeller Club		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2016
Mailing Address 1912 Winnie Rear St		Amount of Each Disbursement this Period 70.00
City Galveston	State TX Zip Code 77550	
Purpose of Disbursement Dues		<input checked="" type="checkbox"/> Memo Item
Candidate Name		
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)	Transaction ID : SB17.12913
State: District:	Category/Type 002	

SUBTOTAL of Disbursements This Page (optional).....	5.31
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 30	
	<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. Southwest airlines		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2016
Mailing Address P.O. Box 36647-1CR		Amount of Each Disbursement this Period 257.98
City Dallas,	State TX	
Zip Code 75235	Purpose of Disbursement Pastor's conference	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 002	Transaction ID : SB17.12819
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Southwest airlines		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2016
Mailing Address P.O. Box 36647-1CR		Amount of Each Disbursement this Period 312.10
City Dallas,	State TX	
Zip Code 75235	Purpose of Disbursement Pastor's conference	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 002	Transaction ID : SB17.12821
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Storage Choice		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2016
Mailing Address 141 Maple Leaf St		Amount of Each Disbursement this Period 151.00
City League City	State TX	
Zip Code 77573	Purpose of Disbursement recurring payment	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 003	Transaction ID : SB17.12867
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).....	721.08
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 25 OF 30	
	<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)		Date of Disbursement	
A. Storage Choice		M M / D D / Y Y Y Y 03 / 17 / 2016	
Mailing Address 141 Maple Leaf St		Amount of Each Disbursement this Period	
City League City State TX Zip Code 77573		151.00	
Purpose of Disbursement recurring payment		<input type="checkbox"/> Memo Item	
Candidate Name		Transaction ID : SB17.12868	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016	
State: District:		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Category/Type 001	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B. The Political Firm		M M / D D / Y Y Y Y 03 / 02 / 2016	
Mailing Address 5555 Hilton Ave, Suite 201		Amount of Each Disbursement this Period	
City Baton Rouge State LA Zip Code 70808		1285.63	
Purpose of Disbursement Invoice GOTV Robo Calls		<input type="checkbox"/> Memo Item	
Candidate Name		Transaction ID : SB17.12876	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016	
State: District:		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Category/Type 003	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C. Wall Street Journal		M M / D D / Y Y Y Y 02 / 11 / 2016	
Mailing Address 200 Liberty St		Amount of Each Disbursement this Period	
City New York State NY Zip Code 10281		30.79	
Purpose of Disbursement Newspaper		<input type="checkbox"/> Memo Item	
Candidate Name		Transaction ID : SB17.12803	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016	
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Category/Type 001	

SUBTOTAL of Disbursements This Page (optional).....	1467.42
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 30	
	<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 03 / 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 Newspaper	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : SB17.12807
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Courtney Weaver		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2016
Mailing Address 5353 Columbia Pike apt 407		Amount of Each Disbursement this Period 200.00
City Arlington	State VA	
Zip Code 22204	Purpose of Disbursement Employee payment	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : SB17.12828
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. Courtney Weaver		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2016
Mailing Address 5353 Columbia Pike apt 407		Amount of Each Disbursement this Period 200.00
City Arlington	State VA	
Zip Code 22204	Purpose of Disbursement Employee payment	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : SB17.12829
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).....	430.79
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 27 OF 30	
	<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)
WEBER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Courtney Weaver		Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2016
Mailing Address 5353 Columbia Pike apt 407		Amount of Each Disbursement this Period 200.00 <input type="checkbox"/> Memo Item
City Arlington	State VA	
Zip Code 22204	Purpose of Disbursement Employee payment	Transaction ID : SB17.12830
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Wells Fargo Interest Payment		Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2016
Mailing Address PO Box 6995		Amount of Each Disbursement this Period -12.96 <input type="checkbox"/> Memo Item
City Portland	State OR	
Zip Code 97228-6995	Purpose of Disbursement Deposit	Transaction ID : SB17.12839
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" 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.		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	<input type="checkbox"/> Memo Item
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).....	187.04
TOTAL This Period (last page this line number only).....	58178.76

SCHEDULE C (FEC Form 3)
LOANS

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

LOAN SOURCE Full Name (Last, First, Middle Initial) **RANDY WEBER** *PERSONAL FUNDS* Memo Item
 Election: 2012
 Primary
 General
 Other (specify) ▼

Mailing Address
 PO BOX 1327

City State ZIP Code
 FRIENDSWOOD TX 77549

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

Date Incurred: M 12 / D 30 / Y 2011
 Date Due: M / D / Y None
 Interest Rate: 0.00 % (apr)
 Secured: 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)..... ▶ 89000.00

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

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** Memo Item
RANDY WEBER

Election: 2012

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

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

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

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) **PERSONAL FUNDS** Memo Item
RANDY WEBER
 Election: 2012
 Primary
 General
 Other (specify) ▼

Mailing Address
 PO BOX 1327
 City State ZIP Code
 FRIENDSWOOD TX 77549

Original Amount of Loan 25000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 25000.00
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TERMS
 Date Incurred: M 11 / D 03 / Y 2012
 Date Due: M M / D D / Y None
 Interest Rate: 0.00 % (apr)
 Secured: 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).....	▶	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.