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CENTERS

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

1. NAME OF COMMITTEE (in full) TYPE OR PRINT

Example: If typing, type over the lines.

12FE4M5

Wes Neuman For Congress

ADDRESS (number and street)

280 Wekiva Springs Rd., Suite 3030

Check if different than previously reported. (ACC)

Longwood

FL

32779

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

STATE DISTRICT

C C00553545

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

FL

07

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M

D D

Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M

D D

Y Y Y Y

in the State of

5. Covering Period

M M 04

D D 01

Y Y Y Y 2014

through

M M 06

D D 30

Y Y Y Y 2014

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 Linda J Neuman,

Signature of Treasurer Linda J Neuman,

Date

M M 07

D D 15

Y Y Y Y 2014

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

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FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 36

Write or Type Committee Name

Wes Neuman For Congress

Report Covering the Period: From:

MM / DD / YYYY
04 / 01 / 2014

To:

MM / DD / YYYY
06 / 30 / 2014

**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))

7376.38

7376.38

(b) Total Contribution Refunds
(from Line 20(d))

0.00

0.00

(c) Net Contributions (other than loans)
(subtract Line 6(b) from Line 6(a))

7376.38

7376.38

7. Net Operating Expenditures

(a) Total Operating Expenditures
(from Line 17)

28664.31

28664.31

(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))

28664.31

28664.31

**8. Cash on Hand at Close of
Reporting Period (from Line 27)**

4953.78

**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)**

22139.62

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)

PAGE 3 / 36

Write or Type Committee Name

Wes Neuman For Congress

Report Covering the Period: From: MM / DD / YYYY
04 / 01 / 2014 To: MM / DD / YYYY
06 / 30 / 2014

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)
 - (ii) Unitemized
 - (iii) TOTAL of contributions from individuals ▶
- (b) Political Party Committees
- (c) Other Political Committees (such as PACs)
- (d) The Candidate
- (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

3698.00
3678.38
7376.38
0.00
0.00
0.00
7376.38

3698.00
3678.38
7376.38
0.00
0.00
0.00
7376.38

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

- (a) Made or Guaranteed by the Candidate
- (b) All Other Loans
- (c) TOTAL LOANS (add Lines 13(a) and (b))

22139.62
0.00
22139.62

22139.62
0.00
22139.62

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)

29516.00

29516.00

14003-127-3003

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	28664.31	28664.31
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(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	0.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	28664.31	28664.31

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	4102.09
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	29516.00
25. SUBTOTAL (add Line 23 and Line 24).....	33618.09
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	28664.31
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	4953.78

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 5 OF 36
	(check only one)	
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 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)
Wes Neuman For Congress

A. Full Name (Last, First, Middle Initial)
Martha Dervish

Mailing Address 1732 Fountainhead Dr.

City Lake Mary	State FL	Zip Code 32746-4402
-------------------	-------------	------------------------

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

Name of Employer none	Occupation housewife
--------------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
MM / DD / YYYY
04 / 24 / 2014

Transaction ID : SA11AI.4111

Amount of Each Receipt this Period
1000.00
credit card

B. Full Name (Last, First, Middle Initial)
Martha Dervish

Mailing Address 1732 Fountainhead Dr.

City Lake Mary	State FL	Zip Code 32746-4402
-------------------	-------------	------------------------

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

Name of Employer none	Occupation housewife
--------------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
MM / DD / YYYY
05 / 05 / 2014

Transaction ID : SA11AI.4112

Amount of Each Receipt this Period
1000.00
credit card

C. Full Name (Last, First, Middle Initial)
Martha Dervish

Mailing Address 1732 Fountainhead Dr.

City Lake Mary	State FL	Zip Code 32746-4402
-------------------	-------------	------------------------

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

Name of Employer none	Occupation housewife
--------------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
MM / DD / YYYY
06 / 19 / 2014

Transaction ID : SA11AI.4117

Amount of Each Receipt this Period
500.00
credit card

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

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

2500.00

FORM 1111111111

**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 36			
	(check only one)			
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	
<input type="checkbox"/> 15				

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NAME OF COMMITTEE (In Full)
Wes Neuman For Congress

A. Full Name (Last, First, Middle Initial)
Mark Neuman

Mailing Address **650 Longmeadow Circle**

City **Longwood** State **FL** Zip Code **32779**

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

Name of Employer **US Army Corps of Engineers** Occupation **Division Chief**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2010**

Date of Receipt
 M M / D D / Y Y
 04 / 18 / 2014

Transaction ID : **SA11AI.4132**

Amount of Each Receipt this Period
 201.00

cash

B. Full Name (Last, First, Middle Initial)
Mark Neuman

Mailing Address **650 Longmeadow Circle**

City **Longwood** State **FL** Zip Code **32779**

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

Name of Employer **US Army Corps of Engineers** Occupation **Division Chief**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2010**

Date of Receipt
 M M / D D / Y Y
 04 / 28 / 2014

Transaction ID : **SA11AI.4313**

Amount of Each Receipt this Period
 268.00

C. Full Name (Last, First, Middle Initial)
Mark Neuman

Mailing Address **650 Longmeadow Circle**

City **Longwood** State **FL** Zip Code **32779**

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

Name of Employer **US Army Corps of Engineers** Occupation **Division Chief**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2010**

Date of Receipt
 M M / D D / Y Y
 05 / 14 / 2014

Transaction ID : **SA11AI.4130**

Amount of Each Receipt this Period
 200.00

cash

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

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

669.00

1-800-4-A-1-1100

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 7 OF 36	
	(check only one)			
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	
				<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Wes Neuman For Congress

A. Full Name (Last, First, Middle Initial)
Mark Neuman

Mailing Address **650 Longmeadow Circle**

City **Longwood** State **FL** Zip Code **32779**

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

Name of Employer **US Army Corps of Engineers** Occupation **Division Chief**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **678.00**

Date of Receipt
 MM / DD / YYYY
06 / 17 / 2014

Transaction ID : **SA11AI.4129**

Amount of Each Receipt this Period
9.00

cash

B. Full Name (Last, First, Middle Initial)
Mark Neuman

Mailing Address **650 Longmeadow Circle**

City **Longwood** State **FL** Zip Code **32779**

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

Name of Employer **US Army Corps of Engineers** Occupation **Division Chief**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **698.00**

Date of Receipt
 MM / DD / YYYY
06 / 17 / 2014

Transaction ID : **SA11AI.4131**

Amount of Each Receipt this Period
20.00

check

C. Full Name (Last, First, Middle Initial)
William Thibodeaux

Mailing Address **113 Oakdale Loop**

City **Houma** State **LA** Zip Code **70360-5932**

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

Name of Employer **none** Occupation **not employed**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 MM / DD / YYYY
04 / 11 / 2014

Transaction ID : **SA11AI.4102**

Amount of Each Receipt this Period
250.00

credit card

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

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

279.00

140001 140001 140001

**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 36
	<input type="checkbox"/> 11a 12 <input checked="" 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)
Wes Neuman For Congress

Full Name (Last, First, Middle Initial)
WESLEY RYAN NEUMAN

A. Mailing Address **PO BOX 915949**

City State Zip Code
LONGWOOD FL 32791

FEC ID number of contributing federal political committee. **C H4FL07087**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
6134.21

Date of Receipt
 M M / D D / Y Y
04 / 29 / 2014

Transaction ID : **SA13A.4361**

Amount of Each Receipt this Period
6134.21
 campaign expenses

B. Full Name (Last, First, Middle Initial)
WESLEY RYAN NEUMAN

Mailing Address **PO BOX 915949**

City State Zip Code
LONGWOOD FL 32791

FEC ID number of contributing federal political committee. **C H4FL07087**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
14134.21

Date of Receipt
 M M / D D / Y Y
05 / 12 / 2014

Transaction ID : **SA13A.4362**

Amount of Each Receipt this Period
8000.00
 campaign expenses

C. Full Name (Last, First, Middle Initial)
WESLEY RYAN NEUMAN

Mailing Address **PO BOX 915949**

City State Zip Code
LONGWOOD FL 32791

FEC ID number of contributing federal political committee. **C H4FL07087**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
22139.62

Date of Receipt
 M M / D D / Y Y
06 / 27 / 2014

Transaction ID : **SA13A.4363**

Amount of Each Receipt this Period
8005.41
 campaign expenses

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

22139.62

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

22139.62

148011-1111-11011

**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 10 OF 36			
	<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)
Wes Neuman For Congress

Full Name (Last, First, Middle Initial) A. Activate LLC		Date of Disbursement
Mailing Address 2232 Vermont St		<input type="text" value="04"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City Lawrence	State KS	Zip Code 66046
Purpose of Disbursement	<input type="text" value="003"/>	Amount of Each Disbursement this Period <input type="text" value="600.00"/>
Candidate Name Wes Neuman For Congress		Transaction ID : SB17.4331
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 07		

Full Name (Last, First, Middle Initial) B. Activate LLC		Date of Disbursement
Mailing Address 2232 Vermont St		<input type="text" value="05"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City Lawrence	State KS	Zip Code 66046
Purpose of Disbursement	<input type="text" value="003"/>	Amount of Each Disbursement this Period <input type="text" value="300.00"/>
Candidate Name Wes Neuman For Congress		Transaction ID : SB17.4336
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 07		

Full Name (Last, First, Middle Initial) C. Activate LLC		Date of Disbursement
Mailing Address 2232 Vermont St		<input type="text" value="06"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City Lawrence	State KS	Zip Code 66046
Purpose of Disbursement	<input type="text" value="003"/>	Amount of Each Disbursement this Period <input type="text" value="300.00"/>
Candidate Name Wes Neuman For Congress		Transaction ID : SB17.4353
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 07		

SUBTOTAL of Disbursements This Page (optional).....	<input type="text" value="1200.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

1 FROM 1001 MONTH

**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 11 OF 36			
	<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)
Wes Neuman For Congress

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement
Mailing Address P.O. Box 650448		MM / DD / YYYY 04 / 01 / 2014
City Dallas	State TX	Zip Code 75265
Purpose of Disbursement NGP Van	Category/ Type 003	Amount of Each Disbursement this Period 2700.00
Candidate Name Wes Neuman For Congress	Transaction ID : SB17.4365	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 07		

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement
Mailing Address P.O. Box 650448		MM / DD / YYYY 04 / 01 / 2014
City Dallas	State TX	Zip Code 75265
Purpose of Disbursement volunteer supplies	Category/ Type 007	Amount of Each Disbursement this Period 66.81
Candidate Name Wes Neuman For Congress	Transaction ID : SB17.4366	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 07		

Full Name (Last, First, Middle Initial) C. American Express		Date of Disbursement
Mailing Address P.O. Box 650448		MM / DD / YYYY 04 / 04 / 2014
City Dallas	State TX	Zip Code 75265
Purpose of Disbursement volunteer event	Category/ Type 007	Amount of Each Disbursement this Period 58.49
Candidate Name Wes Neuman For Congress	Transaction ID : SB17.4367	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 07		

SUBTOTAL of Disbursements This Page (optional).....	2825.30
TOTAL This Period (last page this line number only).....	

110011011004

**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 13 OF 36	
	<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)
Wes Neuman For Congress

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement MM / DD / YYYY 04 / 13 / 2014
Mailing Address P.O. Box 650448		Amount of Each Disbursement this Period 199.00 Transaction ID : SB17.4371
City Dallas	State TX	
Zip Code 75265	Purpose of Disbursement Hyatt regency Jacksonville	Category/ Type 002
Candidate Name Wes Neuman For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 07	

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement MM / DD / YYYY 04 / 16 / 2014
Mailing Address P.O. Box 650448		Amount of Each Disbursement this Period 78.73 Transaction ID : SB17.4372
City Dallas	State TX	
Zip Code 75265	Purpose of Disbursement volunteer supplies	Category/ Type 007
Candidate Name Wes Neuman For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 07	

Full Name (Last, First, Middle Initial) C. American Express		Date of Disbursement MM / DD / YYYY 04 / 16 / 2014
Mailing Address P.O. Box 650448		Amount of Each Disbursement this Period 57.11 Transaction ID : SB17.4373
City Dallas	State TX	
Zip Code 75265	Purpose of Disbursement USPS	Category/ Type 001
Candidate Name Wes Neuman For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 07	

SUBTOTAL of Disbursements This Page (optional).....	334.84
TOTAL This Period (last page this line number only).....	

147001-1001-10001

**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)

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

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NAME OF COMMITTEE (In Full)
Wes Neuman For Congress

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement MM / DD / YYYY 05 / 04 / 2014
Mailing Address P.O. Box 650448		Amount of Each Disbursement this Period 49.00 Transaction ID : SB17.4380
City Dallas	State TX	
Zip Code 75265	Purpose of Disbursement MBA Orlando	Category/ Type 007
Candidate Name Wes Neuman For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 07	

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement MM / DD / YYYY 05 / 04 / 2014
Mailing Address P.O. Box 650448		Amount of Each Disbursement this Period 890.94 Transaction ID : SB17.4381
City Dallas	State TX	
Zip Code 75265	Purpose of Disbursement Ashley Parsons LLC	Category/ Type 006
Candidate Name Wes Neuman For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 07	

Full Name (Last, First, Middle Initial) C. American Express		Date of Disbursement MM / DD / YYYY 05 / 06 / 2014
Mailing Address P.O. Box 650448		Amount of Each Disbursement this Period 40.00 Transaction ID : SB17.4382
City Dallas	State TX	
Zip Code 75265	Purpose of Disbursement NOH8 event	Category/ Type 007
Candidate Name Wes Neuman For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 07	

SUBTOTAL of Disbursements This Page (optional).....	979.94
TOTAL This Period (last page this line number only).....	

FROM PLAN MON

**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 36	
	<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)
Wes Neuman For Congress

A. American Express

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 650448

City Dallas State TX Zip Code 75265

Purpose of Disbursement
Young Democrats

Candidate Name
Wes Neuman For Congress

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: FL District: 07

Date of Disbursement: 05 / 10 / 2014

Amount of Each Disbursement this Period: 25.00

Transaction ID : SB17.4386

Category/Type: 001

B. American Express

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 650448

City Dallas State TX Zip Code 75265

Purpose of Disbursement
The Woods event

Candidate Name
Wes Neuman For Congress

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: FL District: 07

Date of Disbursement: 05 / 12 / 2014

Amount of Each Disbursement this Period: 56.37

Transaction ID : SB17.4387

Category/Type: 007

C. American Express

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 650448

City Dallas State TX Zip Code 75265

Purpose of Disbursement
Flag pins

Candidate Name
Wes Neuman For Congress

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: FL District: 07

Date of Disbursement: 05 / 13 / 2014

Amount of Each Disbursement this Period: 40.18

Transaction ID : SB17.4388

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional)..... 121.55

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

14031127-3029

**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 36	
	<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)
Wes Neuman For Congress

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement MM / DD / YYYY 05 / 24 / 2014
Mailing Address P.O. Box 650448		Amount of Each Disbursement this Period 27.61 Transaction ID : SB17.4393
City Dallas	State TX	
Purpose of Disbursement 4Rivers volunteer event		Category/ Type 003
Candidate Name Wes Neuman For Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL	District: 07	

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement MM / DD / YYYY 05 / 27 / 2014
Mailing Address P.O. Box 650448		Amount of Each Disbursement this Period 52.51 Transaction ID : SB17.4394
City Dallas	State TX	
Purpose of Disbursement Shell		Category/ Type 002
Candidate Name Wes Neuman For Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL	District: 07	

Full Name (Last, First, Middle Initial) C. American Express		Date of Disbursement MM / DD / YYYY 05 / 28 / 2014
Mailing Address P.O. Box 650448		Amount of Each Disbursement this Period 86.44 Transaction ID : SB17.4392
City Dallas	State TX	
Purpose of Disbursement Publix supplies		Category/ Type 003
Candidate Name Wes Neuman For Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL	District: 07	

SUBTOTAL of Disbursements This Page (optional).....	166.56
TOTAL This Period (last page this line number only).....	

14001171-0001

**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 36	
	<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)
Wes Neuman For Congress

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement MM / DD / YYYY 05 / 30 / 2014
Mailing Address P.O. Box 650448		Amount of Each Disbursement this Period 6.00 Transaction ID : SB17.4398
City Dallas	State TX	
Zip Code 75265	Purpose of Disbursement city of Orlando parking	Category/ Type 002
Candidate Name Wes Neuman For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 07	

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement MM / DD / YYYY 05 / 30 / 2014
Mailing Address P.O. Box 650448		Amount of Each Disbursement this Period 141.00 Transaction ID : SB17.4399
City Dallas	State TX	
Zip Code 75265	Purpose of Disbursement Jet Blue DC event	Category/ Type 002
Candidate Name Wes Neuman For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 07	

Full Name (Last, First, Middle Initial) C. American Express		Date of Disbursement MM / DD / YYYY 05 / 31 / 2014
Mailing Address P.O. Box 650448		Amount of Each Disbursement this Period 89.00 Transaction ID : SB17.4400
City Dallas	State TX	
Zip Code 75265	Purpose of Disbursement Delta DC event	Category/ Type 002
Candidate Name Wes Neuman For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 07	

SUBTOTAL of Disbursements This Page (optional).....	236.00
TOTAL This Period (last page this line number only).....	

11030101-1-1001

**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 36			
	<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)
Wes Neuman For Congress

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement
Mailing Address P.O. Box 650448		MM / DD / YYYY 06 / 12 / 2014
City Dallas	State TX	Zip Code 75265
Purpose of Disbursement tortilla coast DC event	Category/ Type 003	Amount of Each Disbursement this Period 33.05
Candidate Name Wes Neuman For Congress	Disbursement For: 2014	Transaction ID : SB17.4404
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 07		

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement
Mailing Address P.O. Box 650448		MM / DD / YYYY 06 / 12 / 2014
City Dallas	State TX	Zip Code 75265
Purpose of Disbursement Uber taxi	Category/ Type 002	Amount of Each Disbursement this Period 1.98
Candidate Name Wes Neuman For Congress	Disbursement For: 2014	Transaction ID : SB17.4405
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 07		

Full Name (Last, First, Middle Initial) C. American Express		Date of Disbursement
Mailing Address P.O. Box 650448		MM / DD / YYYY 06 / 14 / 2014
City Dallas	State TX	Zip Code 75265
Purpose of Disbursement Uber taxi	Category/ Type 002	Amount of Each Disbursement this Period 53.44
Candidate Name Wes Neuman For Congress	Disbursement For: 2014	Transaction ID : SB17.4406
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 07		

SUBTOTAL of Disbursements This Page (optional).....	88.47
TOTAL This Period (last page this line number only).....	

14001101 - MOD001

**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)

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

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NAME OF COMMITTEE (In Full)
Wes Neuman For Congress

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement
Mailing Address P.O. Box 650448		<input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City Dallas	State TX	Zip Code 75265
Purpose of Disbursement Crowne Plaza	<input type="text" value="002"/>	Amount of Each Disbursement this Period <input type="text" value="351.61"/>
Candidate Name Wes Neuman For Congress	Category/ Type	Transaction ID : SB17.4364
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 07		

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement
Mailing Address P.O. Box 650448		<input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City Dallas	State TX	Zip Code 75265
Purpose of Disbursement Shell	<input type="text" value="002"/>	Amount of Each Disbursement this Period <input type="text" value="48.26"/>
Candidate Name Wes Neuman For Congress	Category/ Type	Transaction ID : SB17.4411
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 07		

Full Name (Last, First, Middle Initial) C. Ashley Parsons Design, LLC		Date of Disbursement
Mailing Address 1483 Lake Baldwin Lane Ste c		<input type="text" value="05"/> / <input type="text" value="13"/> / <input type="text" value="2014"/>
City Orlando	State FL	Zip Code 32814
Purpose of Disbursement	<input type="text" value="004"/>	Amount of Each Disbursement this Period <input type="text" value="500.00"/>
Candidate Name Wes Neuman For Congress	Category/ Type	Transaction ID : SB17.4343
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 07		

SUBTOTAL of Disbursements This Page (optional).....	<input type="text" value="899.87"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

140N11N1M0000

**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 29 OF 36
	<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)
Wes Neuman For Congress

Full Name (Last, First, Middle Initial) A. Ellen Juliano		Date of Disbursement MM / DD / YYYY 05 / 13 / 2014
Mailing Address 1042 Rosetta Drive		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.4338
City Deltona	State FL	
Zip Code 32725	Purpose of Disbursement campaign consultant	Category/ Type 001
Candidate Name Wes Neuman For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 07	

Full Name (Last, First, Middle Initial) B. Ellen Juliano		Date of Disbursement MM / DD / YYYY 06 / 02 / 2014
Mailing Address 1042 Rosetta Drive		Amount of Each Disbursement this Period 750.00 Transaction ID : SB17.4356
City Deltona	State FL	
Zip Code 32725	Purpose of Disbursement campaign consultant	Category/ Type 001
Candidate Name Wes Neuman For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 07	

Full Name (Last, First, Middle Initial) C. Tiffany Namey		Date of Disbursement MM / DD / YYYY 05 / 13 / 2014
Mailing Address 2411 Chinook Trail		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.4339
City Maitland	State FL	
Zip Code 32751	Purpose of Disbursement campaign consultant	Category/ Type 001
Candidate Name Wes Neuman For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 07	

SUBTOTAL of Disbursements This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	

143001-1-11-110000

**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)

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

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NAME OF COMMITTEE (In Full)
Wes Neuman For Congress

Full Name (Last, First, Middle Initial) A. WESLEY RYAN NEUMAN		Date of Disbursement MM / DD / YYYY 06 / 30 / 2014
Mailing Address PO BOX 915949		Amount of Each Disbursement this Period 974.98 Transaction ID : SB17.4415
City LONGWOOD	State FL	
Zip Code 32791	Purpose of Disbursement 009	Category/ Type
Candidate Name Wes Neuman For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 07	

Full Name (Last, First, Middle Initial) B. Oviedo-Winter Springs Chamber of Commerce		Date of Disbursement MM / DD / YYYY 05 / 23 / 2014
Mailing Address 376 North Central Ave		Amount of Each Disbursement this Period 225.00 Transaction ID : SB17.4348
City Oviedo	State FL	
Zip Code 32765	Purpose of Disbursement 2014 Hob Nob event 007	Category/ Type
Candidate Name Wes Neuman For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 07	

Full Name (Last, First, Middle Initial) C. Precision Signs		Date of Disbursement MM / DD / YYYY 06 / 19 / 2014
Mailing Address		Amount of Each Disbursement this Period 480.00 Transaction ID : SB17.4359
City	State	
Zip Code	Purpose of Disbursement brochures and fact sheet 004	Category/ Type
Candidate Name Wes Neuman For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 07	

SUBTOTAL of Disbursements This Page (optional).....	1679.98
TOTAL This Period (last page this line number only).....	

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**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 32 OF 36	
	<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)
Wes Neuman For Congress

Full Name (Last, First, Middle Initial) A. The Silly Grape		Date of Disbursement MM / DD / YYYY 05 / 13 / 2014
Mailing Address 1720 Fennell St. #5		Amount of Each Disbursement this Period 850.00 Transaction ID : SB17.4342
City Maitland	State FL	
Zip Code 32751	Purpose of Disbursement Event venue	Category/ Type 003
Candidate Name Wes Neuman For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 07	

Full Name (Last, First, Middle Initial) B. Wells Fargo Bank		Date of Disbursement MM / DD / YYYY 05 / 02 / 2014
Mailing Address 1030 Montgomery Rd.		Amount of Each Disbursement this Period 194.47 Transaction ID : SB17.4337
City Altamonte Springs	State FL	
Zip Code 32714	Purpose of Disbursement merchant fees	Category/ Type 001
Candidate Name Wes Neuman For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 07	

Full Name (Last, First, Middle Initial) C. Wells Fargo Bank		Date of Disbursement MM / DD / YYYY 05 / 23 / 2014
Mailing Address 1030 Montgomery Rd.		Amount of Each Disbursement this Period 5.00 Transaction ID : SB17.4349
City Altamonte Springs	State FL	
Zip Code 32714	Purpose of Disbursement merchant refund	Category/ Type 010
Candidate Name Wes Neuman For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 07	

SUBTOTAL of Disbursements This Page (optional).....	1049.47
TOTAL This Period (last page this line number only).....	

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**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 33 OF 36	
	<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)
Wes Neuman For Congress

Full Name (Last, First, Middle Initial) A. Wells Fargo Bank		Date of Disbursement MM / DD / YYYY 06 / 02 / 2014
Mailing Address 1030 Montgomery Rd.		Amount of Each Disbursement this Period 115.38 Transaction ID : SB17.4354
City Altamonte Springs State FL Zip Code 32714	Purpose of Disbursement merchant fees Category/Type 001	
Candidate Name Wes Neuman For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 07		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	115.38
TOTAL This Period (last page this line number only)	28578.36

ASTORIA FINANCIAL

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/10.4361

Wes Neuman For Congress

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

[PERSONAL FUNDS]

Election: 2014

WESLEY RYAN NEUMAN

Primary

General

Other (specify) ▼

Mailing Address
PO BOX 915949

City State ZIP Code
LONGWOOD FL 32791

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
6134.21	0.00	6134.21

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
04 / 29 / 2014		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)..... ▶ 6134.21

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.

130011101110000

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Wes Neuman For Congress** Transaction ID : **SC/10.4362**

LOAN SOURCE Full Name (Last, First, Middle Initial) WESLEY RYAN NEUMAN	[PERSONAL FUNDS]	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO BOX 915949		

City	State	ZIP Code
LONGWOOD	FL	32791

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
8000.00	0.00	8000.00

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	M 05 / D 12 / Y 2014	M M / D D / Y Y Y Y	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).....	▶ [] 8000.00
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.

FROM FIN MOOD

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/10.4363

Wes Neuman For Congress

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

[PERSONAL FUNDS]

Election: 2014

WESLEY RYAN NEUMAN

Primary
 General
 Other (specify) ▼

Mailing Address
PO BOX 915949

City State ZIP Code
LONGWOOD FL 32791

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
8005.41 0.00 8005.41

TERMS

Date Incurred Date Due Interest Rate Secured:
M M / D D / Y Y Y Y M M / D D / Y Y Y Y 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: []

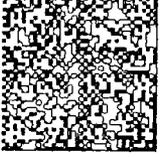
SUBTOTALS This Period This Page (optional) ▶ 8005.41

TOTALS This Period (last page in this line only) ▶ 22139.62

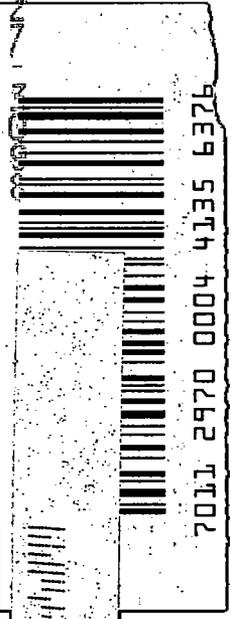
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

FROM PLAN MOON

UNITED STATES POSTAGE
PITNEY BOWES
\$008.24
02 1P
000116389 JUL 15 2014
MAILED FROM ZIP CODE 32779



WASH



70JJ 2970 0004 4J35 6376

...uman for C
...ox 915949
...ood, FL 32791

Federal Election Commission
999 E. Street, NW
Washington, DC 20463

RECEIVED

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Federal Election Commission
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<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
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<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked


7/21/14
 PREPARER DATE PREPARED
 (8/2013)

1430011-1001-10000