

48 HOURS NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

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To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL

David Weprin for Congress

ADDRESS (number and street)

72-50 Austin Street

CITY, STATE, and ZIP CODE

Forest Hills

NY

11375

2. NAME OF CANDIDATE

David I. Weprin

3. OFFICE SOUGHT (State and District)

House NY 09

Any information copied from such Reports and Statements may not to 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.

4. FEC IDENTIFICATION NUMBER
C00499103

SIGNATURE(Optional)

Barry A. Weprin

DATE

08/26/2011

For further information contact:

Federal Election Commission
999 E Street, NW, Washington, DC 20463
Toll Free 800-424-9530, Local 202-694-1100

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FEC FORM 6
(Revised 1/2001)

FEC FORM 6 - 48 HOUR NOTICE OF CONTRIBUTIONS / LOANS

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Any information reported herein may not be copied for sale or use by any person for the purposes of soliciting contributions or for any other commercial purpose except that the name and address of any political committee may be used to solicit contributions from that committee.

Name of Individual, Organization, or Corporation

David Weprin for Congress

Full Name, Address, and ZIP Code	Name of Employer	Date (month, day, year)	Amount Received this Period
Ranju Batra 44 Aberfoyle New Rochelle NY 10804	Ravi Batra, PC Occupation Attorney	08/25/2011	1000.00
Full Name, Address, and ZIP Code INT'L. ASSOCIATION OF BRIDGE, STRUCTURAL, ORNAMENTAL & REINFORCING IRON WORKERS (I- PAL) 1750 NEW YORK AVE. NW SUITE 400 WASHINGTON DC 20006	Name of Employer Occupation	Date (month, day, year) 08/25/2011	Amount Received this Period 5000.00
Full Name, Address, and ZIP Code Neeta Jain 15025 61st Rd Flushing NY 11367-1207	Name of Employer Self Occupation Counselor	Date (month, day, year) 08/25/2011	Amount Received this Period 1000.00
Full Name, Address, and ZIP Code Banad Viswanath 88-94 Palermo Street Hollis NY 11423	Name of Employer Self Occupation Physician	Date (month, day, year) 08/25/2011	Amount Received this Period 1000.00

TOTAL THIS PERIOD (last page only)**8000.00**