

# 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) 1100 Gulf Freeway Suite 100 League City TX 77573

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼

C C00502229

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT NEW (N) OR AMENDED (A)

TX 14

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
[X] 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

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

- General (30G) Runoff (30R) Special (30S)

Election on MM/DD/YYYY in the State of

5. Covering Period

MM/DD/YYYY through MM/DD/YYYY
07/12/2012 through 09/30/2012

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
10/24/2012

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

Table with 8 columns for Office Use Only

FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**WEBER FOR CONGRESS**

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 12 / 2012 To: M M / D D / Y Y Y Y 09 / 30 / 2012

	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))....	358823.25	757790.25
(b) Total Contribution Refunds (from Line 20(d)) .....	1000.00	2000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	357823.25	755790.25
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	417103.06	931373.43
(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)).....	417103.06	931373.43
8. Cash on Hand at Close of Reporting Period (from Line 27).....	55040.36	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	226500.00	

**For further information contact:**

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

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**WEBER FOR CONGRESS**

Report Covering the Period: From:  /  /  To:  /  /

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	191805.57	569097.57
(ii) Unitemized.....	8480.00	8905.00
(iii) TOTAL of contributions from individuals ▶	200285.57	578002.57
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	158537.68	177287.68
(d) The Candidate.....	0.00	2500.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	358823.25	757790.25
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	4123.54	4123.54
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	226500.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	226500.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	362946.79	988413.79

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	417103.06	931373.43
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 .....	1000.00	2000.00
(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)).....	1000.00	2000.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	418103.06	933373.43

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	110196.63
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	362946.79
25. SUBTOTAL (add Line 23 and Line 24).....	473143.42
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	418103.06
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	55040.36

**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 189
	<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)  
**Syed Usama Akhtar**

Mailing Address 15 Oakleigh Blvd

City State Zip Code  
Beaumont TX 77706

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

Name of Employer Self Occupation MD

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 19 / 2012

**Transaction ID : SA11AI.6056**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Jerome Aldrich**

Mailing Address 111 Cardinal Dr

City State Zip Code  
Lake Jackson TX 77566

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

Name of Employer Self Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 08 / 2012

**Transaction ID : SA11AI.6058**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Allen Boone Humphries Robinson LLP**

Mailing Address 3200 Southwest Freeway Suite 2600

City State Zip Code  
Houston TX 77027

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

Name of Employer Law Firm Occupation Law Firm

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 04 / 2012

**Transaction ID : SA11AI.6538**

Amount of Each Receipt this Period  
2500.00  
See attribution below

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Joe B Allen**

Mailing Address 3200 Southwest Freeway Suite 2600

City Houston	State TX	Zip Code 77027
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FEC ID number of contributing federal political committee. **C**

Name of Employer Allen Boone Humphries Robinson	Occupation Attorney
--	------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 785.25

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2012

**Transaction ID : SA11AI.6538.0**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 261.75

Partnership attribution

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**James A Boone**

Mailing Address 3200 Southwest Freeway Suite 2600

City Houston	State TX	Zip Code 77027
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FEC ID number of contributing federal political committee. **C**

Name of Employer Allen Boone Humphries Robinson	Occupation Attorney
--	------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1710.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2012

**Transaction ID : SA11AI.6538.1**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 570.00

Partnership attribution

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Lynne B Humphries**

Mailing Address 3200 Southwest Freeway Suite 2600

City Houston	State TX	Zip Code 77027
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FEC ID number of contributing federal political committee. **C**

Name of Employer Allen Boone Humphries Robinson	Occupation Attorney
--	------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1012.50

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2012

**Transaction ID : SA11AI.6538.2**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 337.50

Partnership attribution

**[MEMO ITEM]**

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

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

\_\_\_\_\_ 0.00

\_\_\_\_\_

**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 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Stephen M Robinson**

Mailing Address 3200 Southwest Freeway Suite 2600

City Houston	State TX	Zip Code 77027
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FEC ID number of contributing federal political committee. **C**

Name of Employer Allen Boone Humphries Robinson	Occupation Attorney
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Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
806.25

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2012

**Transaction ID : SA11AI.6538.3**

Amount of Each Receipt this Period  
268.75

Partnership attribution

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Susan M Edwards**

Mailing Address 3200 Southwest Freeway Suite 2600

City Houston	State TX	Zip Code 77027
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FEC ID number of contributing federal political committee. **C**

Name of Employer Allen Boone Humphries Robinson	Occupation Attorney
--	------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
390.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2012

**Transaction ID : SA11AI.6538.4**

Amount of Each Receipt this Period  
130.00

Partnership attribution

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Timothy M Austin**

Mailing Address 3200 Southwest Freeway Suite 2600

City Houston	State TX	Zip Code 77027
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FEC ID number of contributing federal political committee. **C**

Name of Employer Allen Boone Humphries Robinson	Occupation Attorney
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Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
472.50

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2012

**Transaction ID : SA11AI.6538.5**

Amount of Each Receipt this Period  
157.50

Partnership attribution

**[MEMO ITEM]**

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

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

0.00

**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 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Alex E Garcia**

Mailing Address 3200 Southwest Freeway Suite 2600

City Houston	State TX	Zip Code 77027
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FEC ID number of contributing federal political committee. **C**

Name of Employer Allen Boone Humphries Robinson	Occupation Attorney
--	------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 472.50

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2012

**Transaction ID : SA11AI.6538.6**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 157.50

Partnership attribution

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Richard L Muller Jr.**

Mailing Address 3200 Southwest Freeway Suite 2600

City Houston	State TX	Zip Code 77027
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FEC ID number of contributing federal political committee. **C**

Name of Employer Allen Boone Humphries Robinson	Occupation Attorney
--	------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 472.50

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2012

**Transaction ID : SA11AI.6538.7**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 157.50

Partnership attribution

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Camm C Lary III**

Mailing Address 3200 Southwest Freeway Suite 2600

City Houston	State TX	Zip Code 77027
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FEC ID number of contributing federal political committee. **C**

Name of Employer Allen Boone Humphries Robinson	Occupation Attorney
--	------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 427.50

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2012

**Transaction ID : SA11AI.6538.8**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 142.50

Partnership attribution

**[MEMO ITEM]**

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

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

\_\_\_\_\_ 0.00

\_\_\_\_\_



**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 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Greer G Pagan**

Mailing Address 3200 Southwest Freeway Suite 2600

City Houston	State TX	Zip Code 77027
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FEC ID number of contributing federal political committee. **C**

Name of Employer Allen Boone Humphries Robinson	Occupation Attorney
--	------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 375.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2012

**Transaction ID : SA11AI.6538.9**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 125.00

Partnership attribution

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Tina M Kyle**

Mailing Address 3200 Southwest Freeway Suite 2600

City Houston	State TX	Zip Code 77027
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FEC ID number of contributing federal political committee. **C**

Name of Employer Allen Boone Humphries Robinson	Occupation Attorney
--	------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 238.50

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2012

**Transaction ID : SA11AI.6538.10**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 79.50

Partnership attribution

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**David M Oliver Jr.**

Mailing Address 3200 Southwest Freeway Suite 2600

City Houston	State TX	Zip Code 77027
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FEC ID number of contributing federal political committee. **C**

Name of Employer Allen Boone Humphries Robinson	Occupation Attorney
--	------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 337.50

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2012

**Transaction ID : SA11AI.6538.11**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 112.50

Partnership attribution

**[MEMO ITEM]**

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

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

\_\_\_\_\_ 0.00

\_\_\_\_\_

**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 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Gary Appelt**

Mailing Address 1050 Somerset Dr

City Alvin State TX Zip Code 77511

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

Name of Employer Apec Electric Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 13 / 2012

**Transaction ID : SA11AI.6061**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Qamar U Arfeen, MD PA**

Mailing Address 1740 Thomas Rd

City Beaumont State TX Zip Code 77706

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

Name of Employer Harbor Health Care System Occupation Doctor

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 19 / 2012

**Transaction ID : SA11AI.6040**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Robin Armstrong**

Mailing Address 1101 Maxi Cir

City Friendswood State TX Zip Code 77546

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

Name of Employer UTMB Occupation Doctor

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 12 / 2012

**Transaction ID : SA11AI.6063**

Amount of Each Receipt this Period  
250.00

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

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

5250.00

**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 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Thomas Baker**

Mailing Address 111 Red Corral Ranch Road

City State Zip Code  
Wimberley TX 78676

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

Name of Employer Occupation  
David J Joseph Co Scrap Processing

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : SA11AI.6065**

Amount of Each Receipt this Period  
1500.00

**B.** Full Name (Last, First, Middle Initial)  
**Richard Bamberger**

Mailing Address 15 South Cheska

City State Zip Code  
Houston TX 77024

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

Name of Employer Occupation  
Metal House Inc

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2012

**Transaction ID : SA11AI.6067**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**David Barish**

Mailing Address 38 Du Pont Circle

City State Zip Code  
Sugar Land TX 77479

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2012

**Transaction ID : SA11AI.6071**

Amount of Each Receipt this Period  
500.00

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

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

2500.00

**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 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Marvin Barish**

Mailing Address 5227 Dumfries Dr

City Houston State TX Zip Code 77096

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

Name of Employer Chair King Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 04 / 2012

**Transaction ID : SA11AI.6069**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Jeff Barnett**

Mailing Address 2323 Green Tee Dr

City Pearland State TX Zip Code 77581

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

Name of Employer Texas Flange Occupation Sales Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 31 / 2012

**Transaction ID : SA11AI.6072**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Paul Beard**

Mailing Address PO Box 1564

City Port Arthur State TX Zip Code 77641

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

Name of Employer Sabine Neches Navigation Dist Occupation Chairman

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 14 / 2012

**Transaction ID : SA11AI.6076**

Amount of Each Receipt this Period  
 250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Leonard Bedell**

Mailing Address 13830 South Wayside Drive

City Houston State TX Zip Code 77048

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

Name of Employer Mobil Steel International Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 29 / 2012

**Transaction ID : SA11AI.6078**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Wade Billingsly**

Mailing Address 1184 N Major Drive

City Beaumont State TX Zip Code 77706

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

Name of Employer Self Occupation State Farm Agent

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 11 / 2012

**Transaction ID : SA11AI.6082**

Amount of Each Receipt this Period  
1250.00

**C.** Full Name (Last, First, Middle Initial)  
**JohnM Blackwell**

Mailing Address 810 I-10 South

City Beaumont State TX Zip Code 77707

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

Name of Employer JMB Warehouse Partners Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 15 / 2012

**Transaction ID : SA11AI.6084**

Amount of Each Receipt this Period  
250.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

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

Mailing Address 8902 Limerick Ln

City Houston State TX Zip Code 77024

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

Name of Employer Family Tree DNA Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2012

**Transaction ID : SA11AI.6086**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Nancy Block**

Mailing Address 28 Waterford oaks Ln

City Kemah State TX Zip Code 77565

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 20 / 2012

**Transaction ID : SA11AI.6088**

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
**Paul Blount Jr**

Mailing Address 6305 Santo Park

City Hempstead State TX Zip Code 77445

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

Name of Employer Highrise Electrical Tech, INC Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2012

**Transaction ID : SA11AI.6089**

Amount of Each Receipt this Period  
1000.00

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

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

1800.00

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

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

FOR LINE NUMBER: PAGE 15 OF 189  
(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)  
**Don Borden**

Mailing Address 2301 Golfcrest Drive

City State Zip Code  
Pearland TX 77581

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

Name of Employer Occupation  
Master Remodelers Contractor

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 10 / 2012

**Transaction ID : SA11AI.6092**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Dwight Boykins**

Mailing Address PO Box 300961

City State Zip Code  
Houston TX 77230

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

Name of Employer Occupation  
D Boykins Consultant Consultant

Receipt For: 2012  
 Primary     General  
 Other (specify) Runoff

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 19 / 2012

**Transaction ID : SA11AI.6094**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Robert Breakiron**

Mailing Address 3137 city rd. 415B

City State Zip Code  
Brazoria TX 77422

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

Name of Employer Occupation  
Self

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 20 / 2012

**Transaction ID : SA11AI.6098**

Amount of Each Receipt this Period  
250.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Kitten Brizendine**

Mailing Address 1206 Middle Creek St

City Friendswood	State TX	Zip Code 77546
---------------------	-------------	-------------------

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

Name of Employer Home Maker	Occupation Homemaker
--------------------------------	-------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 12 / 2012

**Transaction ID : SA11AI.6099**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Michael Brown**

Mailing Address 708 Greenbriar Ave

City Friendswood	State TX	Zip Code 77546
---------------------	-------------	-------------------

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

Name of Employer JSC Federal Credit Union	Occupation President
--	-------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2012

**Transaction ID : SA11AI.6103**

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
**John Buckley**

Mailing Address 617 4th St

City League City	State TX	Zip Code 77573
---------------------	-------------	-------------------

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

Name of Employer Greer Herz & Adams	Occupation Attorney
--	------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 18 / 2012

**Transaction ID : SA11AI.6104**

Amount of Each Receipt this Period  
250.00

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

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

2000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Ronald Buczek**

Mailing Address 5 Water Tree Court

City Spring State TX Zip Code 77380

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 26 / 2012

**Transaction ID : SA11AI.6106**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Danielle Buks**

Mailing Address 3701 Ace St

City Houston State TX Zip Code 77063

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

Name of Employer Occupation  
 Buks Tool Company President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 05 / 2012

**Transaction ID : SA11AI.6108**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Nancy Burnell**

Mailing Address 6260 Delaware

City Beaumont State TX Zip Code 77706

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

Name of Employer Occupation  
 Golden Triangle Foot Doctor

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 19 / 2012

**Transaction ID : SA11AI.6110**

Amount of Each Receipt this Period  
 750.00

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

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

2250.00

**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 18 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**David Cabell**

Mailing Address 5220 Boswick

City State Zip Code  
Beaumont TX 77706

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

Name of Employer Occupation  
NMC Neese State Professor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 18 / 2012

**Transaction ID : SA11AI.6116**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Larry Cernosek**

Mailing Address 1705 Kingsdale Dr.

City State Zip Code  
Deer Park TX 77536

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

Name of Employer Occupation  
Tow Truck Company Owner

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 25 / 2012

**Transaction ID : SA11AI.6120**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Daniel Clinton**

Mailing Address 12410 Boheme

City State Zip Code  
Houston TX 77024

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

Name of Employer Occupation  
Civil engineer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 27 / 2012

**Transaction ID : SA11AI.6124**

Amount of Each Receipt this Period  
250.00

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

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

1000.00

**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 19 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>David Joel Collins</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 28 / 2012
Mailing Address 13219 Regency Oak Lane		<b>Transaction ID : SA11AI.6129</b>
City Cypress	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer ACES AC Supply	Occupation Vice President	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

Full Name (Last, First, Middle Initial) <b>Richard H Cron</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 25 / 2012
Mailing Address 2626 Woodridge Manor Dr		<b>Transaction ID : SA11AI.6137</b>
City Houston	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Houston Wilderness	Occupation Director of Public Affairs	
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>Nathan Cross</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 31 / 2012
Mailing Address 6420 Wilder		<b>Transaction ID : SA11AI.6141</b>
City Beaumont	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Edgar, Kiker, & Cross, PC	Occupation CPA	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3000.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 20 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Ricky Crump</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 26 / 2012
Mailing Address 3003 Mandale Rd		<b>Transaction ID : SA11AI.6143</b>
City Friendswood	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>B. Michael Culling</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 13 / 2012
Mailing Address 8018 Scott		<b>Transaction ID : SA11AI.6144</b>
City Manvel	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Culling Law Firm	Occupation Owner	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3500.00	

Full Name (Last, First, Middle Initial) <b>C. Jacqueline Cundieff</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 13 / 2012
Mailing Address 1415 W. 2nd Street		<b>Transaction ID : SA11AI.6148</b>
City Freeport	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00
Name of Employer Homemaker	Occupation homemaker	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2100.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 21 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Bill Davenport</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 28 / 2012
Mailing Address 2205 Hicklin Street		<b>Transaction ID : SA11AI.6151</b>
City Alvin	State TX Zip Code 77511	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer ACES AC Supply	Occupation President/Owner	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 7500.00	

Full Name (Last, First, Middle Initial) <b>B. Daniel Davenport</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 28 / 2012
Mailing Address 406 Timber Grove Place		<b>Transaction ID : SA11AI.6149</b>
City Friendswood	State TX Zip Code 77546	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer ACES AC supply	Occupation Attorney	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

Full Name (Last, First, Middle Initial) <b>C. Michael Davenport</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 28 / 2012
Mailing Address 1802 Pine Crest Blvd		<b>Transaction ID : SA11AI.6150</b>
City Alvin	State TX Zip Code 77511	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer ACES AC Supply	Occupation Sales Manager	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7500.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 22 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Carl Davis**

Mailing Address PO Box 26236

City Houston State TX Zip Code 77207

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

Name of Employer Self Occupation Self

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 13 / 2012

**Transaction ID : SA11A1.6154**

Amount of Each Receipt this Period  
2500.00

From joint contribution with Lois Davis; both contributors signed the instrument

**B.** Full Name (Last, First, Middle Initial)  
**Lois Davis**

Mailing Address PO Box 26236

City Houston State TX Zip Code 77207

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 13 / 2012

**Transaction ID : SA11A1.7141**

Amount of Each Receipt this Period  
2500.00

From joint contribution; both contributors signed the instrument

**C.** 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: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 14 / 2012

**Transaction ID : SA11A1.6555**

Amount of Each Receipt this Period  
100.00

Attribution below

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

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

5100.00

**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 23 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Billy W Doornbos**

Mailing Address PO Box 696

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: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 09 / 14 / 2012

**Transaction ID : SA11AI.6555.0**

Amount of Each Receipt this Period: 100.00

Partnership attribution

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Andrew Drennan**

Mailing Address 9183 FM 362

City: Brookshire State: TX Zip Code: 77423

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation:

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2500.00

Date of Receipt: 08 / 29 / 2012

**Transaction ID : SA11AI.6162**

Amount of Each Receipt this Period: 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Virginia Drennan**

Mailing Address 9183 FM 362

City: Brookshire State: TX Zip Code: 77423

FEC ID number of contributing federal political committee: C

Name of Employer: Real Estate Occupation: Realtor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2500.00

Date of Receipt: 08 / 29 / 2012

**Transaction ID : SA11AI.6160**

Amount of Each Receipt this Period: 2500.00

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

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

5000.00

**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 24 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Alan Edge**

Mailing Address 13502 CR 282

City Alvin State TX Zip Code 77511

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

Name of Employer Boiling ISD Occupation Band Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 07 / 2012

**Transaction ID : SA11AI.6164**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Marshall Eggers**

Mailing Address 1605 Gatecreek Dr.

City Pearland State TX Zip Code 77581

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

Name of Employer Upstage Production Occupation Co-Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 28 / 2012

**Transaction ID : SA11AI.6165**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Steven Elbert**

Mailing Address 337 Linden Lane

City Lake Jackson State TX Zip Code 77566

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

Name of Employer Self Occupation Insurance

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 13 / 2012

**Transaction ID : SA11AI.6167**

Amount of Each Receipt this Period  
500.00

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

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

3100.00



**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 25 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Donna Ercums**

Mailing Address 4010 Country Trails

City Alvin State TX Zip Code 77511

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **7500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 29 / 2012

**Transaction ID : SA11AI.6170**

Amount of Each Receipt this Period  
**2500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Karlis Ercums**

Mailing Address 4010 Country Trails

City Alvin State TX Zip Code 77511

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

Name of Employer K3 BM Trucking Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **7500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 29 / 2012

**Transaction ID : SA11AI.6169**

Amount of Each Receipt this Period  
**2500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Jack Ewing**

Mailing Address 2938 Meadowbrook Dr.

City League City State TX Zip Code 77573

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

Name of Employer The Ewing Law Firm Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 12 / 2012

**Transaction ID : SA11AI.6172**

Amount of Each Receipt this Period  
**250.00**

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

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

**5250.00**

**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 26 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Cilve Fields**

Mailing Address 4915 Pine Street

City State Zip Code  
Bellaire TX 77401

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

Name of Employer Occupation  
Village Family Practice MD

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 04 / 2012

**Transaction ID : SA11A1.6176**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Lawrence Finder**

Mailing Address 4919 Williams Court Lane

City State Zip Code  
Houston TX 77081

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

Name of Employer Occupation  
Haynes & Boone, LLP Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 04 / 2012

**Transaction ID : SA11A1.6178**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Steven Finkleman**

Mailing Address 5303 Braesheather Dr

City State Zip Code  
Houston TX 77096

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

Name of Employer Occupation  
Scope Imports, INC CFO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 05 / 2012

**Transaction ID : SA11A1.6179**

Amount of Each Receipt this Period  
500.00

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

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

1000.00

**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 27 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Folsom Medical Group PA**

Mailing Address 6510 Folsom Dr.

City State Zip Code  
Beaumont TX 77706

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 19 / 2012

**Transaction ID : SA11AI.6514**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Leonard Friedman**

Mailing Address 3998 Inverness

City State Zip Code  
Houston TX 77019

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

Name of Employer Occupation  
Self Investor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 05 / 2012

**Transaction ID : SA11AI.6181**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Royce Fuqua**

Mailing Address PO Box 3361

City State Zip Code  
Brownwood TX 76803

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

Name of Employer Occupation  
Premium Exploration Company Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : SA11AI.6183**

Amount of Each Receipt this Period  
 250.00

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

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

1000.00

**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 28 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Rhonda Gaff**

Mailing Address 511 S. Post Oak Ln 6A

City Houston	State TX	Zip Code 77056
-----------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2012

**Transaction ID : SA11AI.6185**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Jacko Garrett**

Mailing Address P.O. Box 603

City Danbury	State TX	Zip Code 77534
-----------------	-------------	-------------------

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

Name of Employer Self employed	Occupation Garrett Farms
-----------------------------------	-----------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 13 / 2012

**Transaction ID : SA11AI.6188**

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
**Glenn A Garrison**

Mailing Address 1902 Meadowcreek Drive

City Pearland	State TX	Zip Code 77581
------------------	-------------	-------------------

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

Name of Employer Self	Occupation Doctor
--------------------------	----------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2012

**Transaction ID : SA11AI.6190**

Amount of Each Receipt this Period  
2500.00

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

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

4250.00

**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 29 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**C.M. Garver**

Mailing Address 1901 Lexington Street

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

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

Name of Employer Garver Real Estate	Occupation Real Estate
--	---------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 29 / 2012

**Transaction ID : SA11AI.6192**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**CM Garver**

Mailing Address 1901 Lexington St

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

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

Name of Employer Garver Construction	Occupation Owner
---	---------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 27 / 2012

**Transaction ID : SA11AI.6193**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Daniel Gerber**

Mailing Address 5610 Grape

City Houston	State TX	Zip Code 77096
-----------------	-------------	-------------------

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

Name of Employer First Castle Homes	Occupation Real Estate
--	---------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 05 / 2012

**Transaction ID : SA11AI.6195**

Amount of Each Receipt this Period  
250.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**William P Gibson**

Mailing Address 7516 Dispensary

City Hitchcock State TX Zip Code 77563

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 24 / 2012

**Transaction ID : SA11AI.6197**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Harold Goldstein**

Mailing Address 12 E. Greenway Plaza Suite 700

City Houston State TX Zip Code 77046

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

Name of Employer Occupation  
Columbia Communities Principal

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 04 / 2012

**Transaction ID : SA11AI.6201**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Tipton Golias**

Mailing Address 1290 Thomas Road

City Beaumont State TX Zip Code 77706

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

Name of Employer Occupation  
Helena Labs

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 06 / 2012

**Transaction ID : SA11AI.6203**

Amount of Each Receipt this Period  
 2500.00

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

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

3250.00

**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 31 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Victoria J. Gordon**

Mailing Address 4890 Littlewood Dr

City State Zip Code  
Beaumont TX 77706

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

Name of Employer Occupation  
Harbor Health Care System Doctor

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 19 / 2012

**Transaction ID : SA11AI.6034**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Rhonda Graff**

Mailing Address 511 S. Post Oak Ln 6A

City State Zip Code  
Houston TX 77056

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

Name of Employer Occupation  
Retired Aerospace Program Mgr

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1100.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 28 / 2012

**Transaction ID : SA11AI.6204**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Roger Greenberg**

Mailing Address 909 Fannin St

City State Zip Code  
Houston TX 77010

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

Name of Employer Occupation  
Schwartz Junell & Greenberg Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 04 / 2012

**Transaction ID : SA11AI.6211**

Amount of Each Receipt this Period  
250.00

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

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

2250.00

**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 32 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A. Steve Greenberg**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1510 West Loop South  
 City Houston State TX Zip Code 77027  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Landry's Restaurants Inc Occupation VP  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 1405.57

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 12 / 2012  
**Transaction ID : SA11AI.7018**  
 Amount of Each Receipt this Period  
 405.57  
 In-kind - Event expense

**B. Bennett Greenspan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5207 Braeburn  
 City Bellaire State TX Zip Code 77401  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Family Tree DNA Occupation President  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 05 / 2012  
**Transaction ID : SA11AI.6213**  
 Amount of Each Receipt this Period  
 250.00

**C. Carl Griffith**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 26985 IH-10  
 City Winnie State TX Zip Code 77665  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Carl Griffith & Associates Occupation Owner  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2012  
**Transaction ID : SA11AI.6215**  
 Amount of Each Receipt this Period  
 1000.00

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

1655.57



**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 33 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Carl R Griffith Jr.**

Mailing Address 26985 IH-10

City State Zip Code  
Winnie TX 77665

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

Name of Employer Occupation  
Carl Griffith and Associates President

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 19 / 2012

**Transaction ID : SA11AI.6038**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Alfred Guevara**

Mailing Address 204 River Oaks Dr

City State Zip Code  
Lake Jackson TX 77566

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

Name of Employer Occupation  
Bryan CAT Scan Investment Partners Member

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 13 / 2012

**Transaction ID : SA11AI.6219**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Angela Gunning**

Mailing Address 1 Heritage Oak Court

City State Zip Code  
Lake Jackson TX 77566

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

Name of Employer Occupation  
Homemaker homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 13 / 2012

**Transaction ID : SA11AI.6223**

Amount of Each Receipt this Period  
300.00

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

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

1550.00

**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 34 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**John Gunning**

Mailing Address 1 Heritage Oak Court

City State Zip Code  
Lake Jackson TX 77566

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

Name of Employer Occupation  
Freeport Pilots Pilot

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 13 / 2012

**Transaction ID : SA11AI.6221**

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
**Lawrence Gurley**

Mailing Address 11 Armand Shore Drive

City State Zip Code  
Houston TX 77058

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

Name of Employer Occupation  
1st Church Clergy

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 14 / 2012

**Transaction ID : SA11AI.6225**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**James Gustafson**

Mailing Address 8955 Katy Freeway Suite 105

City State Zip Code  
Houston TX 77024

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

Name of Employer Occupation  
Self Real Estate

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 11 / 2012

**Transaction ID : SA11AI.6227**

Amount of Each Receipt this Period  
500.00

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

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

1050.00

**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 35 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Frank Hagdorn**

Mailing Address 6919 Charlotte

City Manvel State TX Zip Code 77578

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

Name of Employer Manvell Mattress and Furniture Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2012

**Transaction ID : SA11AI.6230**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**R.L. Haney**

Mailing Address PO Box 2349

City Alvin State TX Zip Code 77512

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 29 / 2012

**Transaction ID : SA11AI.6234**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**S.D. Haney**

Mailing Address PO Box 2349

City Alvin State TX Zip Code 77512

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

Name of Employer K3BMI Occupation Administrator

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 29 / 2012

**Transaction ID : SA11AI.6232**

Amount of Each Receipt this Period  
2500.00

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

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

6000.00

**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 36 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Adrienne Hawkins**

Mailing Address 415 Surface

City Alvin State TX Zip Code 77511

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 26 / 2012

**Transaction ID : SA11AI.7146**

Amount of Each Receipt this Period  
2500.00

Presumptive reattribution

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Richard Hawkins**

Mailing Address 415 Surface

City Alvin State TX Zip Code 77511

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

Name of Employer Hawkins Lease Service Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 26 / 2012

**Transaction ID : SA11AI.6235**

Amount of Each Receipt this Period  
5000.00

Presumptive reattribution below

**C.** Full Name (Last, First, Middle Initial)  
**Richard Hawkins**

Mailing Address 415 Surface

City Alvin State TX Zip Code 77511

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

Name of Employer Hawkins Lease Service Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 26 / 2012

**Transaction ID : SA11AI.7145**

Amount of Each Receipt this Period  
-2500.00

Presumptive reattribution to Adrienne Hawkins

**[MEMO ITEM]**

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

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

5000.00

**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 37 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**John Henderson**

Mailing Address 9 Oak Trace

City State Zip Code  
Beaumont TX 77706

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

Name of Employer Occupation  
SETX Uroloag Physic

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 18 / 2012

**Transaction ID : SA11AI.6238**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Tommy Herring**

Mailing Address 10710 CR 200

City State Zip Code  
Alvin TX 77511

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

Name of Employer Occupation  
Clyde Herring and Sons Co-Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 26 / 2012

**Transaction ID : SA11AI.6239**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**M.E. Hester**

Mailing Address 401 Primrose Lane

City State Zip Code  
League City TX 77573

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 26 / 2012

**Transaction ID : SA11AI.6241**

Amount of Each Receipt this Period  
500.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Michael Hoskins**

Mailing Address 405 Myra

City Friendswood State TX Zip Code 77546

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

Name of Employer Texas Advantage Occupation Banker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 14 / 2012

**Transaction ID : SA11AI.6247**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Laverne Hubert**

Mailing Address 870 E. FM 772

City Riviera State TX Zip Code 78379

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

Name of Employer Cornerston Government Affairs Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : SA11AI.6249**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Penny Ignazio**

Mailing Address

City State Zip Code

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2012

**Transaction ID : SA11AI.6253**

Amount of Each Receipt this Period  
250.00

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

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

1000.00

**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 39 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Charles Johnson**

Mailing Address 3008 Baylor Camp Rd

City Crawford State TX Zip Code 76638

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : SA11AI.6263**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Thomas L Johnson**

Mailing Address 4105 Shimmering Cove

City Austin State TX Zip Code 78731

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

Name of Employer Occupation  
ABC of Texas

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 22 / 2012

**Transaction ID : SA11AI.6259**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Nancy Kanter**

Mailing Address 9415 New Century Drive

City Brazoria State TX Zip Code 77422

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

Name of Employer Occupation  
Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 13 / 2012

**Transaction ID : SA11AI.6268**

Amount of Each Receipt this Period  
 250.00

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

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

1500.00

**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 40 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Charles King**

Mailing Address 2101 South Mission Circle

City Friendswood State TX Zip Code 77546

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

Name of Employer Buffalo Marine Service INC Occupation Management

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 26 / 2012

**Transaction ID : SA11AI.6278**

Amount of Each Receipt this Period  
 300.00

**B.** Full Name (Last, First, Middle Initial)  
**J.A. Konikowski**

Mailing Address 7802 Channelview Dr.

City Galveston State TX Zip Code 77554

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 14 / 2012

**Transaction ID : SA11AI.6280**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**George Korkmas**

Mailing Address 405 Riverside Dr

City Alvin State TX Zip Code 77511

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2012

**Transaction ID : SA11AI.6282**

Amount of Each Receipt this Period  
 250.00

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

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

1050.00



**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 41 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Stephen Lamendola**

Mailing Address 940 Thomas Road

City State Zip Code  
Beaumont TX 77706

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

Name of Employer Occupation  
ACTS Surgeon

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 21 / 2012

**Transaction ID : SA11AI.6288**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Stephen Lamendola**

Mailing Address 940 Thomas Road

City State Zip Code  
Beaumont TX 77706

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

Name of Employer Occupation  
ACTS Surgeon

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 12 / 2012

**Transaction ID : SA11AI.6289**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Justin LaPoten**

Mailing Address 1301 Birdsall, Unit C

City State Zip Code  
Houston TX 77007

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

Name of Employer Occupation  
BNO Capitol Investment Banker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 05 / 2012

**Transaction ID : SA11AI.6291**

Amount of Each Receipt this Period  
250.00

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

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

1000.00

**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 42 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Samuel Lee**

Mailing Address **PO Box 1818**

City **Angleton** State **TX** Zip Code **77516**

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

Name of Employer **Self** Occupation **Attorney**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 06 / 2012**

**Transaction ID : SA11AI.6298**

Amount of Each Receipt this Period  
**2500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Steven Lee**

Mailing Address **5823 Gulf Freeway Suite 300**

City **Houston** State **TX** Zip Code **77023**

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

Name of Employer **Self** Occupation **Attorney**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 04 / 2012**

**Transaction ID : SA11AI.6297**

Amount of Each Receipt this Period  
**750.00**

**C.** Full Name (Last, First, Middle Initial)  
**Glenn Lemunyon**

Mailing Address **419 Constitution ave NE**

City **Washington** State **DC** Zip Code **20002**

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

Name of Employer **LeMunyon Group LLC** Occupation **President**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 21 / 2012**

**Transaction ID : SA11AI.6300**

Amount of Each Receipt this Period  
**250.00**

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

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

**3500.00**

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

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

FOR LINE NUMBER: PAGE 43 OF 189  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

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

Mailing Address 1466 Sugar Creek Blvd

City State Zip Code  
Sugar Land TX 77478

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 07 / 2012

**Transaction ID : SA11AI.6302**

Amount of Each Receipt this Period  
750.00

**B.** Full Name (Last, First, Middle Initial)  
**Mitchel Levy**

Mailing Address 5223 Birdwood Rd

City State Zip Code  
Houston TX 77096

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

Name of Employer Occupation  
LS Communications

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2012

**Transaction ID : SA11AI.6304**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Kevin Lilly**

Mailing Address 3424 Robinhood St

City State Zip Code  
Houston TX 77005

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

Name of Employer Occupation  
Avalon Advisors Investments

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2012

**Transaction ID : SA11AI.6310**

Amount of Each Receipt this Period  
5000.00  
Reattribution of 2500 requested

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

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

6000.00

**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 44 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Melvin Lipsitz**

Mailing Address **PO Box 1175**

City **Waco** State **TX** Zip Code **76703**

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

Name of Employer **Self** Occupation **Scrap Metal**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 28 / 2012**

**Transaction ID : SA11AI.6311**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Ashok Malani**

Mailing Address **7792 Pecan Drive**

City **Beaumont** State **TX** Zip Code **77713**

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

Name of Employer **The Baptist Cancer Center** Occupation **Doctor**

Receipt For: 2012  
 Primary  General  
 Other (specify) **Runoff**

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 19 / 2012**

**Transaction ID : SA11AI.6315**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Brenda Martin**

Mailing Address **12309 Muhley Cove**

City **Austin** State **TX** Zip Code **78738**

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

Name of Employer **Homemaker** Occupation **homemaker**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 01 / 2012**

**Transaction ID : SA11AI.6319**

Amount of Each Receipt this Period  
**2500.00**

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

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

**3500.00**

**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 45 OF 189
	<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)  
**Edward Martin**

Mailing Address 12309 Muhley Cove

City Austin State TX Zip Code 78738

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

Name of Employer Self Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 01 / 2012

**Transaction ID : SA11AI.6321**

Amount of Each Receipt this Period  
 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**May Youmans Trust**

Mailing Address PO Box 696

City Nederland State TX Zip Code 77627

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 14 / 2012

**Transaction ID : SA11AI.6556**

Amount of Each Receipt this Period  
 150.00

**C.** Full Name (Last, First, Middle Initial)  
**Anthony McCorvey**

Mailing Address 8610 Wallisville Rd

City Houston State TX Zip Code 77029

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

Name of Employer McCorvey Sheet Metal Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date 7500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2012

**Transaction ID : SA11AI.7025**

Amount of Each Receipt this Period  
 5000.00

Reattributed below  
**[MEMO ITEM]**

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

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

2650.00

**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 46 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Anthony McCorvey**

Mailing Address 8610 Wallisville Rd

City Houston State TX Zip Code 77029

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

Name of Employer McCorvey Sheet Metal Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date **7500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 11 / 2012**

**Transaction ID : SA11AI.7027**

Amount of Each Receipt this Period  
**-2500.00**

Reattributed-see below

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Anthony McCorvey**

Mailing Address 8610 Wallisville Rd

City Houston State TX Zip Code 77029

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

Name of Employer McCorvey Sheet Metal Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **7500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 20 / 2012**

**Transaction ID : SA11AI.6326**

Amount of Each Receipt this Period  
**5000.00**

Reattributed below

**C.** Full Name (Last, First, Middle Initial)  
**Anthony McCorvey**

Mailing Address 8610 Wallisville Rd

City Houston State TX Zip Code 77029

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

Name of Employer McCorvey Sheet Metal Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **7500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 19 / 2012**

**Transaction ID : SA11AI.7028**

Amount of Each Receipt this Period  
**-2500.00**

Reattributed below

**[MEMO ITEM]**

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

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

**5000.00**

**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 47 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Mitzy McCorvey</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 11 / 2012	
Mailing Address 8610 Wallisville Rd		<b>Transaction ID : SA11AI.7026</b>	
City Houston	State TX	Zip Code 77029	Amount of Each Receipt this Period _____ 2500.00 Reattribution <b>[MEMO ITEM]</b>
FEC ID number of contributing federal political committee.		C	
Name of Employer Homemaker	Occupation Homemaker		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date _____ 2500.00		

Full Name (Last, First, Middle Initial) <b>B. Mitzy McCorvey</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 19 / 2012	
Mailing Address 8610 Wallisville Rd		<b>Transaction ID : SA11AI.7029</b>	
City Houston	State TX	Zip Code 77029	Amount of Each Receipt this Period _____ 2500.00 Reattribution <b>[MEMO ITEM]</b>
FEC ID number of contributing federal political committee.		C	
Name of Employer Homemaker	Occupation Homemaker		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2500.00		

Full Name (Last, First, Middle Initial) <b>C. Demetrius McDaniel</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 19 / 2012	
Mailing Address 7601 Sandia Loop		<b>Transaction ID : SA11AI.6328</b>	
City Austin	State TX	Zip Code 78735	Amount of Each Receipt this Period _____ 500.00 Reattribution <b>[MEMO ITEM]</b>
FEC ID number of contributing federal political committee.		C	
Name of Employer Greenberg Traurig	Occupation Attorney		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date _____ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 500.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

**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 48 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Renee L McGuire**

Mailing Address 7918 Broadway

City State Zip Code  
Pearland TX 77581

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

Name of Employer Occupation  
West Development Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2012

**Transaction ID : SA11AI.6330**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**E Douglas Mcleod**

Mailing Address 53 Cedar Lawn Circle

City State Zip Code  
Galveston TX 77551

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

Name of Employer Occupation  
The Moody Foundation Charitable Trust Officer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 06 / 2012

**Transaction ID : SA11AI.6332**

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
**Doug McReaken**

Mailing Address 3774 Buckholt ST

City State Zip Code  
Pearland TX 77581

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

Name of Employer Occupation  
Media Riders INC Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 21 / 2012

**Transaction ID : SA11AI.6336**

Amount of Each Receipt this Period  
2500.00

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

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

5300.00



**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 49 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Erika McReaken**

Mailing Address 3744 Buckholt St

City	State	Zip Code
Pearland	TX	77581-6265

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

Name of Employer	Occupation
Homemaker	Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 21 / 2012

**Transaction ID : SA11AI.6334**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Dean McWilliams**

Mailing Address 1710 Windsor Road

City	State	Zip Code
Austin	TX	78703

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

Name of Employer	Occupation
McWilliams Government Relations	Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 22 / 2012

**Transaction ID : SA11AI.6338**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Charles Medlin**

Mailing Address 2404 S. Grand Blvd. Ste 210

City	State	Zip Code
Pearland	TX	77581

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

Name of Employer	Occupation
Eagle Nation Inc	

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2012

**Transaction ID : SA11AI.6340**

Amount of Each Receipt this Period  
5000.00

Reattribution of 2500 requested

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

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

8000.00

**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 50 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Melanie Melancon**

Mailing Address 10555 Pearland Parkway Suite D

City Houston	State TX	Zip Code 77089
-----------------	-------------	-------------------

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

Name of Employer Eye Styles	Occupation Optometrist
--------------------------------	---------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 19 / 2012

**Transaction ID : SA11AI.6341**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**John H Moon**

Mailing Address PO Box 3487

City Pasadena	State TX	Zip Code 77501
------------------	-------------	-------------------

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

Name of Employer Moon Credit Corp	Occupation Financial Executive
--------------------------------------	-----------------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 13 / 2012

**Transaction ID : SA11AI.6344**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Arthur Nathan**

Mailing Address 1221 McKinney, Suite 2100

City Houston	State TX	Zip Code 77010
-----------------	-------------	-------------------

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

Name of Employer Haynes & Boone, LLP	Occupation Attorney
---	------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 05 / 2012

**Transaction ID : SA11AI.6350**

Amount of Each Receipt this Period  
250.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Katha Nelson**

Mailing Address 7325 Halliday Lane

City State Zip Code  
Beaumont TX 77706

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

Name of Employer Occupation  
Nelson Homeschool Academy Homeschool instructor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 22 / 2012

**Transaction ID : SA11AI.7031**

Amount of Each Receipt this Period  
 2500.00

Reattributed

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Vick Nelson**

Mailing Address 7325 Halliday Lane

City State Zip Code  
Beaumont TX 77706

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

Name of Employer Occupation  
Maverick International LTD. Partner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2012

**Transaction ID : SA11AI.6351**

Amount of Each Receipt this Period  
 5000.00

Reattributed below

**C.** Full Name (Last, First, Middle Initial)  
**Vick Nelson**

Mailing Address 7325 Halliday Lane

City State Zip Code  
Beaumont TX 77706

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

Name of Employer Occupation  
Maverick International LTD. Partner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 22 / 2012

**Transaction ID : SA11AI.7030**

Amount of Each Receipt this Period  
 -2500.00

Reattributed to Katha Nelson

**[MEMO ITEM]**

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

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

5000.00

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

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

FOR LINE NUMBER: PAGE 52 OF 189  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Elise Newman**

Mailing Address 136 Beverly Lane

City State Zip Code  
Houston TX 77401

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

Name of Employer Occupation  
Self Travel Agent

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 05 2012

**Transaction ID : SA11AI.6353**

Amount of Each Receipt this Period  
400.00

**B.** Full Name (Last, First, Middle Initial)  
**Brian Orsak**

Mailing Address 3005 Green Tee

City State Zip Code  
Pearland TX 77581

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

Name of Employer Occupation  
St. Michaels Emergency Centers Operations Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 31 2012

**Transaction ID : SA11AI.6355**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Mary Orsak**

Mailing Address 3005 Green Tee

City State Zip Code  
Pearland TX 77581

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 31 2012

**Transaction ID : SA11AI.6357**

Amount of Each Receipt this Period  
500.00

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

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

3400.00

**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 53 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Shannon Orsak**

Mailing Address 7507 Guinevere

City State Zip Code  
Sugarland TX 77479

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

Name of Employer Self Occupation Physician

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 30 / 2012

**Transaction ID : SA11AI.6354**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Michael Pancherz**

Mailing Address 1702 Longacre Dr.

City State Zip Code  
Houston TX 77055

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

Name of Employer Goodman Global Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 05 / 2012

**Transaction ID : SA11AI.6359**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Dakshesh-Kumar Parikh**

Mailing Address 5703 Country Club Drive

City State Zip Code  
Victoria TX 77904

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

Name of Employer Victoria Heart and Vascular Center Occupation Cardiologist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 31 / 2012

**Transaction ID : SA11AI.6361**

Amount of Each Receipt this Period  
250.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Steven Parks**

Mailing Address 14939 Cullen Blvd

City Houston State TX Zip Code 77047

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

Name of Employer Eagle Lift Ministries Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 14 / 2012

**Transaction ID : SA11AI.6365**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Rey Penaranda**

Mailing Address 1208 Tall Pines Dr.

City Friendswood State TX Zip Code 77546

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

Name of Employer Hummingbird Colibri Corp Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2012

**Transaction ID : SA11AI.6371**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**John R Pitts**

Mailing Address PO Box 27130

City Houston State TX Zip Code 77227

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

Name of Employer Self Occupation Self

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : SA11AI.6375**

Amount of Each Receipt this Period  
500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Charles Pogue**

Mailing Address PO Box 3009

City State Zip Code  
Brazoria TX 77422

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 21 / 2012

**Transaction ID : SA11AI.6376**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Donald Pollock**

Mailing Address 3718 18th Street

City State Zip Code  
Texas City TX 77590

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 06 / 2012

**Transaction ID : SA11AI.6378**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Michael Ramsey**

Mailing Address PO Box 7219

City State Zip Code  
Beaumont TX 77726

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

Name of Employer Occupation  
Moysten Law Firm Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 11 / 2012

**Transaction ID : SA11AI.6386**

Amount of Each Receipt this Period  
2500.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Michael Ramsey**

Mailing Address PO Box 7219

City: Beaumont State: TX Zip Code: 77726

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

Name of Employer: Moysten Law Firm Occupation: Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 5000.00

Date of Receipt: 09 / 11 / 2012

**Transaction ID : SA11AI.6387**

Amount of Each Receipt this Period: 2500.00

Designated to primary in writing accompanying contribution

**B.** Full Name (Last, First, Middle Initial)  
**Michael Ramsey**

Mailing Address PO Box 7219

City: Beaumont State: TX Zip Code: 77726

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

Name of Employer: Moysten Law Firm Occupation: Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date: 7500.00

Date of Receipt: 09 / 11 / 2012

**Transaction ID : SA11AI.6388**

Amount of Each Receipt this Period: 2500.00

Designated to runoff in writing accompanying contribution

**C.** Full Name (Last, First, Middle Initial)  
**Myla Ramsey**

Mailing Address 4880 Christina Lane

City: Beaumont State: TX Zip Code: 77706

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

Name of Employer: Homemaker Occupation: Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2500.00

Date of Receipt: 09 / 11 / 2012

**Transaction ID : SA11AI.6382**

Amount of Each Receipt this Period: 2500.00

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

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

7500.00



**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 57 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Myla Ramsey</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 11 / 2012	
Mailing Address 4880 Christina Lane		<b>Transaction ID : SA11AI.6383</b>	
City Beaumont	State TX	Zip Code 77706	Amount of Each Receipt this Period _____ 2500.00 Designated to primary in writing accompanying contribution
FEC ID number of contributing federal political committee.		C	
Name of Employer Homemaker	Occupation Homemaker		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 5000.00		

Full Name (Last, First, Middle Initial) <b>B. Myla Ramsey</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 11 / 2012	
Mailing Address 4880 Christina Lane		<b>Transaction ID : SA11AI.6384</b>	
City Beaumont	State TX	Zip Code 77706	Amount of Each Receipt this Period _____ 2500.00 Designated to runoff in writing accompanying contribution
FEC ID number of contributing federal political committee.		C	
Name of Employer Homemaker	Occupation Homemaker		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date _____ 7500.00		

Full Name (Last, First, Middle Initial) <b>C. Carroll Ray</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 15 / 2012	
Mailing Address 601 Jefferson, Suite 4000		<b>Transaction ID : SA11AI.6390</b>	
City Houston	State TX	Zip Code 77002	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Andrews & Kurth LLP	Occupation Attorney		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 5500.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

**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 58 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Rosalind Redfern Grover**

Mailing Address PO Box 2127

City Midland State TX Zip Code 79702

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

Name of Employer Intl Petroleum Assn of America Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2012

**Transaction ID : SA11AI.6392**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Joseph Redican**

Mailing Address 2304 Evergreen

City Pearland State TX Zip Code 77581

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 05 / 2012

**Transaction ID : SA11AI.6394**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 9111 Cliffwood Dr.

City Houston State TX Zip Code 77096

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

Name of Employer Texas Iron & Metal Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 07 / 2012

**Transaction ID : SA11AI.6396**

Amount of Each Receipt this Period  
 500.00

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

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

2500.00

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

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

FOR LINE NUMBER: PAGE 59 OF 189  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Janet Rizzo**

Mailing Address 2717 Aspen Ln

City State Zip Code  
Pearland TX 77584

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

Name of Employer Occupation  
State of Texas District Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 13 / 2012

**Transaction ID : SA11AI.6401**

Amount of Each Receipt this Period  
1500.00

**B.** Full Name (Last, First, Middle Initial)  
**Freddie Robinson**

Mailing Address 2310 Paradise Canyon Dr

City State Zip Code  
Pearland TX 77584

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

Name of Employer Occupation  
South Post Oak Recycling Center President/ Scrap Metal Dealer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : SA11AI.6404**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Gary Rosenthal**

Mailing Address 9 Greenway Plaza Suite 2400

City State Zip Code  
Houston TX 77046

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

Name of Employer Occupation  
The Sterling Group LLC

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2012

**Transaction ID : SA11AI.6406**

Amount of Each Receipt this Period  
350.00

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

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

2350.00

**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 60 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Michael Rydin</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 03 / 2012
Mailing Address 5500 Holly Street		<b>Transaction ID : SA11AI.6410</b>
City Houston	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer HCSS, Sugarland, TX	Occupation CEO	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>B. Tom Salome</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 28 / 2012
Mailing Address PO Box 509		<b>Transaction ID : SA11AI.6412</b>
City Waco	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>C. Joyce Sass</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 19 / 2012
Mailing Address 2707 Autumn Lake Dr		<b>Transaction ID : SA11AI.6413</b>
City Katy	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 61 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Dennis Schepps**

Mailing Address 5743 Birdwood

City State Zip Code  
Houston TX 77096

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

Name of Employer Occupation  
Frosch Travel

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 05 / 2012

**Transaction ID : SA11AI.6415**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Joe Schneider**

Mailing Address 13802 CR 185

City State Zip Code  
Alvin TX 77511

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

Name of Employer Occupation  
Holmes Road Recycling Executive

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 20 / 2012

**Transaction ID : SA11AI.6416**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Marshall Segal**

Mailing Address 204 Webster Street

City State Zip Code  
Houston TX 77002

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

Name of Employer Occupation  
JL Proler Iron and Steel Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 05 / 2012

**Transaction ID : SA11AI.6417**

Amount of Each Receipt this Period  
250.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Shelley Sekula-Gibbs**

Mailing Address 14222 Gulfview Trail

City Houston	State TX	Zip Code 77059
-----------------	-------------	-------------------

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

Name of Employer self employed	Occupation Dermatologist
-----------------------------------	-----------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 20 / 2012

**Transaction ID : SA11AI.6419**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Carrie Shapiro**

Mailing Address 108 Woodview Court

City Austin	State TX	Zip Code 78746
----------------	-------------	-------------------

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

Name of Employer Austin Metal and Iron	Occupation Owner
---	---------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : SA11AI.6423**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Robert Shapiro**

Mailing Address 42 Sundown Parkway

City Austin	State TX	Zip Code 78746
----------------	-------------	-------------------

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

Name of Employer Austin Metal & Iron	Occupation President
---	-------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : SA11AI.6424**

Amount of Each Receipt this Period  
500.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Shoss**

Mailing Address 5320 Braeburn Drive

City State Zip Code  
Bellaire TX 77401

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

Name of Employer Occupation  
Twinhawk Capitol Other

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 07 / 2012

**Transaction ID : SA11AI.6432**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Gary Shrum**

Mailing Address 1308 Silver Maple Ln

City State Zip Code  
Pearland TX 77581

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

Name of Employer Occupation  
Galveston County Court clerk

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
550.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 21 / 2012

**Transaction ID : SA11AI.6433**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Gary Shrum**

Mailing Address 1308 Silver Maple Ln

City State Zip Code  
Pearland TX 77581

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

Name of Employer Occupation  
Galveston County Court clerk

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
650.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2012

**Transaction ID : SA11AI.6434**

Amount of Each Receipt this Period  
100.00

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

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

450.00

**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 64 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Victoria Sikes**

Mailing Address 102 Rose Trail

City Lake Jackson State TX Zip Code 77566

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

Name of Employer Brazoria County Alliance for Children Occupation Administrator

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 13 / 2012

**Transaction ID : SA11AI.6436**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Jon S Skeele**

Mailing Address PO Box 1447

City Friendswood State TX Zip Code 77549

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

Name of Employer Bayway Homes Occupation Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2012

**Transaction ID : SA11AI.6440**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 8856 Chatsworth

City Houston State TX Zip Code 77024

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

Name of Employer Sofer Steiner & Assoc LLP Occupation Financial Services

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2012

**Transaction ID : SA11AI.6442**

Amount of Each Receipt this Period  
250.00

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

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

1000.00



**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 65 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. David Spence</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 13 / 2012	
Mailing Address 51 S Trillium Ct		<b>Transaction ID : SA11AI.6443</b>	
City Lake Jackson	State TX	Zip Code 77566	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee.		C	
Name of Employer The Medicine Shop	Occupation Pharmacist		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 350.00		

Full Name (Last, First, Middle Initial) <b>B. Gary Stein</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 04 / 2012	
Mailing Address PO Box 21119		<b>Transaction ID : SA11AI.6445</b>	
City Houston	State TX	Zip Code 77226	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Triple S Steel Holdings	Occupation Executive		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

Full Name (Last, First, Middle Initial) <b>C. R Leldon Sweet</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 28 / 2012	
Mailing Address 3345 Plaza 10 Dr. Ste E		<b>Transaction ID : SA11AI.6449</b>	
City Beaumont	State TX	Zip Code 77707	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Self	Occupation Dentist		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date _____ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 1250.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

**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 66 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**James Teeter**

Mailing Address 112 Sequoia

City State Zip Code  
Lake Jackson TX 77566

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

Name of Employer Occupation  
Brazos Pilot Assoc

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 13 / 2012

**Transaction ID : SA11AI.6459**

Amount of Each Receipt this Period  
400.00

**B.** Full Name (Last, First, Middle Initial)  
**William Terry**

Mailing Address 203 E Cedar St

City State Zip Code  
Angleton TX 77515

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

Name of Employer Occupation  
Port Freeport Chairman

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 13 / 2012

**Transaction ID : SA11AI.6461**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**EA Sunny Thocklen**

Mailing Address 300 31st Street South

City State Zip Code  
Texas City TX 77590

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

Name of Employer Occupation  
Trey Industries President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 17 / 2012

**Transaction ID : SA11AI.6465**

Amount of Each Receipt this Period  
1000.00

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

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

1900.00

**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 67 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Johnny Triesch**

Mailing Address 5785 E Houston St

City San Antonio State TX Zip Code 78220

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

Name of Employer Longhorn Recycling Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : SA11AI.6474**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Thomas Triesch**

Mailing Address 10343 Huntress LN

City San Antonio State TX Zip Code 78255

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

Name of Employer Great Northwest Recycling Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : SA11AI.6473**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Simon Urbanic**

Mailing Address 505 Acadia N

City League City State TX Zip Code 77573

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 12 / 2012

**Transaction ID : SA11AI.6480**

Amount of Each Receipt this Period  
200.00

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

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

2200.00

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

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

FOR LINE NUMBER: PAGE 68 OF 189  
(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)  
**Kenny Vernor**

Mailing Address 340 Dixie Drive

City State Zip Code  
Lake Jackson TX 77566

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

Name of Employer Occupation  
Whamum LLC Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 13 / 2012

**Transaction ID : SA11AI.6484**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Jack Vexler**

Mailing Address 201 Charles Road

City State Zip Code  
San Antonio TX 78209-5926

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

Name of Employer Occupation  
Monterrey Iron & Metal Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : SA11AI.6485**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Kent Watts**

Mailing Address 3803 Pine Branch Dr

City State Zip Code  
Pearland TX 77581

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

Name of Employer Occupation  
Hydrocarb Corporation CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2012

**Transaction ID : SA11AI.6490**

Amount of Each Receipt this Period  
5000.00

Reattribution of 2500 requested; ltr received 10/22/12 and will be reflected on appropriate report

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

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

6000.00

**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 69 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Jeanne Weber</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 13 / 2012
Mailing Address 3302 Hampshire		<b>Transaction ID : SA11AI.6492</b>
City Pearland	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) <b>B. NE Weber</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 13 / 2012
Mailing Address 3302 Hampshire		<b>Transaction ID : SA11AI.6494</b>
City Pearland	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) <b>C. William Doornbos Family LP</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 14 / 2012
Mailing Address PO Box 696		<b>Transaction ID : SA11AI.6557</b>
City Nederland	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer	Occupation	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5150.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 70 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Tom Wilson**

Mailing Address 1603 North B Street

City Midland State TX Zip Code 79701

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

Name of Employer Concho Resources Occupation Petroleum Geologist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : SA11AI.6500**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Peter Winstead**

Mailing Address 401 Congress Ave

City Austin State TX Zip Code 78701

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

Name of Employer Hummingbird Colibri Corp Occupation Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 27 / 2012

**Transaction ID : SA11AI.6502**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Jack Wood**

Mailing Address PO Box 4597

City Odessa State TX Zip Code 79760

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

Name of Employer Western National Bank Occupation Banker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2012

**Transaction ID : SA11AI.6504**

Amount of Each Receipt this Period  
500.00

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

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

1000.00

**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 71 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Mel Wright</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 27 / 2012	
Mailing Address 5555 Gladys Ave		<b>Transaction ID : SA11AI.6505</b>	
City Beaumont	State TX	Zip Code 77706	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00	
Name of Employer Wright's Scrap & Recycling	Occupation Owner		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4500.00		

Full Name (Last, First, Middle Initial) <b>B. Roy Yates</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 11 / 2012	
Mailing Address 314 Mystery Harbor Lane		<b>Transaction ID : SA11AI.6506</b>	
City Freeport	State TX	Zip Code 77541	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00	
Name of Employer Freeport Welding	Occupation President		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00		

Full Name (Last, First, Middle Initial) <b>C. Russell Ybarra</b>		Date of Receipt M M / D D / Y Y Y Y Y 08 / 29 / 2012	
Mailing Address 4149 Byron St		<b>Transaction ID : SA11AI.6508</b>	
City Houston	State TX	Zip Code 77005	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Gringos Mexican Kitchen	Occupation Owner		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4500.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

**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 72 OF 189
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Keith Zahar**

Mailing Address PO Box 1556

City State Zip Code  
Crystal Beach TX 77650

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

Name of Employer Occupation  
Crystal Beach Grocery Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 14 / 2012

**Transaction ID : SA11Al.6510**

Amount of Each Receipt this Period  
2500.00

**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

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

2500.00

191805.57



**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 73 OF 189
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Mailing Address 320 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00075820

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2012

**Transaction ID : SA11B.7021**

Amount of Each Receipt this Period  
 5000.00

Joint fundraiser Young Guns 2012 Rd 4

**[MEMO ITEM]**

**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

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

0.00

0.00

**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 74 OF 189
	<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)  
**ACTON PAC**

Mailing Address P.O. BOX 442

City State Zip Code  
SHARPSBURG GA 30277

FEC ID number of contributing federal political committee. **C** C00411579

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2012

**Transaction ID : SA11C.6571**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**AIR CONDITIONING CONTRACTORS OF AMERICA PAC**

Mailing Address 2800 SHIRLINGTON ROAD SUITE 300

City State Zip Code  
ARLINGTON VA 22206

FEC ID number of contributing federal political committee. **C** C00100974

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
542.68

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 19 / 2012

**Transaction ID : SA11C.7014**

Amount of Each Receipt this Period  
542.68

In-kind - venue and catering for event

**C.** Full Name (Last, First, Middle Initial)  
**AIR CONDITIONING CONTRACTORS OF AMERICA PAC**

Mailing Address 2800 SHIRLINGTON ROAD SUITE 300

City State Zip Code  
ARLINGTON VA 22206

FEC ID number of contributing federal political committee. **C** C00100974

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4542.68

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 22 / 2012

**Transaction ID : SA11C.6599**

Amount of Each Receipt this Period  
4000.00

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

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

5542.68

**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 75 OF 189
	<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)  
**ALAMO PAC**

Mailing Address 919 CONGRESS AVE SUITE 1400

City State Zip Code  
AUSTIN TX 78701

FEC ID number of contributing federal political committee. **C** C00387464

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 04 / 2012

**Transaction ID : SA11C.6540**

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
**American Bankers Association**

Mailing Address 1120 Connecticut Avenue NW

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 11 / 2012

**Transaction ID : SA11C.6552**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
**American Bankers Association**

Mailing Address 1120 Connecticut Avenue NW

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 22 / 2012

**Transaction ID : SA11C.6600**

Amount of Each Receipt this Period  
1000.00

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

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

8000.00

**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 76 OF 189
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN CONSERVATIVE UNION**

Mailing Address 1331 H STREET NW  
SUITE 500

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00130658

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2012

**Transaction ID : SA11C.6676**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN CRYSTAL SUGAR COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 101 NORTH 3RD STREET

City MOORHEAD State MN Zip Code 56560

FEC ID number of contributing federal political committee. **C** C00110338

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2012

**Transaction ID : SA11C.6546**

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
**ANDY HARRIS FOR CONGRESS**

Mailing Address 13401 Redcoat Ln

City Phoenix State MD Zip Code 21131

FEC ID number of contributing federal political committee. **C** C00435974

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2012

**Transaction ID : SA11C.6573**

Amount of Each Receipt this Period  
1000.00

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

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

6500.00

**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 77 OF 189
	<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)  
ASSOCIATED GENERAL CONTRACTORS OF AMERICA POLITICAL ACTION COMMITTEE

Mailing Address 2300 WILSON BLVD.  
SUITE 400

City ARLINGTON State VA Zip Code 22201

FEC ID number of contributing federal political committee. **C** C00082917

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 06 / 2012

**Transaction ID : SA11C.6542**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
BACHUS FOR CONGRESS COMMITTEE

Mailing Address P.O. BOX 131134

City BIRMINGHAM State AL Zip Code 35213

FEC ID number of contributing federal political committee. **C** C00260547

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : SA11C.6656**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address PO BOX 4528

City BRYAN State TX Zip Code 77805

FEC ID number of contributing federal political committee. **C** C00527275

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2012

**Transaction ID : SA11C.6575**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 189
	<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)  
**BNSF RAILWAY COMPANY RAILPAC (BNSF RAILPAC)**

Mailing Address P.O. BOX 961039

City State Zip Code  
FORT WORTH TX 76161

FEC ID number of contributing federal political committee. **C** C00235739

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 26 2012

**Transaction ID : SA11C.6637**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**BUCKEYE LIBERTY PAC**

Mailing Address 701 8TH STREET, NW  
SUITE 500

City State Zip Code  
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00366781

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 22 2012

**Transaction ID : SA11C.6602**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**CAPITAL ONE FINANCIAL CORP. ASSOC. POLITICAL FUND**

Mailing Address 1680 CAPITAL ONE DRIVE  
ATTN: 19050-1204

City State Zip Code  
MCLEAN VA 22102

FEC ID number of contributing federal political committee. **C** C00326595

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 29 2012

**Transaction ID : SA11C.6678**

Amount of Each Receipt this Period  
1000.00

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

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

4500.00

**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 79 OF 189
	<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)  
CHEVRON EMPLOYEES POLITICAL ACTION COMMITTEE - CHEVRON CORPORATION

Mailing Address 6101 BOLLINGER CANYON ROAD  
ROOM 3400

City SAN RAMON State CA Zip Code 94583

FEC ID number of contributing federal political committee. **C** C00035006

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2012

**Transaction ID : SA11C.6645**

Amount of Each Receipt this Period  
2000.00

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

Mailing Address PO BOX 51272

City MIDLAND State TX Zip Code 79710

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : SA11C.6658**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
CONSERVATIVE AMERICAN NETWORK DELIVERING INCREASED CONGRESSIONAL EXCELLENCE (CANDICE-PAC)

Mailing Address PO BOX 183370

City SHELBY TOWNSHIP State MI Zip Code 48318

FEC ID number of contributing federal political committee. **C** C00488155

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 21 / 2012

**Transaction ID : SA11C.6577**

Amount of Each Receipt this Period  
1000.00

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

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

5000.00

**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 80 OF 189
	<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)  
**CONSERVATIVE OPPORTUNITIES FOR A NEW AMERICA PAC**

Mailing Address 110 W LOUISIANA AVENUE  
SUITE 312

City MIDLAND State TX Zip Code 79701

FEC ID number of contributing federal political committee. **C** C00409458

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : SA11C.6662**

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
**CONSERVATIVE VICTORY FUND**

Mailing Address 1101 PENNSYLVANIA AVE SE  
SUITE 201

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00009704

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 22 / 2012

**Transaction ID : SA11C.6606**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**CONTINUING A MAJORITY PARTY ACTION COMMITTEE (CAMPAC)**

Mailing Address 5915 EASTMAN AVENUE  
SUITE 100

City MIDLAND State MI Zip Code 48640

FEC ID number of contributing federal political committee. **C** C00350462

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2012

**Transaction ID : SA11C.6579**

Amount of Each Receipt this Period  
2000.00

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

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

7500.00



**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 81 OF 189
	<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)  
**DALLAS SAFARI CLUB POLITICAL ACTION COMMITTEE (DSC-PAC)**

Mailing Address 310 SOUTH ROSS

City	State	Zip Code
MEXIA	TX	76667

FEC ID number of contributing federal political committee. **C C00356477**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
09		22		2012

**Transaction ID : SA11C.6608**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

B. Full Name (Last, First, Middle Initial)  
**DEALERS ELECTION ACTION COMMITTEE OF THE NATIONAL AUTOMOTIVE DEALERS ASSOCIATION**

Mailing Address 8400 WESTPARK DRIVE

City	State	Zip Code
MCLEAN	VA	22102

FEC ID number of contributing federal political committee. **C C00040998**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 5000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
09		13		2012

**Transaction ID : SA11C.6554**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 5000.00

C. Full Name (Last, First, Middle Initial)  
**DEFENDING AND INVESTING IN AMERICA'S NEW ENDEAVORS PAC (DIANE PAC)**

Mailing Address 819 PLANTATION BLVD

City	State	Zip Code
GALLATIN	TN	37066

FEC ID number of contributing federal political committee. **C C00499996**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
09		24		2012

**Transaction ID : SA11C.6626**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 6500.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

**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 82 OF 189
	<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)  
**DENBURY RESOURCES INC POLITICAL COMMITTEE**

Mailing Address 5320 LEGACY DRIVE

City PLANO State TX Zip Code 75024

FEC ID number of contributing federal political committee. **C** C00440651

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 25 / 2012

**Transaction ID : SA11C.6533**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Dennis Bonnen Campaign Fund**

Mailing Address 122 E. Myrtle

City Angleton State TX Zip Code 77515

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

Name of Employer Occupation  
Campaign Campaign

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date  
1995.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 21 / 2012

**Transaction ID : SA11C.6515**

Amount of Each Receipt this Period  
995.00

Federal funds

**C.** Full Name (Last, First, Middle Initial)  
**ENERGY POLITICAL ACTION COMMITTEE OF ENERGY FUTURE HOLDINGS CORP.**

Mailing Address 1601 BRYAN STREET

City DALLAS State TX Zip Code 75201

FEC ID number of contributing federal political committee. **C** C00226548

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : SA11C.6664**

Amount of Each Receipt this Period  
1000.00

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

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

4495.00

**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 83 OF 189
	<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)  
**ENTERPRISE PRODUCTS PARTNERS L.P. POLITICAL ACTION COMMITTEE**

Mailing Address 1100 LOUISIANA STREET

City HOUSTON State TX Zip Code 77002

FEC ID number of contributing federal political committee. **C** C00496752

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2012

**Transaction ID : SA11C.6648**

Amount of Each Receipt this Period  
 1500.00

**B.** Full Name (Last, First, Middle Initial)  
**ERNST & YOUNG POLITICAL ACTION COMMITTEE**

Mailing Address 1101 NEW YORK AVENUE, NW

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00227744

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2012

**Transaction ID : SA11C.6680**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**EVERY REPUBLICAN IS CRUCIAL (ERICPAC)**

Mailing Address 25 E MAIN STREET  
SUITE 200

City RICHMOND State VA Zip Code 23219

FEC ID number of contributing federal political committee. **C** C00384701

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 13 / 2012

**Transaction ID : SA11C.6525**

Amount of Each Receipt this Period  
 5000.00

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

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

9000.00

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

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

FOR LINE NUMBER: PAGE 84 OF 189  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**EVERY REPUBLICAN IS CRUCIAL (ERICPAC)**

Mailing Address 25 E MAIN STREET  
SUITE 200

City Richmond State VA Zip Code 23219

FEC ID number of contributing federal political committee. **C** C00384701

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 13 / 2012

**Transaction ID : SA11C.6526**

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
**EVERY REPUBLICAN IS CRUCIAL (ERICPAC)**

Mailing Address 25 E MAIN STREET  
SUITE 200

City Richmond State VA Zip Code 23219

FEC ID number of contributing federal political committee. **C** C00384701

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
15000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 20 / 2012

**Transaction ID : SA11C.6529**

Amount of Each Receipt this Period  
5000.00

**C.** 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: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 26 / 2012

**Transaction ID : SA11C.6639**

Amount of Each Receipt this Period  
5000.00

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

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

15000.00

**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 85 OF 189
	<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)  
**FLORES, BILL**

Mailing Address **PO BOX 6207**

City **BRYAN** State **TX** Zip Code **77805**

FEC ID number of contributing federal political committee. **C C00472241**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 21 / 2012**

**Transaction ID : SA11C.6563**

Amount of Each Receipt this Period  
 2000.00

**B.** Full Name (Last, First, Middle Initial)  
**FREEDOM AND SECURITY PAC**

Mailing Address **228 S. WASHINGTON ST., STE. 115**

City **ALEXANDRIA** State **VA** Zip Code **22314**

FEC ID number of contributing federal political committee. **C C00437061**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 21 / 2012**

**Transaction ID : SA11C.6581**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**FREEDOM PROJECT; THE**

Mailing Address **320 1ST STREET SE**

City **WASHINGTON** State **DC** Zip Code **20003**

FEC ID number of contributing federal political committee. **C C00305805**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 21 / 2012**

**Transaction ID : SA11C.6595**

Amount of Each Receipt this Period  
 5000.00

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

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

8000.00

**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 86 OF 189
	<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)  
**FRIENDS OF CONGRESSMAN STEVE STOCKMAN**

Mailing Address PO BOX 57135

City State Zip Code  
WEBSTER TX 77539

FEC ID number of contributing federal political committee. **C** C00518241

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : SA11C.6688**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**FRIENDS OF JOHN BOEHNER**

Mailing Address 7908 CINCINNATI DAYTON ROAD SUITE I

City State Zip Code  
WEST CHESTER OH 45069

FEC ID number of contributing federal political committee. **C** C00237198

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2012

**Transaction ID : SA11C.6565**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
**Friends of John Zerwas**

Mailing Address 1012 Morton Street

City State Zip Code  
Richmond TX 77469

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 16 / 2012

**Transaction ID : SA11C.6528**

Amount of Each Receipt this Period  
1000.00

Federal funds

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 189
	<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)  
**FRIENDS OF SAM JOHNSON**

Mailing Address P.O. BOX 860096

City PLANO State TX Zip Code 75086

FEC ID number of contributing federal political committee. **C** C00250720

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 26 / 2012

**Transaction ID : SA11C.6635**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**GOOD FUND, THE**

Mailing Address PO BOX 3404

City ALEXANDRIA State VA Zip Code 22302

FEC ID number of contributing federal political committee. **C** C00409185

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2012

**Transaction ID : SA11C.6597**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**GREATER TOMORROW POLITICAL ACTION COMMITTEE**

Mailing Address 600 PENNSYLVANIA AVENUE SE STE 330

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00526715

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2012

**Transaction ID : SA11C.6650**

Amount of Each Receipt this Period  
 500.00

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

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

2500.00

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

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	<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)  
**GULF STATES TOYOTA INC FEDERAL POLITICAL ACTION COMMITTEE**

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: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2012

**Transaction ID : SA11C.6583**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**HELP AMERICA'S LEADERS POLITICAL ACTION COMMITTEE (HALPAC)**

Mailing Address 701 8TH STREET, NW  
SUITE 500

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00376038

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2012

**Transaction ID : SA11C.6585**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**HOOSIERS FOR ROKITA, INC.**

Mailing Address 7643 EAST U.S. 36

City AVON State IN Zip Code 46123

FEC ID number of contributing federal political committee. **C** C00476192

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2012

**Transaction ID : SA11C.6587**

Amount of Each Receipt this Period  
 1000.00

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

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

3000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 189
	<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)  
**HUNTSMAN L.L.C. PAC (HUNTSMAN PAC)**

Mailing Address 10003 WOODLOCH FOREST DRIVE

City State Zip Code  
THE WOODLANDS TX 77380

FEC ID number of contributing federal political committee. **C** C00363838

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 30 2012

**Transaction ID : SA11C.6523**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE (INSURP)

Mailing Address 412 FIRST STREET, SE, SUITE 300

City State Zip Code  
WASHINGTON DC 20003

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 29 2012

**Transaction ID : SA11C.6682**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**INGERSOLL RAND COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address PO BOX 75000  
MC 2250

City State Zip Code  
DETROIT MI 48275

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 26 2012

**Transaction ID : SA11C.6641**

Amount of Each Receipt this Period  
 2500.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 189
	<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)  
**INVEST IN A STRONG AND SECURE AMERICA - ISSA PAC**

Mailing Address PO BOX 3799

City VISTA State CA Zip Code 92085

FEC ID number of contributing federal political committee. **C** C00450320

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 18 / 2012

**Transaction ID : SA11C.6561**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**INVEST IN A STRONG AND SECURE AMERICA - ISSA PAC**

Mailing Address PO BOX 3799

City VISTA State CA Zip Code 92085

FEC ID number of contributing federal political committee. **C** C00450320

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2012

**Transaction ID : SA11C.6627**

Amount of Each Receipt this Period  
 2000.00

**C.** Full Name (Last, First, Middle Initial)  
**JOBS, ECONOMY AND BUDGET FUND (JEB FUND)**

Mailing Address PO BOX 30844

City BETHESDA State MD Zip Code 20824

FEC ID number of contributing federal political committee. **C** C00420695

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2012

**Transaction ID : SA11C.6548**

Amount of Each Receipt this Period  
 5000.00

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

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

8000.00

**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 91 OF 189
	<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)  
**KBR, INC. PAC**

Mailing Address **601 JEFFERSON SUITE 3455B**

City **HOUSTON** State **TX** Zip Code **77002**

FEC ID number of contributing federal political committee. **C C00431114**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 17 / 2012**

**Transaction ID : SA11C.6559**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**LEAD YOUR NATION NOW PAC (LYNN PAC)**

Mailing Address **P.O. BOX 1872**

City **TOPEKA** State **KS** Zip Code **66601**

FEC ID number of contributing federal political committee. **C C00491043**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 21 / 2012**

**Transaction ID : SA11C.6589**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**LIBERTY PROJECT**

Mailing Address **PO BOX 30844**

City **BETHESDA** State **MD** Zip Code **20824**

FEC ID number of contributing federal political committee. **C C00446625**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 22 / 2012**

**Transaction ID : SA11C.6610**

Amount of Each Receipt this Period  
 5000.00

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 189
	<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)  
**LOCKE LORD LLP PAC**

Mailing Address 600 TRAVIS STREET  
SUITE 2800

City HOUSTON State TX Zip Code 77002

FEC ID number of contributing federal political committee. **C** C00117861

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2012

**Transaction ID : SA11C.6652**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**LONGHORN PAC**

Mailing Address PO BOX 30844

City BETHESDA State MD Zip Code 20824

FEC ID number of contributing federal political committee. **C** C00402602

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 22 / 2012

**Transaction ID : SA11C.6612**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**LOUISIANA VALUES PAC**

Mailing Address PO BOX 325

City MINDEN State LA Zip Code 71058

FEC ID number of contributing federal political committee. **C** C00466904

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2012

**Transaction ID : SA11C.6629**

Amount of Each Receipt this Period  
2000.00

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

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

3500.00

**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 93 OF 189
	<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)  
**MAJORITY COMMITTEE PAC--MC PAC**

Mailing Address P.O. BOX 10134

City State Zip Code  
BAKERSFIELD CA 93389

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 24 / 2012

**Transaction ID : SA11C.6531**

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
**MAJORITY INITIATIVE TO KEEP ELECTING REPUBLICANS FUND A.K.A MIKE R FUND**

Mailing Address PO BOX 2485

City State Zip Code  
SPRINGFIELD VA 22152

FEC ID number of contributing federal political committee. **C** C00370791

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2012

**Transaction ID : SA11C.6591**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**MAKING A RESPONSIBLE STAND FOR HOUSEHOLDS IN AMERICA (MARSHA PAC)**

Mailing Address PO BOX 680063

City State Zip Code  
FRANKLIN TN 37068

FEC ID number of contributing federal political committee. **C** C00409276

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2012

**Transaction ID : SA11C.6631**

Amount of Each Receipt this Period  
1000.00

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

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

6500.00

**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 94 OF 189
	<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)  
MARATHON OIL COMPANY EMPLOYEES POLITICAL ACTION COMMITTEE (MEPAC)

Mailing Address P.O. BOX 75000  
MC2250

City State Zip Code  
DETROIT MI 48275

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : SA11C.6666**

Amount of Each Receipt this Period  
1500.00

**B.** Full Name (Last, First, Middle Initial)  
NATIONAL ASSOCIATION OF CHEMICAL DISTRIBUTORS RESPONSIBLE DISTRIBUTION POLITICAL ACTION CO

Mailing Address 1555 WILSON BOULEVARD  
SUITE 700

City State Zip Code  
ARLINGTON VA 22209

FEC ID number of contributing federal political committee. **C** C00379180

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2012

**Transaction ID : SA11C.6593**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
NATIONAL CATTLEMEN'S BEEF ASSOCIATION POLITICAL ACTION COMMITTEE (NCBA-PAC)

Mailing Address 9110 EAST NICHOLS AVENUE

City State Zip Code  
CENTENNIAL CO 80112

FEC ID number of contributing federal political committee. **C** C00028787

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 22 / 2012

**Transaction ID : SA11C.6614**

Amount of Each Receipt this Period  
2000.00

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

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

4500.00

**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 95 OF 189
	<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)  
NATIONAL COTTON COUNCIL COMMITTEE FOR THE ADVANCEMENT OF COTTON

Mailing Address P.O. BOX 2995

City State Zip Code  
CORDOVA TN 38088

FEC ID number of contributing federal political committee. **C** C00023028

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 22 / 2012

**Transaction ID : SA11C.6604**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
NATIONAL COTTON COUNCIL COMMITTEE FOR THE ADVANCEMENT OF COTTON

Mailing Address P.O. BOX 2995

City State Zip Code  
CORDOVA TN 38088

FEC ID number of contributing federal political committee. **C** C00023028

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2012

**Transaction ID : SA11C.6646**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS INC POLITICAL ACTION COMMITTEE

Mailing Address 469 HOSPITAL DR.  
SUITE C

City State Zip Code  
GASTONIA NC 28054

FEC ID number of contributing federal political committee. **C** C00405555

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 22 / 2012

**Transaction ID : SA11C.6620**

Amount of Each Receipt this Period  
500.00

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

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

2500.00

**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 96 OF 189
	<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)  
**NATIONAL SORGHUM PRODUCERS POLITICAL ACTION COMMITTEE**

Mailing Address 4201 N INTERSTATE 27

City State Zip Code  
LUBBOCK TX 79403

FEC ID number of contributing federal political committee. **C** C00475673

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2012

**Transaction ID : SA11C.6684**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**NEW PAC**

Mailing Address P.O. BOX 7480

City State Zip Code  
VISALIA CA 93290

FEC ID number of contributing federal political committee. **C** C00398750

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 22 / 2012

**Transaction ID : SA11C.6616**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**NEW PIONEERS PAC**

Mailing Address 228 S WASHINGTON ST STE 115

City State Zip Code  
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00459123

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : SA11C.6668**

Amount of Each Receipt this Period  
2500.00

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

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

4500.00



**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 97 OF 189
	<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)  
**NUSTARPAC**

Mailing Address 2330 NORTH LOOP WEST 1604

City State Zip Code  
SAN ANTONIO TX 78248

FEC ID number of contributing federal political committee. **C** C00435321

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 27 / 2012

**Transaction ID : SA11C.6654**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**PEOPLE FOR ENTERPRISE TRADE AND ECONOMIC GROWTH (PETE PAC)**

Mailing Address 7804 EVENING LANE

City State Zip Code  
ALEXANDRIA VA 22306

FEC ID number of contributing federal political committee. **C** C00363770

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 22 / 2012

**Transaction ID : SA11C.6618**

Amount of Each Receipt this Period  
5000.00

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

Mailing Address P.O. BOX 425

City State Zip Code  
ROSWELL GA 30077

FEC ID number of contributing federal political committee. **C** C00386755

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 21 / 2012

**Transaction ID : SA11C.6567**

Amount of Each Receipt this Period  
1000.00

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 189
	<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)  
**REYNOLDS AMERICAN INC. POLITICAL ACTION COMMITTEE; RAI PAC**

Mailing Address P. O. BOX 718

City State Zip Code  
WINSTON-SALEM NC 27102

FEC ID number of contributing federal political committee. **C** C00042002

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2012

**Transaction ID : SA11C.6686**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**South Texas Sugar Cane Producers Subcommittee PAC**

Mailing Address PO Box Drawer A

City State Zip Code  
Santa Rosa TX 78593

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2012

**Transaction ID : SA11C.6674**

Amount of Each Receipt this Period  
500.00

Federal funds

**C.** Full Name (Last, First, Middle Initial)  
**STAND TALL AMERICA PAC (STAPAC)**

Mailing Address PO BOX 2382

City State Zip Code  
AMARILLO TX 79105

FEC ID number of contributing federal political committee. **C** C00404418

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 10 / 2012

**Transaction ID : SA11C.6550**

Amount of Each Receipt this Period  
1000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 189
	<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)  
**TACO POLITICAL ACTION COMMITTEE**

Mailing Address 6405 METCALF AVENUE, SUITE 503

City State Zip Code  
SHAWNEE MISSION KS 66202

FEC ID number of contributing federal political committee. **C** C00330118

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 28 / 2012

**Transaction ID : SA11C.6670**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Texas Air Conditioning Contractors Assn PAC Fund**

Mailing Address 13706 Research #214

City State Zip Code  
Austin TX 78750

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 28 / 2012

**Transaction ID : SA11C.6660**

Amount of Each Receipt this Period  
1000.00

Federal funds

**C.** Full Name (Last, First, Middle Initial)  
**THE CONGRESSMAN JOE BARTON COMMITTEE**

Mailing Address P.O. BOX 1444

City State Zip Code  
ENNIS TX 75120

FEC ID number of contributing federal political committee. **C** C00195065

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 24 / 2012

**Transaction ID : SA11C.6624**

Amount of Each Receipt this Period  
2000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 189
	<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)  
**The Continuum Fund of Zachry Holdings, Inc.**

Mailing Address 527 Logwood

City San Antonio State TX Zip Code 78221

FEC ID number of contributing federal political committee. **C** C00471565

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 20 / 2012

**Transaction ID : SA11C.6042**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**THE EYE OF THE TIGER POLITICAL ACTION COMMITTEE**

Mailing Address PO BOX 2485

City SPRINGFIELD State VA Zip Code 22152

FEC ID number of contributing federal political committee. **C** C00467431

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 29 / 2012

**Transaction ID : SA11C.6537**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**TITLE INDUSTRY POLITICAL ACTION COMMITTEE**

Mailing Address 1828 L ST NW  
SUITE 705

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00012914

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : SA11C.6672**

Amount of Each Receipt this Period  
 1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 189
	<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)  
**TREY GOWDY FOR CONGRESS**

Mailing Address PO BOX 3324

City State Zip Code  
SPARTANBURG SC 29304

FEC ID number of contributing federal political committee. **C** C00462523

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2012

**Transaction ID : SA11C.7023**

Amount of Each Receipt this Period  
 1111.11

Joint fundraiser Young Guns 2012 Rd 4

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**UNION PACIFIC CORP. FUND FOR EFFECTIVE GOVERNMENT**

Mailing Address 600 13TH ST., NW  
SUITE 340

City State Zip Code  
WASHINGTON DC 20005

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 25 / 2012

**Transaction ID : SA11C.6535**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**USA RICE FEDERATION PAC**

Mailing Address 4301 NORTH FAIRFAX DRIVE SUITE 425

City State Zip Code  
ARLINGTON VA 22203

FEC ID number of contributing federal political committee. **C** C00308478

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 26 / 2012

**Transaction ID : SA11C.6643**

Amount of Each Receipt this Period  
 1000.00

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

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

3500.00

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

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

FOR LINE NUMBER: PAGE 102 OF 189  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
VERIZON COMMUNICATIONS INC./VERIZON WIRELESS GOOD GOVERNMENT CLUB (VERIZON/VERIZON WIRELES

**A.** Mailing Address 1300 I ST NW, STE 400 WEST  
ATTN: TAYLOR CRAIG  
City WASHINGTON State DC Zip Code 20005

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	2		2	0	1	2

Transaction ID : SA11C.6622

FEC ID number of contributing federal political committee. **C** C00186288

Amount of Each Receipt this Period  

2	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date  

2	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

**B.** Full Name (Last, First, Middle Initial)  
Warren Chisum Campaign Acct.

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	1		2	0	1	2

Transaction ID : SA11C.6569

Mailing Address PO Box 2061  
City Pampa State TX Zip Code 79066

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

Amount of Each Receipt this Period  

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Federal funds

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date  

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

**C.** Full Name (Last, First, Middle Initial)  
WESTERN PEANUT GROWERS ASSOCIATION, INC. POLITICAL ACTION COMMITTEE

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	2

Transaction ID : SA11C.6633

Mailing Address PO BOX 252  
City SEMINOLE State TX Zip Code 79360

FEC ID number of contributing federal political committee. **C** C00254847

Amount of Each Receipt this Period  

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date  

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

4000.00

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

158537.68

**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 103 OF 189
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**YOUNG GUNS 2012 ROUND 4**

Mailing Address 228 S WASHINGTON ST STE 115

City State Zip Code  
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00529867

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4123.54

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2012

**Transaction ID : SA12.7012**

Amount of Each Receipt this Period  
 4123.54  
 Joint fundraiser proceeds

**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

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

4123.54

4123.54

**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 104 OF 189	
	<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) <b>A. AIR CONDITIONING CONTRACTORS OF AMERICA PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2012
Mailing Address 2800 SHIRLINGTON ROAD SUITE 300		Amount of Each Disbursement this Period 542.68
City ARLINGTON	State VA Zip Code 22206	
Purpose of Disbursement In-kind - venue and catering for event		Transaction ID : SB17.7015
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. AirTran Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2012
Mailing Address 9955 AirTran Blvd		Amount of Each Disbursement this Period 787.40
City Orlando	State FL Zip Code 32827	
Purpose of Disbursement Airline Tickets to Washington DC for campaign event		Transaction ID : SB17.6700
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:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. AirTran Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2012
Mailing Address 9955 AirTran Blvd		Amount of Each Disbursement this Period 80.00
City Orlando	State FL Zip Code 32827	
Purpose of Disbursement Baggage Fee		Transaction ID : SB17.6701
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:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1410.08
<b>TOTAL</b> 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 105 OF 189	
	<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) <b>A. Bob's Cartridge World</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2012	
Mailing Address 102 W El Dorado Blvd			Amount of Each Disbursement this Period 359.01	
City Friendswood	State TX	Zip Code 77546	Transaction ID : SB17.6709	
Purpose of Disbursement Ink		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. Bob's Cartridge World</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2012	
Mailing Address 102 W El Dorado Blvd			Amount of Each Disbursement this Period 54.61	
City Friendswood	State TX	Zip Code 77546	Transaction ID : SB17.6710	
Purpose of Disbursement Ink		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

Full Name (Last, First, Middle Initial) <b>c. Brazoria County Republican Party</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2012	
Mailing Address 135 Spanish Oak Circle			Amount of Each Disbursement this Period 500.00	
City Lake Jackson	State TX	Zip Code 77566	Transaction ID : SB17.6713	
Purpose of Disbursement Sponsorship for Funfest		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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	913.62
<b>TOTAL</b> 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 106 OF 189			
	<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) <b>A. Brazoria County Republican Party</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2012
Mailing Address 135 Spanish Oak Circle		Amount of Each Disbursement this Period 80.00
City Lake Jackson	State TX	
Zip Code 77566	Purpose of Disbursement Funfest ad	<b>Transaction ID : SB17.6714</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Daniel J Buckley</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2012
Mailing Address 7722 Channelview Dr		Amount of Each Disbursement this Period 1250.00
City Galveston	State TX	
Zip Code 77544	Purpose of Disbursement Mileage Reimbursement	<b>Transaction ID : SB17.6911</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Daniel J Buckley</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2012
Mailing Address 7722 Channelview Dr		Amount of Each Disbursement this Period 1250.00
City Galveston	State TX	
Zip Code 77544	Purpose of Disbursement Salary	<b>Transaction ID : SB17.6965</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2580.00
<b>TOTAL</b> 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 107 OF 189	
	<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) <b>A. Daniel J Buckley</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2012
Mailing Address 7722 Channelview Dr		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : SB17.7001</b>
City Galveston State TX Zip Code 77544	Purpose of Disbursement salary	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Daniel J Buckley</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2012
Mailing Address 7722 Channelview Dr		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : SB17.7005</b>
City Galveston State TX Zip Code 77544	Purpose of Disbursement Salary	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Daniel J Buckley</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address 7722 Channelview Dr		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : SB17.7011</b>
City Galveston State TX Zip Code 77544	Purpose of Disbursement Salary	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4500.00
<b>TOTAL</b> 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 108 OF 189	
	<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) <b>A. Butlers Courtyard</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2012
Mailing Address 122 Michigan Ave		Amount of Each Disbursement this Period 820.80 <b>Transaction ID : SB17.6718</b>
City League City	State TX	
Zip Code 77573	Purpose of Disbursement Event Expense	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Jeff Carroll</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2012
Mailing Address 514 Magnolia Circle		Amount of Each Disbursement this Period 108.63 <b>Transaction ID : SB17.6912</b>
City League City	State TX	
Zip Code 77573	Purpose of Disbursement Mileage Reimbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Jeff Carroll</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2012
Mailing Address 514 Magnolia Circle		Amount of Each Disbursement this Period 220.00 <b>Transaction ID : SB17.6922</b>
City League City	State TX	
Zip Code 77573	Purpose of Disbursement Salary	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1149.43
<b>TOTAL</b> 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 109 OF 189	
	<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) <b>A. Jeff Carroll</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2012
Mailing Address 514 Magnolia Circle		Amount of Each Disbursement this Period 82.11
City League City	State TX	
Zip Code 77573		
Purpose of Disbursement Mileage Reimbursement		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. Jeff Carroll</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2012
Mailing Address 514 Magnolia Circle		Amount of Each Disbursement this Period 220.00
City League City	State TX	
Zip Code 77573		
Purpose of Disbursement Salary		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>c. Jeff Carroll</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2012
Mailing Address 514 Magnolia Circle		Amount of Each Disbursement this Period 99.45
City League City	State TX	
Zip Code 77573		
Purpose of Disbursement Mileage Reimbursement		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: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	401.56
<b>TOTAL</b> 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 110 OF 189	
	<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) <b>A. Jeff Carroll</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2012
Mailing Address 514 Magnolia Circle		Amount of Each Disbursement this Period 160.00 <b>Transaction ID : SB17.6968</b>
City League City	State TX	
Zip Code 77573	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Jeff Carroll</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2012
Mailing Address 514 Magnolia Circle		Amount of Each Disbursement this Period 67.32 <b>Transaction ID : SB17.6996</b>
City League City	State TX	
Zip Code 77573	Purpose of Disbursement Mileage Reimbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Jeff Carroll</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2012
Mailing Address 514 Magnolia Circle		Amount of Each Disbursement this Period 120.00 <b>Transaction ID : SB17.6998</b>
City League City	State TX	
Zip Code 77573	Purpose of Disbursement Salary	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	347.32
<b>TOTAL</b> 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 111 OF 189			
	<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) <b>A. Arnold Craft</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2012
Mailing Address 15623 Lake Lodge Dr.		Amount of Each Disbursement this Period 78.03
City Houston State TX Zip Code 77062	Purpose of Disbursement Mileage Reimbursement	
Candidate Name		Transaction ID : SB17.6953
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:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Arnold Craft</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2012
Mailing Address 15623 Lake Lodge Dr.		Amount of Each Disbursement this Period 235.00
City Houston State TX Zip Code 77062	Purpose of Disbursement Salary	
Candidate Name		Transaction ID : SB17.6960
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:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. Arnold Craft</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2012
Mailing Address 15623 Lake Lodge Dr.		Amount of Each Disbursement this Period 43.86
City Houston State TX Zip Code 77062	Purpose of Disbursement Mileage Reimbursement	
Candidate Name		Transaction ID : SB17.6977
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:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	356.89
<b>TOTAL</b> 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 112 OF 189			
	<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) <b>A. Arnold Craft</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2012
Mailing Address 15623 Lake Lodge Dr.		Amount of Each Disbursement this Period 40.00 <b>Transaction ID : SB17.6985</b>
City Houston State TX Zip Code 77062	Purpose of Disbursement Salary	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Cody Davis</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2012
Mailing Address 14144 Mueschke Rd		Amount of Each Disbursement this Period 130.00 <b>Transaction ID : SB17.6921</b>
City Cypress State TX Zip Code 77429	Purpose of Disbursement Salary	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Cody Davis</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2012
Mailing Address 14144 Mueschke Rd		Amount of Each Disbursement this Period 148.41 <b>Transaction ID : SB17.6932</b>
City Cypress State TX Zip Code 77429	Purpose of Disbursement Mileage Reimbursement	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	318.41
<b>TOTAL</b> 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 113 OF 189			
	<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) <b>A. Cody Davis</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2012
Mailing Address 14144 Mueschke Rd		Amount of Each Disbursement this Period 480.00 <b>Transaction ID : SB17.6941</b>
City Cypress	State TX	
Zip Code 77429	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Cody Davis</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2012
Mailing Address 14144 Mueschke Rd		Amount of Each Disbursement this Period 50.49 <b>Transaction ID : SB17.6954</b>
City Cypress	State TX	
Zip Code 77429	Purpose of Disbursement Mileage Reimbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Cody Davis</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2012
Mailing Address 14144 Mueschke Rd		Amount of Each Disbursement this Period 490.00 <b>Transaction ID : SB17.6964</b>
City Cypress	State TX	
Zip Code 77429	Purpose of Disbursement Salary	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1020.49
<b>TOTAL</b> 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 114 OF 189			
	<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) <b>A. Cody Davis</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2012
Mailing Address 14144 Mueschke Rd		Amount of Each Disbursement this Period 74.46
City Cypress	State TX	
Zip Code 77429	Purpose of Disbursement Mileage Reimbursement	Transaction ID : SB17.6979
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Cody Davis</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2012
Mailing Address 14144 Mueschke Rd		Amount of Each Disbursement this Period 490.00
City Cypress	State TX	
Zip Code 77429	Purpose of Disbursement Salary	Transaction ID : SB17.6988
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Christopher Do</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2012
Mailing Address 10618 Nicole's Place Trail		Amount of Each Disbursement this Period 235.00
City Houston	State TX	
Zip Code 77089	Purpose of Disbursement Salary	Transaction ID : SB17.6920
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	799.46
<b>TOTAL</b> 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 115 OF 189			
	<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) <b>A. Christopher Do</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2012	
Mailing Address 10618 Nicole's Place Trail			Amount of Each Disbursement this Period 200.00	
City Houston	State TX	Zip Code 77089	Transaction ID : SB17.6940	
Purpose of Disbursement Salary		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. Christopher Do</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2012	
Mailing Address 10618 Nicole's Place Trail			Amount of Each Disbursement this Period 435.00	
City Houston	State TX	Zip Code 77089	Transaction ID : SB17.6963	
Purpose of Disbursement Salary		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

Full Name (Last, First, Middle Initial) <b>c. Christopher Do</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2012	
Mailing Address 10618 Nicole's Place Trail			Amount of Each Disbursement this Period 120.00	
City Houston	State TX	Zip Code 77089	Transaction ID : SB17.6987	
Purpose of Disbursement Salary		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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	755.00
<b>TOTAL</b> 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 116 OF 189			
	<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) <b>A. Minh-Nghia Do</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2012		
Mailing Address 10618 Nicole's Place Trail			Amount of Each Disbursement this Period 60.00		
City Houston	State TX	Zip Code 77089	Transaction ID : SB17.6926		
Purpose of Disbursement Salary		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>B. Minh-Nghia Do</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2012		
Mailing Address 10618 Nicole's Place Trail			Amount of Each Disbursement this Period 85.00		
City Houston	State TX	Zip Code 77089	Transaction ID : SB17.6944		
Purpose of Disbursement Salary		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>c. Minh-Nghia Do</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2012		
Mailing Address 10618 Nicole's Place Trail			Amount of Each Disbursement this Period 60.00		
City Houston	State TX	Zip Code 77089	Transaction ID : SB17.6970		
Purpose of Disbursement Salary		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: _____				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	205.00
<b>TOTAL</b> 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 117 OF 189			
	<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) <b>A. Minh-Nghia Do</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2012		
Mailing Address 10618 Nicole's Place Trail			Amount of Each Disbursement this Period 120.00		
City Houston	State TX	Zip Code 77089	Transaction ID : SB17.6991		
Purpose of Disbursement Salary		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Nhan Do</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2012		
Mailing Address 12023 Sanguine Sound Ln			Amount of Each Disbursement this Period 205.00		
City Houston	State TX	Zip Code 77089	Transaction ID : SB17.6928		
Purpose of Disbursement salary		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. Nhan Do</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2012		
Mailing Address 12023 Sanguine Sound Ln			Amount of Each Disbursement this Period 200.00		
City Houston	State TX	Zip Code 77089	Transaction ID : SB17.6946		
Purpose of Disbursement Salary		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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	525.00
<b>TOTAL</b> 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 118 OF 189			
	<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) <b>A. Nhan Do</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2012	
Mailing Address 12023 Sanguine Sound Ln			Amount of Each Disbursement this Period 430.00	
City Houston	State TX	Zip Code 77089	Transaction ID : SB17.6972	
Purpose of Disbursement salary		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Facebook Ads Payment</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2012	
Mailing Address 1601 Willow Road			Amount of Each Disbursement this Period 61.67	
City Menlow Park	State CA	Zip Code 94025	Transaction ID : SB17.6733	
Purpose of Disbursement Online Advertising		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Facebook Ads Payment</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2012	
Mailing Address 1601 Willow Road			Amount of Each Disbursement this Period 118.96	
City Menlow Park	State CA	Zip Code 94025	Transaction ID : SB17.6734	
Purpose of Disbursement Online Advertising		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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	618.63
<b>TOTAL</b> 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 119 OF 189	
	<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) <b>A. Facebook Ads Payment</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2012
Mailing Address 1601 Willow Road		Amount of Each Disbursement this Period 6100.03 <b>Transaction ID : SB17.6735</b>
City Menlow Park State CA Zip Code 94025	Purpose of Disbursement Online Advertising	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Front Porch Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2012
Mailing Address 243 North 5th Street		Amount of Each Disbursement this Period 2973.30 <b>Transaction ID : SB17.6738</b>
City Columbus State OH Zip Code 43215	Purpose of Disbursement VOIP Phones	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Front Porch Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2012
Mailing Address 243 North 5th Street		Amount of Each Disbursement this Period 2973.00 <b>Transaction ID : SB17.6739</b>
City Columbus State OH Zip Code 43215	Purpose of Disbursement VOIP Phones	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6100.03
<b>TOTAL</b> 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 120 OF 189			
	<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**

**A. Front Porch Strategies**

Full Name (Last, First, Middle Initial)  
Mailing Address 243 North 5th Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement Phone Service

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 09 / 14 / 2012

Amount of Each Disbursement this Period: 6430.67

Transaction ID : SB17.6740

**B. Graphics by Kandi**

Full Name (Last, First, Middle Initial)  
Mailing Address 15255 Gulf Freeway, Suite 179-B

City Houston State TX Zip Code 77034

Purpose of Disbursement Business Cards

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 09 / 11 / 2012

Amount of Each Disbursement this Period: 212.17

Transaction ID : SB17.6748

**C. Steve Greenberg**

Full Name (Last, First, Middle Initial)  
Mailing Address 1510 West Loop South

City Houston State TX Zip Code 77027

Purpose of Disbursement In-kind - Event expense

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 07 / 12 / 2012

Amount of Each Disbursement this Period: 405.57

Transaction ID : SB17.7019

**SUBTOTAL** of Disbursements This Page (optional) ..... 7048.41

**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 121 OF 189	
	<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) <b>A. Harris Meida</b>		Date of Disbursement MM / DD / YYYY 07 / 12 / 2012
Mailing Address 611 S. Congress Ave. Suite 400		Amount of Each Disbursement this Period 390.00 <b>Transaction ID : SB17.6752</b>
City Austin State TX Zip Code 78704	Purpose of Disbursement Email Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Harris Meida</b>		Date of Disbursement MM / DD / YYYY 08 / 17 / 2012
Mailing Address 611 S. Congress Ave. Suite 400		Amount of Each Disbursement this Period 622.37 <b>Transaction ID : SB17.6753</b>
City Austin State TX Zip Code 78704	Purpose of Disbursement Email List	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Ben Hartman</b>		Date of Disbursement MM / DD / YYYY 07 / 13 / 2012
Mailing Address 25281 Big Horn lane		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : SB17.6918</b>
City Magnolia State TX Zip Code 77355	Purpose of Disbursement Salary	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3012.37
<b>TOTAL</b> 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 122 OF 189	
	<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) <b>A. Ben Hartman</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2012
Mailing Address 25281 Big Horn lane		Amount of Each Disbursement this Period 363.35 <b>Transaction ID : SB17.6952</b>
City Magnolia State TX Zip Code 77355	Purpose of Disbursement Expense Reimbursement - Office Supplies/Stamps	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Ben Hartman</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2012
Mailing Address 25281 Big Horn lane		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : SB17.6961</b>
City Magnolia State TX Zip Code 77355	Purpose of Disbursement Salary	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Ben Hartman</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2012
Mailing Address 25281 Big Horn lane		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : SB17.7000</b>
City Magnolia State TX Zip Code 77355	Purpose of Disbursement salary	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4863.35
<b>TOTAL</b> 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 123 OF 189			
	<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) <b>A. Ben Hartman</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2012
Mailing Address 25281 Big Horn lane		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : SB17.7003</b>
City Magnolia State TX Zip Code 77355	Purpose of Disbursement Salary	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Ben Hartman</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address 25281 Big Horn lane		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : SB17.7008</b>
City Magnolia State TX Zip Code 77355	Purpose of Disbursement Salary	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Holiday Inn</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2012
Mailing Address 550 C. Street SW		Amount of Each Disbursement this Period 1020.38 <b>Transaction ID : SB17.6755</b>
City Washington State DC Zip Code 20024	Purpose of Disbursement Travel/Hotel	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6020.38
<b>TOTAL</b> 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 124 OF 189			
	<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) <b>A. Holiday Inn</b>		Date of Disbursement
Mailing Address 550 C. Street SW		M M / D D / Y Y Y Y 09 / 20 / 2012
City Washington	State DC	Zip Code 20024
Purpose of Disbursement Travel/Hotel	Candidate Name	Amount of Each Disbursement this Period 1020.38
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:	<b>Transaction ID : SB17.6756</b>

Full Name (Last, First, Middle Initial) <b>B. Quentin Hughes</b>		Date of Disbursement
Mailing Address 703 Redway Lane		M M / D D / Y Y Y Y 07 / 13 / 2012
City Houston	State TX	Zip Code 77062
Purpose of Disbursement Mileage Reimbursement	Candidate Name	Amount of Each Disbursement this Period 38.25
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:	<b>Transaction ID : SB17.6915</b>

Full Name (Last, First, Middle Initial) <b>c. Quentin Hughes</b>		Date of Disbursement
Mailing Address 703 Redway Lane		M M / D D / Y Y Y Y 07 / 13 / 2012
City Houston	State TX	Zip Code 77062
Purpose of Disbursement Salary	Candidate Name	Amount of Each Disbursement this Period 275.00
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:	<b>Transaction ID : SB17.6929</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1333.63
<b>TOTAL</b> 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 125 OF 189			
	<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) <b>A. Quentin Hughes</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2012
Mailing Address 703 Redway Lane		Amount of Each Disbursement this Period 524.01 <b>Transaction ID : SB17.6936</b>
City Houston State TX Zip Code 77062	Purpose of Disbursement Mileage Reimbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Quentin Hughes</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2012
Mailing Address 703 Redway Lane		Amount of Each Disbursement this Period 345.00 <b>Transaction ID : SB17.6947</b>
City Houston State TX Zip Code 77062	Purpose of Disbursement Salary	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Quentin Hughes</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2012
Mailing Address 703 Redway Lane		Amount of Each Disbursement this Period 58.65 <b>Transaction ID : SB17.6957</b>
City Houston State TX Zip Code 77062	Purpose of Disbursement Mileage Reimbursement	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	524.01
<b>TOTAL</b> 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 126 OF 189	
	<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) <b>A. Quentin Hughes</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2012
Mailing Address 703 Redway Lane		Amount of Each Disbursement this Period 205.00 <b>Transaction ID : SB17.6973</b>
City Houston	State TX	
Zip Code 77062	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Jackson Cleaning Service</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2012
Mailing Address 11601 Shadow Creek Pkwy		Amount of Each Disbursement this Period 318.25 <b>Transaction ID : SB17.6759</b>
City Pearland	State TX	
Zip Code 77584	Purpose of Disbursement Office Cleaning	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Dustin Lazenberry</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2012
Mailing Address 15502 Contender Ln		Amount of Each Disbursement this Period 230.00 <b>Transaction ID : SB17.6989</b>
City Friendswood	State TX	
Zip Code 77546	Purpose of Disbursement Salary	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	753.25
<b>TOTAL</b> 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 127 OF 189			
	<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) <b>A. Brooke Mayfield</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2012		
Mailing Address 4907 Meadowglen Dr			Amount of Each Disbursement this Period 400.00		
City Pearland	State TX	Zip Code 77584	Transaction ID : SB17.6919		
Purpose of Disbursement Salary		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>B. Brooke Mayfield</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2012		
Mailing Address 4907 Meadowglen Dr			Amount of Each Disbursement this Period 400.00		
City Pearland	State TX	Zip Code 77584	Transaction ID : SB17.6939		
Purpose of Disbursement Salary		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>c. Brooke Mayfield</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2012		
Mailing Address 4907 Meadowglen Dr			Amount of Each Disbursement this Period 400.00		
City Pearland	State TX	Zip Code 77584	Transaction ID : SB17.6962		
Purpose of Disbursement Salary		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: _____				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1200.00
<b>TOTAL</b> 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 128 OF 189	
	<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) <b>A. Brooke Mayfield</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2012
Mailing Address 4907 Meadowglen Dr		Amount of Each Disbursement this Period 928.50 <b>Transaction ID : SB17.6978</b>
City Pearlland State TX Zip Code 77584	Purpose of Disbursement Mileage Reimbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Brooke Mayfield</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2012
Mailing Address 4907 Meadowglen Dr		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : SB17.6986</b>
City Pearlland State TX Zip Code 77584	Purpose of Disbursement Salary	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Brooke Mayfield</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2012
Mailing Address 4907 Meadowglen Dr		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : SB17.6999</b>
City Pearlland State TX Zip Code 77584	Purpose of Disbursement Salary	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	928.50
<b>TOTAL</b> 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 129 OF 189	
	<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) <b>A. Brooke Mayfield</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2012	
Mailing Address 4907 Meadowglen Dr			Amount of Each Disbursement this Period 800.00	
City Pearland	State TX	Zip Code 77584	Transaction ID : SB17.7002	
Purpose of Disbursement Salary		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. Brooke Mayfield</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2012	
Mailing Address 4907 Meadowglen Dr			Amount of Each Disbursement this Period 400.00	
City Pearland	State TX	Zip Code 77584	Transaction ID : SB17.7004	
Purpose of Disbursement Salary		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

Full Name (Last, First, Middle Initial) <b>c. Brooke Mayfield</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012	
Mailing Address 4907 Meadowglen Dr			Amount of Each Disbursement this Period 1150.00	
City Pearland	State TX	Zip Code 77584	Transaction ID : SB17.7009	
Purpose of Disbursement Salary		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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2350.00
<b>TOTAL</b> 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 130 OF 189	
	<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) <b>A. Mentzer Media Services INC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address 600 Fairmount Ave, Suite 306		Amount of Each Disbursement this Period 71940.00 <b>Transaction ID : SB17.6763</b>
City Towson	State MD	
Zip Code 21286	Purpose of Disbursement Media Buy	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Mentzer Media Services INC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2012
Mailing Address 600 Fairmount Ave, Suite 306		Amount of Each Disbursement this Period 20000.00 <b>Transaction ID : SB17.6764</b>
City Towson	State MD	
Zip Code 21286	Purpose of Disbursement Media Buy	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Mentzer Media Services INC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2012
Mailing Address 600 Fairmount Ave, Suite 306		Amount of Each Disbursement this Period 50000.00 <b>Transaction ID : SB17.6765</b>
City Towson	State MD	
Zip Code 21286	Purpose of Disbursement Media Buy	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	141940.00
<b>TOTAL</b> 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 131 OF 189	
	<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) <b>A. Mentzer Media Services INC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2012
Mailing Address 600 Fairmount Ave, Suite 306		Amount of Each Disbursement this Period 50000.00 <b>Transaction ID : SB17.6766</b>
City Towson	State MD	
Zip Code 21286	Purpose of Disbursement Media Buy	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Najvar Law Firm</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2012
Mailing Address One Greenway Plaza Suite 100		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.6767</b>
City Houston	State TX	
Zip Code 77046	Purpose of Disbursement Legal Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Najvar Law Firm</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address One Greenway Plaza Suite 100		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.6768</b>
City Houston	State TX	
Zip Code 77046	Purpose of Disbursement Legal Services	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	51000.00
<b>TOTAL</b> 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 132 OF 189	
	<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) <b>A. Nasica</b>		Date of Disbursement MM / DD / YYYY 07 / 12 / 2012
Mailing Address 1108 Lavaca Street		Amount of Each Disbursement this Period 5560.00 <b>Transaction ID : SB17.6769</b>
City Austin State TX Zip Code 78701	Purpose of Disbursement Database	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Office Depot</b>		Date of Disbursement MM / DD / YYYY 09 / 18 / 2012
Mailing Address 1301 West Bay Area Blvd		Amount of Each Disbursement this Period 636.51 <b>Transaction ID : SB17.6771</b>
City Webster State TX Zip Code 77598	Purpose of Disbursement Office Supplies/printing	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Faith Pinegar</b>		Date of Disbursement MM / DD / YYYY 07 / 24 / 2012
Mailing Address 424 Westminister		Amount of Each Disbursement this Period 140.00 <b>Transaction ID : SB17.6951</b>
City League City State TX Zip Code 77573	Purpose of Disbursement Salary	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6336.51
<b>TOTAL</b> 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 133 OF 189			
	<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) <b>A. Faith Pinegar</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2012
Mailing Address 424 Westminister		Amount of Each Disbursement this Period 116.28
City League City	State TX	
Zip Code 77573	Purpose of Disbursement Mileage Reimbursement	Transaction ID : SB17.6995
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Faith Pinegar</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2012
Mailing Address 424 Westminister		Amount of Each Disbursement this Period 245.00
City League City	State TX	
Zip Code 77573	Purpose of Disbursement Salary	Transaction ID : SB17.6997
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 4.50
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Transaction ID : SB17.6774
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	365.78
<b>TOTAL</b> 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 134 OF 189			
	<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) <b>A. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 2.25 <b>Transaction ID : SB17.6775</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 4.50 <b>Transaction ID : SB17.6776</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 2.25 <b>Transaction ID : SB17.6777</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9.00
<b>TOTAL</b> 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 135 OF 189			
	<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) <b>A. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 11.25 <b>Transaction ID : SB17.6778</b>
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Merchant Account Fees	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 4.50 <b>Transaction ID : SB17.6779</b>
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Merchant Account Fees	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 1.13 <b>Transaction ID : SB17.6780</b>
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Merchant Account Fees	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	16.88
<b>TOTAL</b> 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 136 OF 189			
	<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) <b>A. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 1.13 <b>Transaction ID : SB17.6781</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 9.00 <b>Transaction ID : SB17.6782</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 112.50 <b>Transaction ID : SB17.6783</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	122.63
<b>TOTAL</b> 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 137 OF 189			
	<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) <b>A. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 4.50
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Transaction ID : SB17.6784
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 1.13
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Transaction ID : SB17.6785
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 2.25
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Transaction ID : SB17.6786
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7.88
<b>TOTAL</b> 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 138 OF 189			
	<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) <b>A. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 4.50
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Transaction ID : SB17.6787
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 11.25
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Transaction ID : SB17.6788
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 4.50
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Transaction ID : SB17.6789
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	20.25
<b>TOTAL</b> 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 139 OF 189			
	<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) <b>A. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 0.45 <b>Transaction ID : SB17.6790</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 45.00 <b>Transaction ID : SB17.6791</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 1.13 <b>Transaction ID : SB17.6792</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	46.58
<b>TOTAL</b> 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 140 OF 189			
	<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) <b>A. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 225.00
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Transaction ID : SB17.6793
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 11.25
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Transaction ID : SB17.6794
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 45.00
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Transaction ID : SB17.6795
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	281.25
<b>TOTAL</b> 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 141 OF 189			
	<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) <b>A. Piryx</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 4.50
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	<b>Transaction ID : SB17.6796</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement MM / DD / YYYY 08 / 31 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 11.25
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	<b>Transaction ID : SB17.6797</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement MM / DD / YYYY 08 / 31 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 22.50
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	<b>Transaction ID : SB17.6798</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	38.25
<b>TOTAL</b> 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 142 OF 189			
	<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) <b>A. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 11.25 <b>Transaction ID : SB17.6799</b>
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Merchant Account Fees	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 1.13 <b>Transaction ID : SB17.6800</b>
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Merchant Account Fees	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 1.13 <b>Transaction ID : SB17.6801</b>
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Merchant Account Fees	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	13.51
<b>TOTAL</b> 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 143 OF 189			
	<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) <b>A. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 11.25 <b>Transaction ID : SB17.6802</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 45.00 <b>Transaction ID : SB17.6803</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 11.25 <b>Transaction ID : SB17.6804</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	67.50
<b>TOTAL</b> 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 144 OF 189			
	<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) <b>A. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 11.25 <b>Transaction ID : SB17.6805</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 4.50 <b>Transaction ID : SB17.6806</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 11.25 <b>Transaction ID : SB17.6807</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	27.00
<b>TOTAL</b> 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 145 OF 189			
	<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) <b>A. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 11.25 <b>Transaction ID : SB17.6808</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 11.25 <b>Transaction ID : SB17.6809</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 11.25 <b>Transaction ID : SB17.6810</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	33.75
<b>TOTAL</b> 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 146 OF 189			
	<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) <b>A. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 22.50
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	<b>Transaction ID : SB17.6811</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 11.25
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	<b>Transaction ID : SB17.6812</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 11.25
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	<b>Transaction ID : SB17.6813</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	45.00
<b>TOTAL</b> 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 147 OF 189			
	<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) <b>A. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 18.00
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	<b>Transaction ID : SB17.6814</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 22.50
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	<b>Transaction ID : SB17.6815</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 9.00
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	<b>Transaction ID : SB17.6816</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	49.50
<b>TOTAL</b> 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 148 OF 189			
	<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) <b>A. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 4.50
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	<b>Transaction ID : SB17.6817</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 22.50
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	<b>Transaction ID : SB17.6818</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 11.25
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	<b>Transaction ID : SB17.6819</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	38.25
<b>TOTAL</b> 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 149 OF 189			
	<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) <b>A. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 33.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Transaction ID : SB17.6820
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 4.50
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Transaction ID : SB17.6821
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 0.45
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Transaction ID : SB17.6822
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	38.70
<b>TOTAL</b> 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 150 OF 189			
	<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) <b>A. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 45.00 <b>Transaction ID : SB17.6823</b>
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Merchant Account Fees	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 4.50 <b>Transaction ID : SB17.6824</b>
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Merchant Account Fees	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 2.25 <b>Transaction ID : SB17.6825</b>
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Merchant Account Fees	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	51.75
<b>TOTAL</b> 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 151 OF 189			
	<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) <b>A. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 11.25 <b>Transaction ID : SB17.6826</b>
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Merchant Account Fees	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 22.50 <b>Transaction ID : SB17.6827</b>
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Merchant Account Fees	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 22.50 <b>Transaction ID : SB17.6828</b>
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Merchant Account Fees	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	56.25
<b>TOTAL</b> 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 152 OF 189			
	<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) <b>A. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 4.50 <b>Transaction ID : SB17.6829</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 4.50 <b>Transaction ID : SB17.6830</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 1.13 <b>Transaction ID : SB17.6831</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10.13
<b>TOTAL</b> 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 153 OF 189			
	<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) <b>A. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 2.25 <b>Transaction ID : SB17.6832</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 11.25 <b>Transaction ID : SB17.6833</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 4.50 <b>Transaction ID : SB17.6834</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	18.00
<b>TOTAL</b> 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 154 OF 189			
	<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) <b>A. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 11.25 <b>Transaction ID : SB17.6835</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 4.50 <b>Transaction ID : SB17.6836</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 4.50 <b>Transaction ID : SB17.6837</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	20.25
<b>TOTAL</b> 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 155 OF 189			
	<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) <b>A. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 22.50
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	<b>Transaction ID : SB17.6838</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 11.25
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	<b>Transaction ID : SB17.6839</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 4.50
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	<b>Transaction ID : SB17.6840</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	38.25
<b>TOTAL</b> 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 156 OF 189			
	<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) <b>A. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 3.38
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Transaction ID : SB17.6841
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 9.00
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Transaction ID : SB17.6842
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 4.50
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Transaction ID : SB17.6843
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	16.88
<b>TOTAL</b> 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 157 OF 189			
	<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) <b>A. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 22.50
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	<b>Transaction ID : SB17.6844</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 112.50
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	<b>Transaction ID : SB17.6845</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 5.63
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	<b>Transaction ID : SB17.6846</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	140.63
<b>TOTAL</b> 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 158 OF 189			
	<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) <b>A. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 11.25 <b>Transaction ID : SB17.6847</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 4.50 <b>Transaction ID : SB17.6848</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 11.25 <b>Transaction ID : SB17.6849</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	27.00
<b>TOTAL</b> 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 159 OF 189			
	<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) <b>A. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 11.25 <b>Transaction ID : SB17.6850</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 4.50 <b>Transaction ID : SB17.6851</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 2.25 <b>Transaction ID : SB17.6852</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	18.00
<b>TOTAL</b> 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 160 OF 189			
	<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) <b>A. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 1.13 <b>Transaction ID : SB17.6853</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 22.50 <b>Transaction ID : SB17.6854</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 2.25 <b>Transaction ID : SB17.6855</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	25.88
<b>TOTAL</b> 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 161 OF 189			
	<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) <b>A. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 45.00
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	<b>Transaction ID : SB17.6856</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 2.25
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	<b>Transaction ID : SB17.6857</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 0.45
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	<b>Transaction ID : SB17.6858</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	47.70
<b>TOTAL</b> 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 162 OF 189			
	<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) <b>A. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 1.13 <b>Transaction ID : SB17.6859</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 2.25 <b>Transaction ID : SB17.6860</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 1.13 <b>Transaction ID : SB17.6861</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4.51
<b>TOTAL</b> 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 163 OF 189			
	<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) <b>A. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 1.13 <b>Transaction ID : SB17.6862</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 1.13 <b>Transaction ID : SB17.6863</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 11.25 <b>Transaction ID : SB17.6864</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	13.51
<b>TOTAL</b> 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 164 OF 189			
	<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) <b>A. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 1.13 <b>Transaction ID : SB17.6865</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 4.50 <b>Transaction ID : SB17.6866</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 22.50 <b>Transaction ID : SB17.6867</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Merchant Account Fees	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	28.13
<b>TOTAL</b> 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 165 OF 189			
	<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) <b>A. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2012
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 11.25 <b>Transaction ID : SB17.6868</b>
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Merchant Account Fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Public Opinion Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2012
Mailing Address 214 N Fayette St		Amount of Each Disbursement this Period 9000.00 <b>Transaction ID : SB17.6869</b>
City Alexandria	State VA Zip Code 22314	
Purpose of Disbursement Polling	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Public Opinion Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2012
Mailing Address 214 N Fayette St		Amount of Each Disbursement this Period 7500.00 <b>Transaction ID : SB17.6870</b>
City Alexandria	State VA Zip Code 22314	
Purpose of Disbursement Polling	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	16511.25
<b>TOTAL</b> 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 166 OF 189			
	<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) <b>A. Public Opinion Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2012
Mailing Address 214 N Fayette St		Amount of Each Disbursement this Period 7500.00 <b>Transaction ID : SB17.6871</b>
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Polling	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Public Opinion Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2012
Mailing Address 214 N Fayette St		Amount of Each Disbursement this Period 15000.00 <b>Transaction ID : SB17.6872</b>
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Polling	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Reliant</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2012
Mailing Address PO Box 650475		Amount of Each Disbursement this Period 50.00 <b>Transaction ID : SB17.6873</b>
City Dallas	State TX	
Zip Code 75265	Purpose of Disbursement Electric Bill	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	22550.00
<b>TOTAL</b> 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 167 OF 189			
	<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) <b>A. Reliant</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2012
Mailing Address PO Box 650475		Amount of Each Disbursement this Period 655.23
City Dallas	State TX	
Zip Code 75265	Purpose of Disbursement Electric Bill	<b>Transaction ID : SB17.6874</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Reliant</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2012
Mailing Address PO Box 650475		Amount of Each Disbursement this Period 648.35
City Dallas	State TX	
Zip Code 75265	Purpose of Disbursement Electric Bill	<b>Transaction ID : SB17.6875</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Jose Sanchez</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2012
Mailing Address 119 Water Oak Dr		Amount of Each Disbursement this Period 405.00
City League City	State TX	
Zip Code 77573	Purpose of Disbursement Salary	<b>Transaction ID : SB17.6925</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1708.58
<b>TOTAL</b> 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 168 OF 189			
	<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) <b>A. Jose Sanchez</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2012
Mailing Address 119 Water Oak Dr		Amount of Each Disbursement this Period 219.30 <b>Transaction ID : SB17.6934</b>
City League City	State TX	
Zip Code 77573	Purpose of Disbursement Mileage Reimbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Jose Sanchez</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2012
Mailing Address 119 Water Oak Dr		Amount of Each Disbursement this Period 360.00 <b>Transaction ID : SB17.6943</b>
City League City	State TX	
Zip Code 77573	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Jose Sanchez</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2012
Mailing Address 119 Water Oak Dr		Amount of Each Disbursement this Period 224.40 <b>Transaction ID : SB17.6956</b>
City League City	State TX	
Zip Code 77573	Purpose of Disbursement Mileage Reimbursement	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	803.70
<b>TOTAL</b> 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 169 OF 189			
	<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) <b>A. Jose Sanchez</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2012		
Mailing Address 119 Water Oak Dr			Amount of Each Disbursement this Period 745.00		
City League City	State TX	Zip Code 77573	Transaction ID : SB17.6969		
Purpose of Disbursement Salary		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Jose Sanchez</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2012		
Mailing Address 119 Water Oak Dr			Amount of Each Disbursement this Period 216.24		
City League City	State TX	Zip Code 77573	Transaction ID : SB17.6981		
Purpose of Disbursement Mileage Reimbursement		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Jose Sanchez</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2012		
Mailing Address 119 Water Oak Dr			Amount of Each Disbursement this Period 270.00		
City League City	State TX	Zip Code 77573	Transaction ID : SB17.6990		
Purpose of Disbursement Salary		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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1231.24
<b>TOTAL</b> 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 170 OF 189			
	<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) <b>A. Rebekah Shinkle</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2012
Mailing Address 1210 Elmhurst Trails Lane		Amount of Each Disbursement this Period 55.08
City Seabrook	State TX	
Zip Code 77586		
Purpose of Disbursement Mileage Reimbursement		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. Rebekah Shinkle</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2012
Mailing Address 1210 Elmhurst Trails Lane		Amount of Each Disbursement this Period 120.00
City Seabrook	State TX	
Zip Code 77586		
Purpose of Disbursement Salary		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. Rebekah Shinkle</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2012
Mailing Address 1210 Elmhurst Trails Lane		Amount of Each Disbursement this Period 72.93
City Seabrook	State TX	
Zip Code 77586		
Purpose of Disbursement Mileage Reimbursement		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: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	248.03
<b>TOTAL</b> 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 171 OF 189			
	<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) <b>A. Rebekah Shinkle</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2012
Mailing Address 1210 Elmhurst Trails Lane		Amount of Each Disbursement this Period 210.00 <b>Transaction ID : SB17.6948</b>
City Seabrook	State TX	
Purpose of Disbursement Salary		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Rebekah Shinkle</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2012
Mailing Address 1210 Elmhurst Trails Lane		Amount of Each Disbursement this Period 25.50 <b>Transaction ID : SB17.6958</b>
City Seabrook	State TX	
Purpose of Disbursement Mileage Reimbursement		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. Rebekah Shinkle</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2012
Mailing Address 1210 Elmhurst Trails Lane		Amount of Each Disbursement this Period 70.00 <b>Transaction ID : SB17.6974</b>
City Seabrook	State TX	
Purpose of Disbursement Salary		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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	305.50
<b>TOTAL</b> 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 172 OF 189			
	<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) <b>A. Rebekah Shinkle</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2012
Mailing Address 1210 Elmhurst Trails Lane		Amount of Each Disbursement this Period 11.73 <b>Transaction ID : SB17.6983</b>
City Seabrook	State TX	
Purpose of Disbursement Mileage Reimbursement	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Rebekah Shinkle</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2012
Mailing Address 1210 Elmhurst Trails Lane		Amount of Each Disbursement this Period 35.00 <b>Transaction ID : SB17.6993</b>
City Seabrook	State TX	
Purpose of Disbursement Salary	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Natalie Sifuentes</b>		Date of Disbursement MM / DD / YYYY 07 / 13 / 2012
Mailing Address 2004 Dawn Crest Court		Amount of Each Disbursement this Period 185.00 <b>Transaction ID : SB17.6927</b>
City League City	State TX	
Purpose of Disbursement Salary	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	231.73
<b>TOTAL</b> 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 173 OF 189			
	<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) <b>A. Natalie Sifuentes</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2012		
Mailing Address 2004 Dawn Crest Court			Amount of Each Disbursement this Period 74.97		
City League City	State TX	Zip Code 77573	Transaction ID : SB17.6935		
Purpose of Disbursement Mileage Reimbursement		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Natalie Sifuentes</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2012		
Mailing Address 2004 Dawn Crest Court			Amount of Each Disbursement this Period 195.00		
City League City	State TX	Zip Code 77573	Transaction ID : SB17.6945		
Purpose of Disbursement Salary		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Natalie Sifuentes</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2012		
Mailing Address 2004 Dawn Crest Court			Amount of Each Disbursement this Period 300.00		
City League City	State TX	Zip Code 77573	Transaction ID : SB17.6971		
Purpose of Disbursement Salary		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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	569.97
<b>TOTAL</b> 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 174 OF 189			
	<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) <b>A. Natalie Sifuentes</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2012		
Mailing Address 2004 Dawn Crest Court			Amount of Each Disbursement this Period 31.62		
City League City	State TX	Zip Code 77573	Transaction ID : SB17.6982		
Purpose of Disbursement Mileage Reimbursement		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Natalie Sifuentes</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2012		
Mailing Address 2004 Dawn Crest Court			Amount of Each Disbursement this Period 40.00		
City League City	State TX	Zip Code 77573	Transaction ID : SB17.6992		
Purpose of Disbursement Salary		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Silk Road Properties</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2012		
Mailing Address 13630 Beamer Rd #107			Amount of Each Disbursement this Period 1000.00		
City Houston	State TX	Zip Code 77089	Transaction ID : SB17.6878		
Purpose of Disbursement Lease		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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1071.62
<b>TOTAL</b> 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 175 OF 189			
	<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) <b>A. Silk Road Properties</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2012
Mailing Address 13630 Beamer Rd #107		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.6879</b>
City Houston State TX Zip Code 77089	Purpose of Disbursement Lease	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. South Shore Harbor Resort and Conference Center</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2012
Mailing Address 2500 S. Shore Blvd		Amount of Each Disbursement this Period 1019.55 <b>Transaction ID : SB17.6881</b>
City League City State TX Zip Code 77573	Purpose of Disbursement Meeting expenses	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Southwest Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2012
Mailing Address PO Box 36647-1CR		Amount of Each Disbursement this Period 281.70 <b>Transaction ID : SB17.6883</b>
City Dallas State TX Zip Code 75235	Purpose of Disbursement Travel	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2301.25
<b>TOTAL</b> 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 176 OF 189			
	<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) <b>A. Southwest Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2012
Mailing Address PO Box 36647-1CR		Amount of Each Disbursement this Period 893.60 <b>Transaction ID : SB17.6884</b>
City Dallas	State TX	
Zip Code 75235	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Southwest Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address PO Box 36647-1CR		Amount of Each Disbursement this Period 359.90 <b>Transaction ID : SB17.6885</b>
City Dallas	State TX	
Zip Code 75235	Purpose of Disbursement Travel-Midland	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Southwest Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2012
Mailing Address PO Box 36647-1CR		Amount of Each Disbursement this Period 314.10 <b>Transaction ID : SB17.6886</b>
City Dallas	State TX	
Zip Code 75235	Purpose of Disbursement Airline Tickets	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1567.60
<b>TOTAL</b> 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 177 OF 189	
	<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) <b>A. Spring Hill Suites</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2012	
Mailing Address 1101 Magnolia Ave			Amount of Each Disbursement this Period 273.70	
City Webster	State TX	Zip Code 77598	Transaction ID : SB17.6888	
Purpose of Disbursement Travel		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Tyler Stokley</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2012	
Mailing Address 17630 Heritage Bay Dr			Amount of Each Disbursement this Period 12.75	
City Webster	State TX	Zip Code 77598	Transaction ID : SB17.6917	
Purpose of Disbursement Mileage Reimbursement		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Tyler Stokley</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2012	
Mailing Address 17630 Heritage Bay Dr			Amount of Each Disbursement this Period 450.00	
City Webster	State TX	Zip Code 77598	Transaction ID : SB17.6931	
Purpose of Disbursement Salary		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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	736.45
<b>TOTAL</b> 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 178 OF 189	
	<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) <b>A. Tyler Stokley</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2012
Mailing Address 17630 Heritage Bay Dr		Amount of Each Disbursement this Period 234.60 <b>Transaction ID : SB17.6938</b>
City Webster	State TX	
Zip Code 77598	Purpose of Disbursement Mileage Reimbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Tyler Stokley</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2012
Mailing Address 17630 Heritage Bay Dr		Amount of Each Disbursement this Period 470.00 <b>Transaction ID : SB17.6949</b>
City Webster	State TX	
Zip Code 77598	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Tyler Stokley</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2012
Mailing Address 17630 Heritage Bay Dr		Amount of Each Disbursement this Period 168.30 <b>Transaction ID : SB17.6959</b>
City Webster	State TX	
Zip Code 77598	Purpose of Disbursement Mileage Reimbursement	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	872.90
<b>TOTAL</b> 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 179 OF 189			
	<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) <b>A. Tyler Stokley</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2012		
Mailing Address 17630 Heritage Bay Dr			Amount of Each Disbursement this Period 580.00		
City Webster	State TX	Zip Code 77598	Transaction ID : SB17.6976		
Purpose of Disbursement Salary		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For:			
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>B. Tyler Stokley</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2012		
Mailing Address 17630 Heritage Bay Dr			Amount of Each Disbursement this Period 224.40		
City Webster	State TX	Zip Code 77598	Transaction ID : SB17.6984		
Purpose of Disbursement Mileage Reimbursement		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For:			
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>c. Tyler Stokley</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2012		
Mailing Address 17630 Heritage Bay Dr			Amount of Each Disbursement this Period 330.00		
City Webster	State TX	Zip Code 77598	Transaction ID : SB17.6994		
Purpose of Disbursement Salary		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For:			
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1134.40
<b>TOTAL</b> 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 180 OF 189	
	<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) <b>A. TexRoc Computers</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2012
Mailing Address 2507 W. Bay Area Blvd #1590		Amount of Each Disbursement this Period 225.00
City Webster	State TX	
Zip Code 77598	Purpose of Disbursement Computer Tech Support	Transaction ID : SB17.6895
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Political Firm</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2012
Mailing Address 5555 Hilton Ave, Suite 201		Amount of Each Disbursement this Period 17403.61
City Baton Rouge	State LA	
Zip Code 70808	Purpose of Disbursement Mail Production/Consulting	Transaction ID : SB17.6896
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. The Political Firm</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2012
Mailing Address 5555 Hilton Ave, Suite 201		Amount of Each Disbursement this Period 29412.23
City Baton Rouge	State LA	
Zip Code 70808	Purpose of Disbursement Mail/Automated Calls	Transaction ID : SB17.6897
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	47040.84
<b>TOTAL</b> 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 181 OF 189			
	<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										
<b>A. The Political Firm</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>21</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	07		21		2012
M M	/	D D	/	Y Y Y Y								
07		21		2012								
Mailing Address 5555 Hilton Ave, Suite 201		Amount of Each Disbursement this Period										
City	State											
Baton Rouge	LA	70808										
Purpose of Disbursement	Category/Type	14237.59										
Direct Mail												
Candidate Name	Transaction ID : SB17.6898											
Office Sought:	Disbursement For:											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>B. The Political Firm</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>28</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	07		28		2012
M M	/	D D	/	Y Y Y Y								
07		28		2012								
Mailing Address 5555 Hilton Ave, Suite 201		Amount of Each Disbursement this Period										
City	State											
Baton Rouge	LA	70808										
Purpose of Disbursement	Category/Type	14417.59										
Direct Mail												
Candidate Name	Transaction ID : SB17.6899											
Office Sought:	Disbursement For:											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>C. The Political Firm</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>17</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	08		17		2012
M M	/	D D	/	Y Y Y Y								
08		17		2012								
Mailing Address 5555 Hilton Ave, Suite 201		Amount of Each Disbursement this Period										
City	State											
Baton Rouge	LA	70808										
Purpose of Disbursement	Category/Type	8501.75										
Automated Phones/Literature												
Candidate Name	Transaction ID : SB17.6900											
Office Sought:	Disbursement For:											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	37156.93
<b>TOTAL</b> 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 182 OF 189			
	<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) <b>A. The Political Firm</b>		Date of Disbursement
Mailing Address 5555 Hilton Ave, Suite 201		MM / DD / YYYY 08 / 21 / 2012
City Baton Rouge	State LA	Zip Code 70808
Purpose of Disbursement Political Consulting/Travel Reimbursement	Amount of Each Disbursement this Period 4752.61	
Candidate Name	Transaction ID : SB17.6901	
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:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. The Political Firm</b>		Date of Disbursement
Mailing Address 5555 Hilton Ave, Suite 201		MM / DD / YYYY 09 / 10 / 2012
City Baton Rouge	State LA	Zip Code 70808
Purpose of Disbursement Political Consulting/Travel Reimbursement	Amount of Each Disbursement this Period 3391.96	
Candidate Name	Transaction ID : SB17.6902	
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:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. The Political Firm</b>		Date of Disbursement
Mailing Address 5555 Hilton Ave, Suite 201		MM / DD / YYYY 09 / 17 / 2012
City Baton Rouge	State LA	Zip Code 70808
Purpose of Disbursement Production Costs	Amount of Each Disbursement this Period 15000.00	
Candidate Name	Transaction ID : SB17.6903	
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:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	23144.57
<b>TOTAL</b> 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 183 OF 189	
	<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) <b>A. Truman - Taylor Insurance Agency, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2012
Mailing Address 1212 Winding Way		Amount of Each Disbursement this Period 786.83 <b>Transaction ID : SB17.6905</b>
City Friendswood State TX Zip Code 77546	Purpose of Disbursement Office Insurance	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Verizon Southwest</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2012
Mailing Address PO Box 920041		Amount of Each Disbursement this Period 304.14 <b>Transaction ID : SB17.6907</b>
City Dallas State TX Zip Code 75392	Purpose of Disbursement Phone Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Verizon Southwest</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2012
Mailing Address PO Box 920041		Amount of Each Disbursement this Period 303.01 <b>Transaction ID : SB17.6908</b>
City Dallas State TX Zip Code 75392	Purpose of Disbursement Phone Service	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1393.98
<b>TOTAL</b> 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 184 OF 189			
	<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) <b>A. Courtney Weaver</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2012
Mailing Address 104 Hudson Pointe Blvd		Amount of Each Disbursement this Period 1125.00
City Queensbury	State NY	
Zip Code 12804	Purpose of Disbursement Salary	Transaction ID : SB17.7007
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Courtney Weaver</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address 104 Hudson Pointe Blvd		Amount of Each Disbursement this Period 2250.00
City Queensbury	State NY	
Zip Code 12804	Purpose of Disbursement Salary	Transaction ID : SB17.7010
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3375.00
<b>TOTAL</b> This Period (last page this line number only).....	414997.43



**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 185 OF 189			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**WEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Valsource International LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2012
Mailing Address 9415 New Century Dr		Amount of Each Disbursement this Period 1000.00
City Pasadena	State TX Zip Code 77507	
Purpose of Disbursement Refund	Candidate Name	Transaction ID : SB20A.6906
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	1000.00

**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/10.4842

**WEBER FOR CONGRESS**

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

**[PERSONAL FUNDS]**

Election: 2012

**RANDY WEBER**

Primary

General

Other (specify) ▼

Mailing Address

1100 Gulf Freeway  
Suite 100

City State ZIP Code

League City TX 77573

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

100000.00

0.00

100000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M 12 / D 30 / Y 2011

M / D / Y None

0.00 % (apr)

Yes  No

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

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

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

100000.00

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

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

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

NAME OF COMMITTEE (In Full) **WEBER FOR CONGRESS** Transaction ID : **SC/10.5556**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>RANDY WEBER</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1100 Gulf Freeway Suite 100		

City	State	ZIP Code
League City	TX	77573

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1500.00	0.00	1500.00

<b>TERMS</b>		Date Incurred	Date Due	Interest Rate	Secured:
M 05	D 07	Y 2012 Y	M M / D D / Y None	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	1500.00
<b>TOTALS</b> 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/10.5920**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>RANDY WEBER</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff _____
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Mailing Address 1100 Gulf Freeway Suite 100	City League City	State TX	ZIP Code 77573
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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 06 / D 01 / Y 2012	Date Due M / D / Y None	Interest Rate 0.00 % (apr)	Secured: <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)  Mailing Address  City State ZIP Code	Name of Employer  Occupation  Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)  Mailing Address  City State ZIP Code	Name of Employer  Occupation  Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)  Mailing Address  City State ZIP Code	Name of Employer  Occupation  Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)  Mailing Address  City State ZIP Code	Name of Employer  Occupation  Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional).....	25000.00
<b>TOTALS</b> 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]**

Election: 2012

**RANDY WEBER**

Primary

General

Other (specify) ▼

Runoff \_\_\_\_\_

Mailing Address

1100 Gulf Freeway  
Suite 100

City

State

ZIP Code

League City

TX

77573

Original Amount of Loan

100000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100000.00

**TERMS**

Date Incurred

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

Date Due

M M / D D / Y Y Y 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)..... ▶

100000.00

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

226500.00

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