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FEC FORM 1

STATEMENT OF ORGANIZATION

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| | <u> </u> | · · · · · · · · · · · · · · · · · · · | Jan | | FEIG WANN CENTER |
| 1. NAME OF COMMITTEE (in | n fuli) | (Check if name is changed) | Example:If typing, over the lines. | type 12FE4M | 5 |
| Weber for | Congre | ess. | | | |
| ADDRESS (number a | and street) | One Greenwa | ay Plaza Sui | te 225 | |
| (Check if a is changed) | ddress) | Houston | | TX | 77046 |
| | | | CITY | STATE | ZIP CODE |
| COMMITTEE'S E-MA | address | s (Please provide only one c լ campaigդ@r | | prg | |
| COMMITTEE'S WEB | B PAGE ADDI | | | | |
| (Check if is change | | _l www.RandyV L | Veber.org | | |
| 2. DATE | 14° | 2011 | | | |
| 3. FEC IDENTIFIC | CATION NUI | ABER C | | | |
| 4. IS THIS STATE | MENT X | NEW (N) OR | AMENDE | ED (A) | |
| I certify that I have of | | Statement and to the bes | st of my knowledge and | d belief it is true, corre | ct and complete. |
| Signature of Treasure | • | Bobut . | Nolum | Date 0 | 9" (14°) (2011) |
| NOTE: Submission of | | us, or incomplete information | • | - | to the penalties of 2 U.S.C. §437g. S. |
| Office Use Only | | | For further Info Federal Election Toll Free 800-42 Local 202-694-1 | 4-9530 | FEC FORM 1 (Revised 02/2009) |

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| | FEC For | rm 1 (Revised 02/2009) | Page 2 |
|-----|----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|
| | | ОММІТТЕЕ | |
| Ca | ındidate | Committee: | |
| (a) | \times | This committee is a principal campaign committee. (Complete the candidate information below.) | |
| (b) | | This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.) | elete the candidate |
| | me of ndidate | Randy Weber | |
| | ndidate rty Affiliation | Office Sought: House Senate President | State TX District 14 |
| (c) | | This committee supports/opposes only one candidate, and is NOT an authorized committee. | |
| | me of ndidate | | |
| Pa | rty Con | nmittee: | _ |
| (d) | | | Democratic, Republican, etc.) Party. |
| Po | litical A | ction Committee (PAC): | |
| (e) | | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.) | nected organization is a: |
| | | Corporation Corporation w/o Capital Stock | Labor Organization |
| | | Membership Organization Trade Association | Cooperative |
| | | In addition, this committee is a Lobbyist/Registrant PAC. | |
| (f) | | This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee) | gregated fund or party |
| | | In addition, thie committee is a Lobbyist/Registrant PAC. | |
| | | In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.) | |
| Joi | int Fund | raising Representative: | |
| (g) | | This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, at least one of which is an authorized committee of a federal candidate. | o or more political |
| (h) | | This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate. | o or more political |
| | Com | mittees Participating in Joint Fundraiser | |
| | 1. | FEC ID number | |
| | 2. | FEC ID number | |
| | 3. | FEC ID number | |
| | 4. | FEC ID number | |

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| Weber for Congress 6. Name or Any Conhected Organization, Affiliated Committee, Joint Fundralsing Representative, or Leadership PAC Sponsor None | FEC Form 1 | (Revised 02/2009) | Page 3 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|--------------------------------------------------------------------------------------------|---------------------|
| Name or Any Connected Organization, Affiliated Committee, Joint Fundralsing Representative, or Leadership PAC Sponsor None | | | |
| Mailing Address CITY STATE ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor Custodian of Records: Identify by name, address (phone number – optional) and position of the person in possession of committee books and records. Full Name Allen Blakemore Mailing Address Qne Greenway Plaza Suite 225 Title or Position CITY STATE ZIP CODE Agent Telephone number 713 1 526 - 3399 Treasurer: List the name and address (phone number – optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer). Full Name Rob Nolen One Greenway Plaza Suite 225 Houston Title or Position CITY STATE ZIP CODE | Weber for (| Congress | |
| Mailing Address CITY STATE ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records. Full Name Address One Greenway Plaza Suite 225 Houston Title or Position CITY STATE ZIP CODE Agent Telephone number (713, 1-526, 1-13399) 3. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer). Full Name of Treasurer Mailing Address One Greenway Plaza Suite 225 Houston Title or Position CITY STATE ZIP CODE | 6. Name of Any Cor | nnected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadershi | p PAC Sponsor |
| Mailing Address CITY STATE ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records. Full Name Address One Greenway Plaza Suite 225 Houston Title or Position CITY STATE ZIP CODE Agent Telephone number (713, 1-526, 1-13399) 3. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer). Full Name of Treasurer Mailing Address One Greenway Plaza Suite 225 Houston Title or Position CITY STATE ZIP CODE | None | | 11111 |
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| books and records. Full Name Allen Blakemore Mailing Address One Greenway Plaza Suite 225 Houston TX 77046 Title or Position CITY STATE ZIP CODE Agent Telephone number 713 - 526 - 3399 3. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer). Full Name Rob Nolen One Greenway Plaza Suite 225 Houston TX 77046 TX 77046 TX 77046 TX 77046 TX 77046 TX 77046 TX TX TX TX TX TX TX | Relationship: | Connected Organization Affiliated Committee Joint Fundraising Representative Lead | lership PAC Sponsor |
| books and records. Full Name Allen Blakemore Mailing Address One Greenway Plaza Suite 225 Houston TX 77046 Title or Position CITY STATE ZIP CODE Agent Telephone number 713 - 526 - 3399 3. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer). Full Name Rob Nolen One Greenway Plaza Suite 225 Houston TX 77046 TX 77046 TX 77046 TX 77046 TX 77046 TX 77046 TX TX TX TX TX TX TX | | | |
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| Mailing Address One Greenway Plaza Suite 225 Houston Title or Position CITY STATE ZIP CODE Agent Telephone number Total phone number Tall phone number Total phone number Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer). Full Name of Treasurer Mailing Address One Greenway Plaza Suite 225 Houston TX T77046 TITY STATE ZIP CODE Title or Position | 1.1 | Allen Blakemore | |
| Title or Position CITY STATE ZIP CODE Agent Telephone number 713 -526 -3399 Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer). Full Name of Treasurer Mailing Address One Greenway Plaza Suite 225 Houston CITY STATE ZIP CODE | Full Name | | |
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| Title or Position CITY STATE ZIP CODE Agent Telephone number 713 - 526 - 3399 3. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer). Full Name of Treasurer Mailing Address One Greenway Plaza Suite 225 Houston CITY STATE ZIP CODE | | 77040 | |
| Agent Telephone number Telep | | [Houston] [IX] [7/046 | <u>'</u> |
| Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer). Full Name of Treasurer Mailing Address One Greenway Plaza Suite 225 Houston CITY STATE ZIP CODE | Title or Position | CITY STATE Z | IP CODE |
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| any designated agent (e.g., assistant treasurer). Full Name of Treasurer Mailing Address One Greenway Plaza Suite 225 Houston CITY STATE ZIP CODE | <u> </u> | . reiepnone number | |
| One Greenway Plaza Suite 225 Houston CITY STATE Title or Position | | | e and address of |
| Houston Title or Position | Ł l | Rob Nolen | |
| Houston Title or Position | Mailing Address | One Greenway Plaza Suite 225 | |
| CITY STATE ZIP CODE Title or Position | | 1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| CITY STATE ZIP CODE Title or Position | | Houston 177046 | . 1-1 |
| | | | |
| [Treasurer Telephone number Telephone nu | Title or Position | Tolenhana number | , - ! |

| FEC Form | n 1 (Revised 02/2009) | | Page 4 |
|-------------------------------------|-----------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|------------------------------|
| | _ | | |
| Full Name of Designated Agent | Jerad Najvar | | |
| Mailing Address | One Greenway Plaza Suite 225 | <u>, , , , , , , , , , , , , , , , , , , </u> | |
| | | | |
| | [Houston] спү | STATE | 77046 - LIP CODE |
| Title or Position | reasurer Teleph | one number [28 | 1 - [404] - [4696 |
| | Depositories: List all banks or other depositories in which the oxes or maintains funds. Depository, etc. Bank of Houston | committee deposits | funds, holds accounts, rents |
| Mailing Address | 4120 Bellaire Boulevard | | |
| Walling Address | 1 | | |
| | [Houston, | TX | [77025] - [, , , |
| | CITY | STATE | ZIP CODE |
| Name of Bank, | Depository, etc. | | ···· |
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| Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DO The FEC added this page to the end of this filing to indicate ho | · · |
|----------------------------------------------------------------------------------------------------------------------------------------|--------------------|
| Hand Delivered | Date of Receipt |
| USPS First Class Mail | Postmarked |
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| Overnight Delivery Service (Specify): FEd TYP | Shipping Date |
| Next Business [| Day Delivery |
| Received from House Records & Registration Office | Date of Receipt |
| Received from Senate Public Records Office | Date of Receipt |
| Received from Electronic Filing Office | Date of Receipt |
| Other (Specify): | eipt or Postmarked |
| Clup | 9/15/11 |
| PREPARER (3/2005) | DATE PREPARED |